

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 31/08/2021 14:58 (SGT)
Date of Accident 28/08/2021 16:50 (SGT)
Exact Location of Accident Yio Chu Kang Rd, Singapore
Additional Location Information TWDS UPP SERANGOON RD BEFORE ANG MO KIO AVE 3
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKX2805A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SIM XING YUAN
NRIC No S8707396C
Email Address cindy.simxy@gmail.com
Mobile Phone No (Phone) +65-96757390
Alternative Phone No +65-96757390

VEHICLE PARTICULARS

Manufacturer Toyota
Model Camry
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 - Reporting only
Vehicle Category Private car
Transmission Auto
CC 2500

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number Z20VP05027965
Cover Note Number -

DRIVER

Name of Driver SIM AH TEE
NRIC No S0798580J

Date Of Birth	25/05/1950
Occupation	Outdoor
Date Of Driving Pass	16/05/1970
Driving experience	51 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97333501
Alt. Phone Number	-
Email Address	cindy.simxy@gmail.com
Address	BLK 236A SERANGOON AVE 2 #10-151
Address complement	-
Postcode	550236
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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	Collision - Head to Rear
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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

I WAS STOPPED WITH STATIONARY POSITON AT YIO CHU KANG TOWARDS UPPER SERANGOON ROAD BEFORE ANG MO KIO AVE 3 AT SECOND LANE OF 4 LANES AS TRAFFIC LIGHT WAS RED. TRAFFIC TURNED TO GREEN. VEHICLES IN FRONT START MOVING SLOWLY. I ASSUME THE VEHICLE B MOVING TOO AND RESULTED MY VEHICLE COLLIDED ONTO THE REAR PORTION OF VEHICLE B.

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	SGR1919R
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	VEHICLE B
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

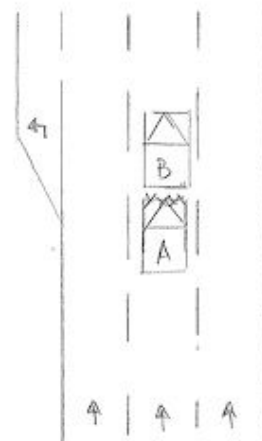
Policyholder's Signature / Date & Time

Sketch Plan

31/8/21

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

Witnessed by Reporting Centre Personnel



A: SKX2805A
B: SGR1919R
Yio Chu Kang Road
Towards Upper
Serangoon Road
Before Ang Mo
Kio Ave3

NEW HOCK TEE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stopped with stationary position at Yio Chu Kang Road towards Upper Serangoon Road before Ang Mo Kio Ave 3 at 2ND lanes of 4 lanes as traffic light was red.

Traffic was turn to green light, vehicles in front start moving slowly, I assume the veh "B" moving too and resulted my vehicle collided onto the rear portion of the veh "B"

DECLARATION

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

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.:












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

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.: Z20VP05027965

Type of Cover: COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

 TOYOTA CAMRY 2.5
 - SKX2805A

2. Name of Policy Holder

SIM XING YUAN

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

02/12/2020

4. Date of Expiry of the Insurance

01/12/2021

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\$ 0.00(SECTION 1) INSURED / NAMED DRIVERS

S\$ 2,000.00(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: W00ALAN

Date Issued: 12/11/2020

Certificate of Insurance - Page 1 of 1