

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	18/08/2021 15:16 (SGT)
Date of Accident	17/08/2021 18:28 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS BEFORE ENG NEO EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5547Y
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SOON HUP HUAT CONSTRUCTION PTE LTD
Company Reg No	2XXXXX206M
Email Address	paullingkwongsiong@hotmail.com
Mobile Phone No	(Phone) +65-81681130
Alternative Phone No	(Office) +65-62622776

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/21/VC00/111399
Cover Note Number	-

DRIVER

Name of Driver	LING KWONG SIONG
NRIC No	SXXXX645B

Date Of Birth	26/07/1985
Occupation	Outdoor
Date Of Driving Pass	26/08/2011
Driving experience	10 YEARS
Gender	Male
Mobile Number	(Phone) +65-81681130
Alt. Phone Number	-
Email Address	paullinkwongsiong@hotmail.com
Address	BLK 504 YISHUN STREET 51 #07-148
Address complement	-
Postcode	764504
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	11
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SUJAYET
Gender	Male

PASSENGER 2

Name	MYINT HTAY
Gender	Male

PASSENGER 3

Name	KHUN CHIT THAW
Gender	Male

PASSENGER 4

Name	CHIT MIN KO
Gender	Male

PASSENGER 5

Name	MUYHIAH RAMACHANDRAN
Gender	Male

PASSENGER 6

Name	ZAW MIN NAING
Gender	Male

PASSENGER 7

Name	KYAW ZAYA
Gender	Male

PASSENGER 8

Name	MIAH HASHEM
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Gender	Male
PASSENGER 9	
Name	ZAW WIN TUN
Gender	Male
PASSENGER 10	
Name	ISLAM SIRAJUL
Gender	Male

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	SLS5574K
Vehicle Manufacturer	Toyota
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBH363L
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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.



20/4

18/08/2021

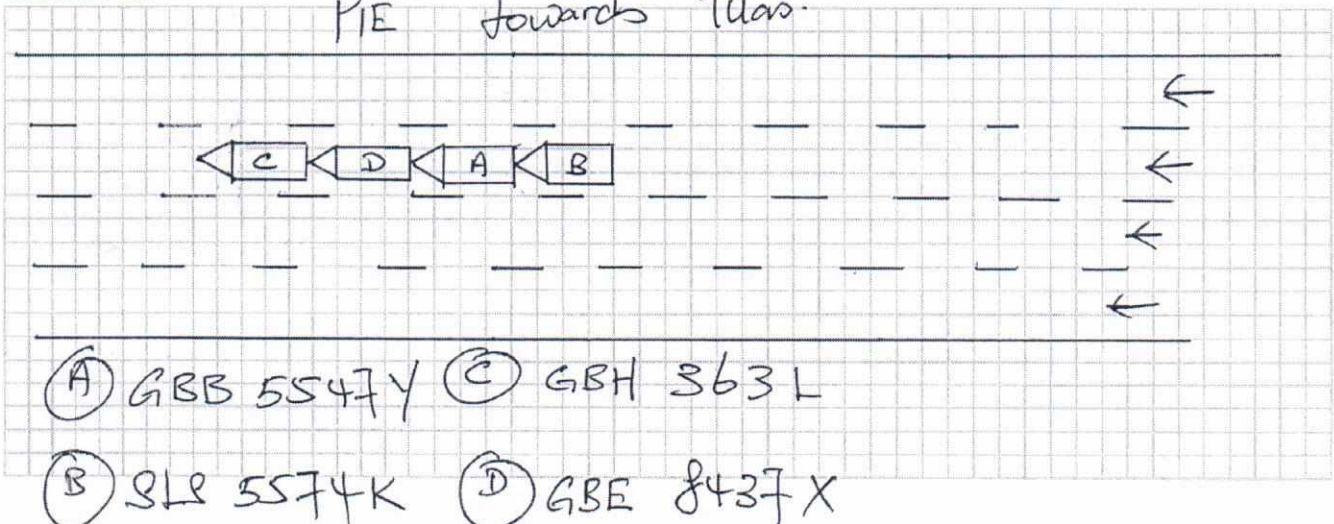
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

PIE towards Tuas.



DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBE8437X
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LING KWONG SIONG
Gender	Male
Phone No	(Phone) +65-81681130
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	GBB5547Y
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	SUJAYET
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	GBB5547Y
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	MYINT HTAY
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	GBB5547Y
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

INJURED 4

Name of injured person	KHUN CHIT THAW
Gender	Male
Phone No	-
Address	-

Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

-
-
SLIGHT INJURY
GBB5547Y
No
No

INJURED 10

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

ZAW WIN TUN
Male
-
-
-
-
SLIGHT INJURY
GBB5547Y
No
No

INJURED 11

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

ISLAM SIRAJUL
Male
-
-
-
-
SLIGHT INJURY
GBB5547Y
No
No

Describe Circumstances of the Accident

On the stated date and time, I was driving along PIB towards Teas on lane 2. Traffic was heavy and when I realised that the lorry in front of my veh had jammed brake and hit onto a veh, I immediately apply my brake. As I was about to stop, I left a very great impact from my veh rear portion and caused my veh to surge forward and hit onto the front veh. I then got down my veh and realised that I was involved in a 4-veh collision. The impact was so strong that all of us suffer pain due to the impact.

Name of passenger	Work Permit	FIN
1) BUTAYET	062537519	G6938075T
2) MYINT HTAY	093360583	G2811461WJ
3) KHUN CHIT THAW	094342481	G8686052Q
4) MUTHIAH RAMACHANDRAN	03104085-	F7751886W
5) CHIT MIN KO	093720555	G2843864N
6) ZAW MIN NAING	09281467	G8217722T
7) KYAW ZAYH	094342597	G8685999N
8) MIAH HASHEM	064513540	G2738577Q
9) AZAW WIN TUN	093293754	G2616314K
10) ISLAM SIRATUL	062867566	G8340691M

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]

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

[Signature] 18/08/2021
Witnessed by Reporting Centre Personnel

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Date of Accident : 17/8/2021 Accident Time: 6:28 pm (24-HR-Format)
Accident Place : PIE towards Tuas before Eng Neo exit
Vehicle No. (Car Plate No.) : GBB 5547Y Make/Model: Toyota Dyna
Insurance Company : Longpac Insurance Ltd Policy No: Z/21/VC00/111399
Owner or Company Name / IC No. : Soon Hup Huat Construction Pte Ltd (201838206M)
Owner or Company Contact No. : 6263 2776 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Ling Kwong Siong 8577645B
DRIVER'S Date Of Birth : 26/7/1985 DRIVER'S License Pass Date 26/8/2011
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : 504D, Yishin St S1 #07-148 (8'764504)
DRIVER'S Contact No./ Alt No. : 1) 8168 1180 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : PAULLING KWONGSEONG@HOTMAIL.COM
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 11
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): All injured

Other Party Driver's Particular (if any)

Vehicle No: SLS 5574K
Vehicle Make/Model: Toyota
Name Driver: _____
IC No. Driver/Contact: _____

Vehicle No: GBH 363L
Vehicle Make/Model: Nissan
Name Driver: _____
IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

Veh no: GBE 8437X
Nissan.

**LONPAC INSURANCE BHD (S98FC5635C)**

(Incorporated in Malaysia)

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

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MZ300

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. : Z/21/VC00/111399

Type of Cover : THIRD PARTY FIRE
AND THEFT

1. Index Mark and Vehicle Registration Number TOYOTA DYNA 150
- GBB 5547Y
2. Name of Policy Holder SOON HUP HUAT CONSTRUCTION PTE LTD
3. Effective date of the Commencement of Insurance for the purpose of the Act. 22/06/2021
4. Date of Expiry of the Insurance 21/06/2022

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/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.

6. 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.

Excess : NOT APPLICABLE

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.

H.P. Owner : HITACHI CAPITAL
ASIA PACIFIC PTE
LTDCHIEF EXECUTIVE
(Singapore Branch)User ID : ambika / mhchan
Date Issued : 15-06-2021

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	206M
Vehicle Details	
Vehicle No.:	GBB5547Y
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Sep 2021
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 MANUAL 3SEATER
Primary Colour:	Blue
Manufacturing Year:	2009
Engine No.:	1KD1931841
Chassis No.:	JTFAT35Y30K200698
Maximum Power Output:	-
Open Market Value:	\$24,970.00
Original Registration Date:	22 Jun 2009
First Registration Date:	22 Jun 2009
Transfer Count:	2
Actual ARF Paid:	\$1,249.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	21 Jun 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$14,132.00
COE Rebate Amount:	\$7,701.00
Total Rebate Amount:	\$7,701.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 18 Aug 2021

OK