

[vve( 1 J3k'08)]

SAKOF 22810009

TP Insurer:

Confirmed by: ( ) Date: ( )  
Insured/Driver Liability: ( ) % [Note: Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

( ) Total Loss Case : to e-mail Insurer URGENTLY.  
Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

|   |
|---|
| 1) Apply for Transport Allowance ( ) / Courtesy Car ( ) |
| 2) QC Check / Post Repair Inspection ( )                |
| 3) Upload Resurvey Photo [Repair Cost > \$3000] ( )     |

Injury :

Διγερ/Ουμπερ:

Contract No:

Damaged Portion:

C. Checked by (Engr-In-Charge):

### Auditors' Comments:

t. 1:

t. 2/3:

## Invoice Preparation Checklist

|  |             |
|--|-------------|
| 1) AR: Accident Reporting (\$30);                | INC (\$80)  |
| 2) DA: Damage Assessment (\$100);                | \$40/\$45   |
| 3) TF: Towing Fee                                | \$120       |
| 4) FT: Follow-Through Survey                     | \$30        |
| 5) PT: Follow-Through Survey (Re-survey)         |             |
| For claimline against INC Only (wef 10 Jan 2005) |             |
| 6) TR: Re-inspection                             | \$75        |
| 7) N1: Idao DA + SMRT Survey                     | \$160       |
| 8) NTUC Additional Services:-                    |             |
| ON*  |             |
| *N3: Courtesy Car / Tpt Allowance                | \$5         |
| *N6: Repair Co-ordination                        | \$10        |
| *N7: Post Repair Inspection                      | \$25        |
| *N8: DV / Collect Excess Coordination            | \$5         |
| TP (N11): TP (N11) INC against INC               | \$20        |
| 9) N12: Idao Mobile                              | 30          |
| Invoice dated                                    | Fee Charged |
| Invoice dated                                    | Fee Charged |



## 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 Actual 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              | 01/08/2022 15:44 (SGT)               |
| Reported by                     | Driver                               |
| Date of Accident                | 30/07/2022 16:13 (SGT)               |
| Exact Location of Accident      | Toh Tuck Link, Singapore             |
| Additional Location Information | TURNING RIGHT INTO OLD TOH TUCK ROAD |
| Country/State of Loss           | Singapore                            |

### DETAILS OF OWN VEHICLE

|                             |                              |
|-----------------------------|------------------------------|
| Vehicle Registration Number | GBD6850D                     |
| INSURED/POLICYHOLDER        |                              |
| Is company?                 | Yes                          |
| Name Of Registered Owner    | HONG TAR ENGINEERING PTE LTD |
| Company Reg No              | 1XXXXX157E                   |
| Email Address               | sales@hongtar.com.sg         |
| Mobile Phone No             | (Phone) +65-65696011         |
| Alternative Phone No        | -                            |

### VEHICLE PARTICULARS

|  |                    |
|--|--------------------|
| Manufacturer   | Toyota             |
| Model  | Hiace              |
| 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? | Yes                |
| Vehicle Category   | Commercial vehicle |
| Transmission   | Auto               |
| CC   | 2982               |

### INSURANCE COMPANY

|                                   |                      |
|-----------------------------------|----------------------|
| Name of Insurance Company         | Lonpac Insurance Bhd |
| Policy Number / Cover Note Number | Z22VC05010669        |

### DRIVER

|                |               |
|----------------|---------------|
| Name of Driver | WONG LING MOY |
| NRIC No        | SXXXX540J     |
| Date Of Birth  | 03/09/1969    |
| Occupation     | Indoor        |

|  |                                       |
|--|---------------------------------------|
| Date Of Driving Pass   | 20/10/1992                            |
| Driving experience   | 29 YEARS AND 9 MONTHS                 |
| Gender   | Female                                |
| Mobile Number  | (Phone) +65-98155133                  |
| Alt. Phone Number  | -                                     |
| Email Address  | sales@hongtar.com.sg                  |
| Address  | BLK 559 JURONG WEST STREET 42 #08-501 |
| Address complement   | -                                     |
| Postcode   | 640559                                |
| 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   | Collision - Major/Minor Rd |
| 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  |
| Translator's name   | -   |
| Translator's ID   | -   |
| Translator's phone number   | -   |
| Translator's email  | -   |
| Original language used in the statement   | -   |

#### 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  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |                |
|-----------------------------|----------------|
| Vehicle Registration Number | SMV2221X       |
| Vehicle Manufacturer        | Toyota         |
| Vehicle Model               | -              |
| Vehicle Variant             | -              |
| Vehicle Colour              | -              |
| Vehicle Category            | Private hire   |
| Name of Driver              | CHOONG PAULINE |
| NRIC No                     | SXXXX358I      |

|   |                      |
|---|----------------------|
| Contact Number                          | (Phone) +65-97536130 |
| 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

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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

峰達工程私人有限公司

HONG TAR ENGINEERING PTE LTD

Blk 22 Woodlands Link #03-52

Singapore 738734

Tel: 6569 6011 Fax: 6569 4230

Email: sales@hongtar.com.sg

Website: www.hongtar.com.sg

Sketch Plan

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Handwritten notes on the sketch plan grid:

- Top left: B1
- Top right: B2A
- Below B2A: LA
- Bottom right: A) GBD 6850D
- Bottom right: B) SMV 2221X

TOH TUCK LINK

Describe Circumstance of the Accident

I was driving along old Toh Tuck Road, I checked the road was cleared ~~& fr~~ at the T-junction then filtered to the RIGHT lane & suddenly ~~heard~~ hit by the side LEFT. I stopped & checked my van front bumper was slightly damaged & her ~~van~~ car was seriously damaged. She was driving private hired car & claimed that she was driving at slow speed. After accident, she looked very professional & ~~etc~~ took the ~~&~~ photo at all angles ~~on the~~ at the accident place.

Declaration

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

華  
達  
星

**HONG TAR ENGINEERING PTE LTD**  
Blk 22 Woodlands Link #03-52  
Singapore 738734  
Tel: 6569 6011 Fax: 6569 4230  
Email: sales@hongtar.com.sg  
Website: www.hongtar.com.sg

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

huang 1/8/22 5:15:20 hrs

01/08/2022



## ACCIDENT STATEMENT

ACCIDENT DATE: 30.07.22 (DD/MM/YYYY), TIME: 16.13 (HH:MM)

LOCATION: Old Ton Tuck Road

**1. DETAILS OF VEHICLE**

- a) VEHICLE NUMBER: 6B06850D  
 b) INSURANCE COMPANY: LONPAC INSURANCE BHD  
 c) POLICY NUMBER: 222VC05010669  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: TOYOTA HIAE  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING  
 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: HONGTAR ENGINEERING PTE LTD (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 199200157E CONTACT: 65696011  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

**DRIVER**

- a) NAME: WONG LING MOY (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S6927540J CONTACT: 98155133  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 03/09/1969 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 20/10/1992

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) CLEAR  
 b) ROAD SURFACE: (DRY / WET / OTHERS) CLEAR DRY

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: SMV222IX MODEL: TOYOTA  
 b) DRIVER'S NAME: CHONG PAULINE  
 c) NRIC/FIN/PASSPORT: C7412358I CONTACT: 97536130

**9. THIRD PARTY VEHICLE**

- a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email: sales@hongtar.com.sg

VIDEO



LONPAC INSURANCE BHD (S98FC0635G)

Singapore Office: 100 Beach Road, #10-01, The Raffles Hotel, Singapore 189675  
Tel: 65 622 1111 Fax: 65 622 1111 Website: www.lonpac.com.sg  
GST Reg No: R60005035-C

11/3/20

## 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. 727VC05010669

Type of Cover: COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

TOYOTA HIACE 3.0 DX  
- GJD6850D

2. Name of Policy Holder

HONG TAT ENGINEERING PTE LTD

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

25/03/2022

4. Date of Expiry of the Insurance

24/03/2023

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.

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

Excess

SS 600.00 (SECTION 1)

SS 2,500.00 (SECTION 1) ADDITIONAL EXCESS FOR YOUNG AND/OR INEXPERIENCED DRIVERS

SS 100.00 WINDSCREEN EXCESS (EXCESS WILL BE DOUBLED ON SUBSEQUENT CLAIMS)

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: ABWIN PTE LTD

*Amek*

CHIEF EXECUTIVE  
(Singapore Branch)

User ID: RA1001

Date issued: 07/03/2022