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SN0821CG0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 16/12/2021 17:23 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (16/12/2021 17:23 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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 witholding of material facts may allow insurance companies to repudiate

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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

16/12/2021 17:23 (SGT) 16/12/2021 09:50 (SGT) 3 Yuan Ching Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBA9825Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes TONG GARDEN FOOD (SINGAPORE) PTE. LTD. 2XXXXX685K accounts.ar@tonggarden.com.sg (Phone) +65-87218296 +65-88507743

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission CC

Toyota Dyna

Employment

No - Reporting only Commercial vehicle Manual 2982

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

Lonpac Insurance Bhd ThirdPartyFireTheft Z21VC05007411

DRIVER

Name of Driver Passport No/FIN

CHAI JING GXXXX803R

Data Of Birth	
Date Of Birth Occupation	21/05/1995
	Outdoor
Date Of Driving Pass Driving experience	26/06/2018
Driving experience Gender	3 YEARS AND 6 MONTHS
Mobile Number	Male
Alt. Phone Number	(Phone) +65-88507743
Email Address	- H1451 Ob - 1 - H
Address	jing1451@hotmail.com
Address complement	BLK 987A JURONG WEST STREET 93
Postcode	640987
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	•
of earlier verified owned by Briver	-
GENERAL INFORMATION OF THE ACCIDENT	
GENERAL IN ORMATION OF THE ACCIDENT	
Time of Assidant	
Type of Accident Weather Conditions	Collided into Property
Road Surface	Clear
riodd Cdriace	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged?	*
Number of Passengers (Including Driver)	Yes
Has the driver been approached by unknown person(s)	2
soliciting/offering accident claims assistance?	No
PASSENGER 1	
ASSENCENT	
Name	ALVIN
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?	<u>.</u>
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?	V.
Was there any video captured by Car Camera?	Yes No
Was there any audio recorded?	No
SALANDO AND	110
DETAILS OF OTHER	VEHICLE PROPERTY 1
DETAILS OF OTHER	VEHICLE PROPERTY I
Vehicle Registration Number	
Vehicle Registration Number Vehicle Manufacturer	=
Vehicle Model	7
Vehicle Variant	
Vehicle Colour	
Vehicle Category	NA / Unknown
	CALL SUMIONI

Name of Driver	
Contact Number	-
Address	-
Address Address complement	-
Postcode	-
Postcode	-
nsurance Company Name Nature Of Damage	-
Data lla d	
Details of property damaged in accident	ROOF
No. Of Passenger (Including Driver)	11001

SKETCH PLAN

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. 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 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 6 3 000

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

10/12/2021

Witnessed by Reporting Centre Personnel

Sketch Plan

No 3 Yunn Chiell

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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

Time 8 900am

Driver's Signature (If driver is not the policyholder) / Date & Time 09009m

Witnessed by Reporting Centre Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: 16, 12, 3021 1(DD/A	MMYYYYI TIME-1 09 . 50 VIIII
LOCATION: 3 Yuan Ching ROAD	(HFKMM)
I. DETAILS OF VEHICLE	2.
a) VEHICLE NUMBER: GB/A 9825:	
DINSURANCE COMPANY: LUNPA	C INSURANCE BHO
CIPOLICY NUMBER: 221VC05007	-411
d)POLICY TYPE: (COMPREHENSIVE / TH	HRD PARTY THIRD PARTY FIRE &THEFT
The wife a model. To the private	LSU MANUAL
F)TYPE: (SALOON / COUPE / MPV /VAN	(LORRY) MOTORCYCLE / OTHERS
STREET CALEGORY PRIVATE COL	AMEDOIAL LACTOROVOLES
THE ONE OF USING AT ACCIDENT TIME	1E: .
i) ARE YOU CLAIMING UNDER YOUR OW	/N INSURANCE (YES/NO)
" " CONSESTATE THIRD PARTY CIA	MIM REPORTING ONLY
2. INSURED / POLICY HOLDER A) NAME: TONG GARDEN POOD (SINGAP	
b)NRIC/FIN/PASSPORT: 2000005	OCHIACI.
CIADDRESS: 21 PANDAN AVENUE :	11 03-08 singapore, 60 9388
* CONTINUE TO 3 d IE DRIVED ALSO DO	
* CONTINUE TO 3.d IF DRIVER ALSO POLI	CYHOLDER
Chichedina di and GINAME: CHAI BING.	
	MALE / FEMALE
(2) b)NRIC/FIN/PASSPORT: G12669803 R C)ADDRESS: 9874 Juny West 4	CONTACT: 8450 7743
	240101
"d)DATE OF BIRTH: (21 / 05/ 1995	I/DD/MM (YYYY)
6) OCCUPATION: (INDOOR KOUTDOOR)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DOTTE OF DRIVING DACE 2670	06/20/8
4. WAS DRIVER AN EMPLOYEE OF THE IN	ISURED'S COMPANYS OF STAND
" " " REDITIONSHIP OF LIFE DRIVER	WITH INSLIDED.
G. GIVEATHER CONDITION: (CLEAR / RAININ	IG / OTHERS
b)ROAD SURFACE: (DRY)/ WET / OTHERS_	• • •
6. WAS ANYBODY INJURED (YES /NO)	
The strict is to dice (153 MNO)	
B. THIRD PARTY VEHICLE	ION:
He of passenger a) VEHICLE NUMBER:_ ROOF	
Including driver) b) DRIVER'S NAME:	MODEL:
() NRIC/FIN/PASSPORT:	CONTACT
9. THIRD PARTY VEHICLE	CONTACT:
No of passanger d) VEHICLE NUMBER:	MODEL:
DRIVER'S NAME:	
Induding driver f) NRIC/FIN/PASSPORT:	CONTACT:
	- COMMON.
• •	

email = jing 1451@hotmail.com.



Vehicle Registration Details

Vehicle No. GBA9825Z	Make/ Model TOYOTA/DYNA 150 MANUAL	Vehicle Scheme
Current Propellant Diesel	Chassis No. JTFAT35Y603001767	Vehicle Type Goods (Closed) Van /Van Panel (Delivery)

Owner's Details

Owner Name:

TONG GARDEN FOOD (SINGAPORE) PTE.

LTD.

NRIC/Passport/Company Cert No.:

200804658K

Mailing Address:

Owner ID Type:

Company

Registered Address

21 PANDAN AVENUE #03-08 SINGAPORE

609388

Birth Date

Registration Details

Previous Vehicle No.:

Effective Date of Ownership:

09 May 2008

Original Registration Date:

No. of Transfers:

09 May 2008

Registration Date:

09 May 2008

IU Label No.:

1043050995

Vehicle Specifications

Engine No.:

1KD1806884

Chassis No.:

JTFAT35Y603001767

Year of Manufacture:

Primary Colour:

2008

White

Secondary Colour:	Passenger Capacity:
•	1
Engine Capacity / Power Rating:	Maximum Power Output:
2982 cc / -	-
Max Unladen Weight:	Maximum Laden Weight:
1720 kg	3500 kg
Vehicle Attachment 1:	Vehicle Attachment 2:
No Attachment	· ·
Velial- Attack	
Vehicle Attachment 3:	
Additional Registration Fee (ARF) and COE Information	on
Open Market Value;	Additional Registration Fee Rate:
\$24,243.00	5.00 %
Actual ARF Paid:	Vehicle Lifespan Expiry Date:
\$1,213.00	08 May 2028
OPC Cash Rebate Eligibility:	QP during COE Bidding Exercise:
No	\$15,002.00
COE No.:	COE Expiry Date:
2008030105000505C	08 May 2023
COE Category:	COE Registration Category:
C - Goods Vehicle & Bus	C - Goods Vehicle & Bus
Quota Premium (QP) / Prevailing Quota	PQP Paid
Premium: \$15,002.00/-	\$17,865.00
QP (Regn Cat):	
\$15,002.00	
PARF Rebate Details	
PARF Eligibility:	PARF Eligibility Expiry Date:
No	-
Minimum PARF Benefit:	

Vehicle Emissions Details

CO Emission:	HC Emission:	
NOx Emission:	PM Emission:	
Message:		
	Printed on 14 Apr 2021 09:06:30 Copyright © Land Transport Authority of Singapore 2021	



LONPAC INSURANCE BHD (S98FC5635C)

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

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.: Z21VC05007411

Type of Cover: THIRD PARTY FIRE & THEFT

Index Mark and Vehicle Registration Number

TOYOTA DYNA 150 MANUAL

- GBA9825Z

Name of Policy Holder

TONG GARDEN FOOD (SINGAPORE) PTE. LTD.

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

09/05/2021

4. Date of Expiry of the Insurance

08/05/2022

5. Person 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 TRIALOR SPEED TESTING.

USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

* 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: PI2436 Date Issued: 26/04/2021