



## 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	25/03/2021 12:52 (SGT)
Date of Accident	03/03/2021 14:30 (SGT)
Exact Location of Accident	40 King's Dr, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GQ6848J
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SWEE MENG ELECTRIC SERVICE
Company Reg No	0XXXX900D
Email Address	fullstop423@gmail.com
Mobile Phone No	(Phone) +65-96239738
Alternative Phone No	+65-96239738

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

#### INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	Z/20/VC05/005123
Cover Note Number	-

#### DRIVER

Name of Driver	TAN WOON MENG
NRIC No	SXXXX872G

Date Of Birth	13/12/1964
Occupation	Outdoor
Date Of Driving Pass	01/06/1984
Driving experience	36 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96239738
Alt. Phone Number	-
Email Address	fullstop423@gmail.com
Address	125 EVERITT ROAD
Address complement	-
Postcode	428650
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

#### 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	SMV5527U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode		-
Insurance Company Name		-
Nature Of Damage		-
Details of property damaged in accident		-
No. Of Passenger (Including Driver)		-

## SKETCH PLAN

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#### 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

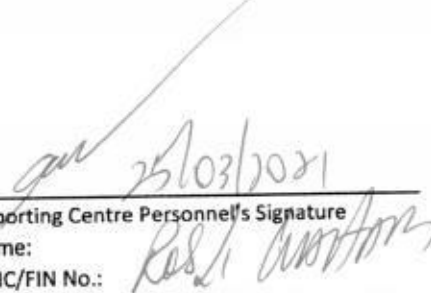
0020

SWEE MENG ELECTRIC SERVICE

  
SOLE PROPRIETOR

Policyholder's Signature Date  
& Time:

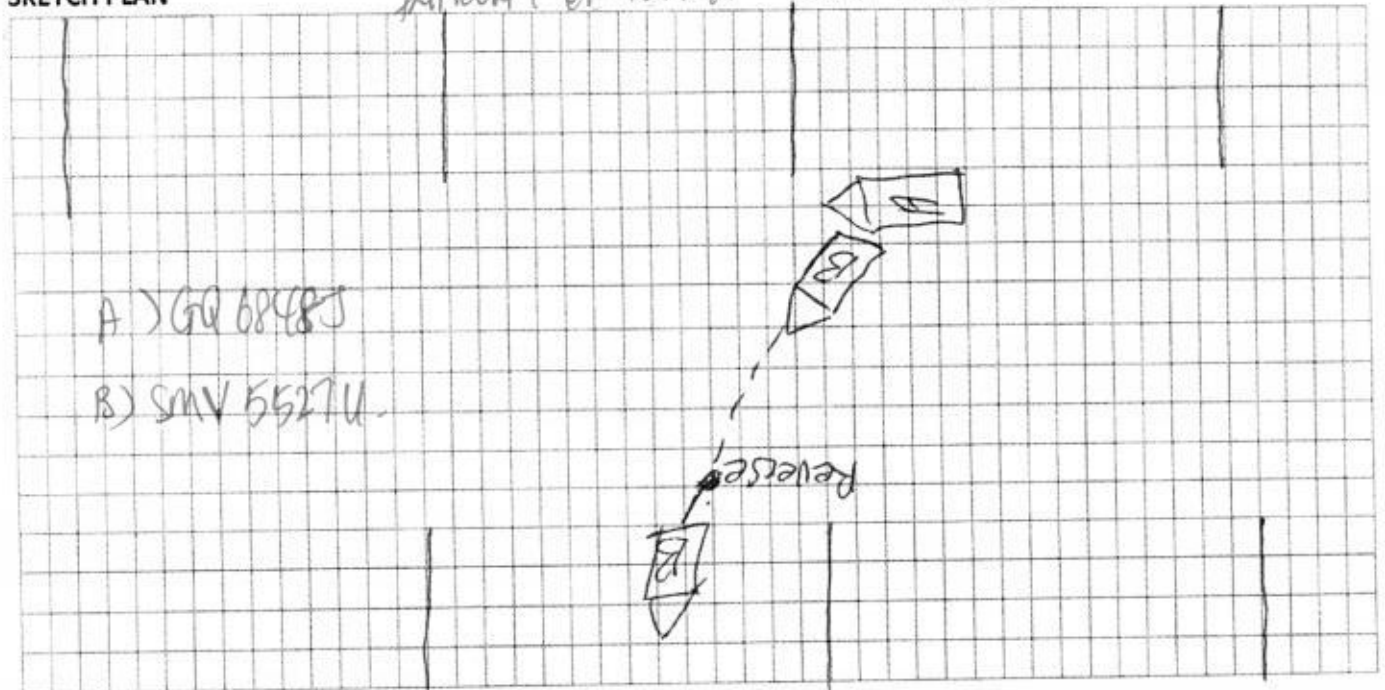
Driver's Signature  
(If driver is not the policyholder) Date  
& Time:

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# SKETCH PLAN

IMPROV OF NO: 40 KING'S DRIVE



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On mentioned date and time, my Lorry bearing GQ 6848J was parked in front of house Unit No 40 of King's Drive. Suddenly, I heard a loud bang sound. I rush out to see, I saw a lady driver bearing SMV 5527U is reversing her car out from one of the unit opposite the lane of unit NO 40 King's Drive.

I notice my Lorry front bumper & mirror is damaged. The front of my lorry is dented.

The lady driver wrote me a note admitting she hit my lorry.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

SOLE PROPRIETOR

Policyholder's Signature Date  
& Time:

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

### Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 03 / 03 / 2021 (dd/mm/yy)

Time of Accident: 14 : 30 (24-HR-FORMAT)

Vehicle No.: GQ 6848J Vehicle Make & Model: \_\_\_\_\_

Exact location of Accident: Infront of No 40 King's Drive

Policyholder's Name / IC No.: Swee Meng Electric Service UEN: 05885900D

Driver's Name / IC No.: Tan Woon Meng 916408726 (As Above) ☐

Driver's Contact No.: 96239738 Company Contact No (Company Veh Only): \_\_\_\_\_

Driver's Address: \_\_\_\_\_

Email address: fullstop423@gmail.com Insurance Company: Lonpac

Relationship between Owner & Driver: (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: \_\_\_\_\_

What do you wish to claim? (Please **TICK** one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle  
Was being used at time of accident?

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

☐ Private use / ☒ Work purpose

\*No. of Passengers (Including Driver): 0

\*Passanger Name: \_\_\_\_\_ Gender: **Male / Female** \*Passanger  
Name: \_\_\_\_\_ Gender: **Male / Female**

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: \_\_\_\_\_

Was there any video captured by your Car Camera?

☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: \_\_\_\_\_

Injuries Sustain: \_\_\_\_\_ Injured Person in Which Vehicle: \_\_\_\_\_

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: \_\_\_\_\_

### The Other Party(s) Details:

1. Driver's Name / IC No: \_\_\_\_\_ Vehicle No: SMV 5527U

Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

2. Driver's Name / IC No (If Any): \_\_\_\_\_ Vehicle No: \_\_\_\_\_

Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred Workshop Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

**LONPAC INSURANCE BHD** (S98FC5635C)

(Incorporated in Malaysia)  
Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 190555.  
Tel: (65) 6250 7368 Fax: (65) 6295 3767 Website: www.lonpac.com.sg  
GST Reg No.: P0-0005835-C

MZ300

**CERTIFICATE OF INSURANCE***Insured's Copy*

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. : Z/20/VC05/005123

Type of Cover : THIRD PARTY FIRE  
AND THEFT

Index Mark and Vehicle Registration Number

NISSAN CABSTAR 3.0 5M/T ABS 2DR  
2WD 3.4T  
- GQ 6848J

Name of Policy Holder

SWEE MENG ELECTRIC SERVICE

Effective date of the Commencement of Insurance  
for the purpose of the Act.

30/04/2020

Date of Expiry of the Insurance

29/04/2021

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/THEIR 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.

Limitations as to use

USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. USE FOR THE CARRIAGE OF  
PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S  
BUSINESS. USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES. THE POLICY DOES NOT  
COVER:- USE FOR HIRE OR REWARD OR FOR RACING, PACEMAKING, RELIABILITY TRIAL OR  
SPEED TESTING. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE  
DISABLED MECHANICALLY PROPELLED VEHICLE.

ess : NOT APPLICABLE

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  
this policy.I 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.

H.P. Owner

*Amek*CHIEF EXECUTIVE  
(Singapore Branch)Issued  
01-03-2020