



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GiA Records Management Centre established by the General Insurance Association of Singapore (GiA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	09/12/2020 17:15 (SGT)
Date of Accident	08/12/2020 08:25 (SGT)
Exact Location of Accident	Upper Bukit Timah Rd, Singapore
Additional Location Information	LAMP POST NUMBER: 232
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV7129X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHAN SENG TAH
NRIC No	SXXXX966A
Email Address	ecst86@gmail.com
Mobile Phone No	(Phone) +65-98536811
Alternative Phone No	+65-98536811

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Lonpac
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	Z20VP05027548
Cover Note Number	-

DRIVER

Name of Driver	CHAN SENG TAH
NRIC No	SXXXX966A

Date Of Driving Pass	14/04/1993
Driving experience	27 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98536811
Alt. Phone Number	+65-98536811
Email Address	ecst86@gmail.com
Address	36 ROSEWOOD DRIVE
Address complement	#04-12
Postcode	737874
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PUEH JYE HUEY
Gender	Female

PASSENGER 2

Name	NG SAI GOON
Gender	Female

PASSENGER 3

Name	SANDAR NWE
Gender	Female

PASSENGER 4

Name	PUEH JYE FANG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of Intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20201208/7054

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGM9966C
Vehicle Manufacturer	Nissan
Vehicle Model	Qashqai
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NURLIYANA BTE AHKARUNHAM
NRIC No	SXXXX280Z
Contact Number	(Phone) +65-97417237
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMC2082E
Vehicle Manufacturer	Toyota
Vehicle Model	Sienta
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KHOO SEOW CHARM
NRIC No	SXXXX150H
Contact Number	(Phone) +65-93827319
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

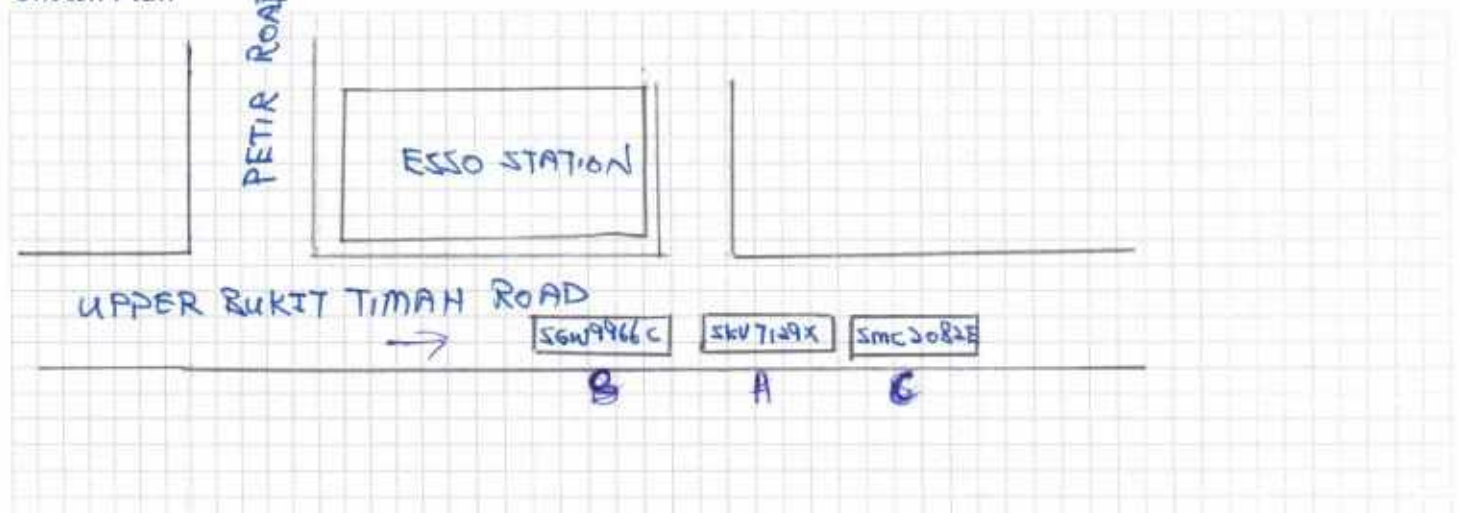
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time
Lin 08/12/2020
4:42 pm

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
gm 09/12/2020

Sketch Plan



Describe Circumstances of the Accident

REFER TO POLICE REPORT 7/20201208/7034

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time 08/12/2020 4:42pm

Driver's Signature (If driver is not the policyholder) / Date
& Time

Witnessed by Reporting Centre
Personnel 09/12/2020

ACCIDENT STATEMENT

ACCIDENT DATE: (08 / 12 / 2029) (DD/MM/YYYY), TIME: (08 : 25) (HH:MM)

LOCATION: Upper Bukit Timah Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKV 7129X
b) INSURANCE COMPANY: LOHAC
c) POLICY NUMBER: 220VP05027548
d) POLICY TYPE: (COMPREHENSIVE / ~~THIRD PARTY~~ / ~~THIRD PARTY FIRE & THEFT~~)
e) MAKE & MODEL: SUBARU / FORESTER
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / ~~COMMERCIAL~~ / ~~MOTORCYCLE~~)
h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: CHAN SENG TAN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 52591966A CONTACT: 98536811
c) ADDRESS: 63, ROSEWOOD DRIVE, #04-12, S C 737874

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: (13 / 02 / 1965) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 14/04/2003

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: RELATIVE

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMC 2082E MODEL: TOYOTA SIENNA (C)
b) DRIVER'S NAME: KHOE SEOW CHARM
c) NRIC/FIN/PASSPORT: 56847150H CONTACT: 93827319

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SGM 9966C MODEL: NISSAN QASHQAI
e) DRIVER'S NAME: NURLIYANA BTE AHKARUNHAM
f) NRIC/FIN/PASSPORT: 58705280Z CONTACT: 97417337 (B)

Email = ecst86@gmail.com

VIDEO



**SINGAPORE
POLICE FORCE**



T/20201208/7054

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 5

Report No. T/20201208/7054

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/12/2020 23:46		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHAN SENG TAH			Address: 63 ROSEWOOD DRIVE #04-12 SINGAPORE 737874		
ID Type / ID No.: NRIC NO / S2591966A			Contact No.: Home/Office: Mobile: 98536811		
Nationality: SINGAPORE CITIZEN			Email: ecst86@gmail.com		
Sex: Male	Age: 55	Date of Birth: 13/02/1965	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Civil engineer (general)			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others:	Drink Drive: No	Date/Time of Accident: 08/12/2020 08:25	Type of Location: Straight Road
Location: UPPER BUKIT TIMAH ROAD				
Lamp Post Number: 232				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: stopped vehicles collided by moving vehicle from rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGM9966C	Car	NISSAN	QASHQAI	Blue	Slightly Damaged	1
SKV7129X	Car	SUBARU	forester	Black	Slightly Damaged	4
SMC2082E	Car	TOYOTA	SIEN	Grey	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20201208/7054

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

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Report No. T/20201208/7054

CONTINUATION OF REPORT

Passenger			
Name	SANDAR NWE	ID No.	G6545972N
Related Vehicle	SKV7129X (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	CHAN SENG TAH	ID No.	S2591966A
Related Vehicle	SKV7129X (Car)	Contact No.	98536811
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Passenger			
Name	PUEH JYE FANG	ID No.	S6836789
Related Vehicle	SKV7129X (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	KHOO SEOW CHARM	ID No.	S6847150H
Related Vehicle	SMC2082E (Car)	Contact No.	93827319
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	08/12/2020	Date	08/12/2020
No. of Days granted Medical Leave	NIL	Degree of	Slight



**SINGAPORE
POLICE FORCE**



T/20201208/7054

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201208/7054

CONTINUATION OF REPORT

Brief Details.

I was travelling with 4 passengers in my car (SKV7129X), turning from Choa Chu Kang Road into Upper Bukit Timah Road. At the slip road in front of ESSO station, traffic was heavy & slow. I stopped behind vehicle SMC2082E. Suddenly a vehicle SGM9966C hit my car from behind, and the collision momentum pushed my car forward & hit the car (SMC2082E) in front. All drivers from the 3 cars involved alighted to take photos and exchanged contact details and IDs. Everyone looked fine, including my 89-year old passenger. All other 2 drivers did not show any sign of physical injuries, nor did they complain about any discomfort during the interaction. The drivers involved drove off after sufficiently exchanged particulars. However, in the afternoon, the car owner of SMC2082E (who wasn't the driver at the time of accident) contacted me and informed that the driver (Miss Khoo Seow Charm) sustain some injury without giving details. I was told she has made police report and was advised to make the same.



**SINGAPORE
POLICE FORCE**



T/20201208/7054

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201208/7054

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
08/12/2020 23:46

Classification Of Case:

**LONPAC INSURANCE BHD (S98FC5635C)**

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.

Tel: (65) 6200 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F04005635-C

MX1

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE.
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).
ROAD TRANSPORT ACT 1987 (MALAYSIA).
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA).
THE MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z20VP05027548

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

SUBARU FORESTER 2.0
- SKV7129X

2. Name of Policy Holder

CHAN SENG TAH

3. Effective Date of the Commencement of Insurance
for the purpose of the Act

30/09/2020

4. Date of Expiry of the Insurance

29/09/2021

5. Persons or Classes of Persons entitled to drive

(A) THE POLICYHOLDER (B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS/HER PERMISSION

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess :

S\$ 500.00(SECTION 1) INSURED / NAMED DRIVERS

S\$ 2,500.00(SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00(SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00WINDSCREEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

AN ADDITIONAL EXCESS OF \$500 FOR 2ND & SUBSEQUENT CLAIM DURING THE POLICY PERIOD (FOR COMPREHENSIVE COVER ONLY).

Condition :

ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE
(Singapore Branch)User ID: EMOTORHAZE
Date Issued: 08/09/2020

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SKV 7129X Vehicle Registration No: SN0820C 90009
Name (as shown in NRIC) : PAUL CLAREN SANKU JOY NRIC/FIN/Passport No : S2591966A
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 98536811
Email Address : _____
Date of Accident : 08/12/2000 Time of Accident : 08:28
Place of Accident : UPPER PARK 7 JIMMOR ROAD
Insurance Company : LOMPAC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ONE OF THE PASSENGER NAME OF INSIDE INSURED VEHICLE
TO RUKH SYE FONG

Policyholder / Driver's Signature
Date: _____

Reporting Centre Personnel's Signature
Name: _____