

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 02/08/2022 13:58 (SGT)
Reported by Driver
Date of Accident 01/08/2022 16:10 (SGT)
Exact Location of Accident Gul Ave, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YL2842P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Frontken (Singapore) Pte Ltd
Company Reg No 199606464C
Email Address loi.cp@frontken.com
Mobile Phone No (Phone) +65-84982304
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Isuzu
Model NPR71L
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? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 4570

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Policy Number / Cover Note Number Z21VC05008877

DRIVER

Name of Driver Ramesh S/O Thangayah Arumugam
NRIC No S6833125J
Date Of Birth 01/09/1968
Occupation Outdoor

Date Of Driving Pass	20/04/1989
Driving experience	33 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84982304
Alt. Phone Number	-
Email Address	loi.cp@frontken.com
Address	Blk 845, Jurong West St 81, #14-223
Address complement	-
Postcode	640845
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 - 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
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

Refer to attached 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	XE2923M
Vehicle Manufacturer	-
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**IMPORTANT NOTICE**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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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.

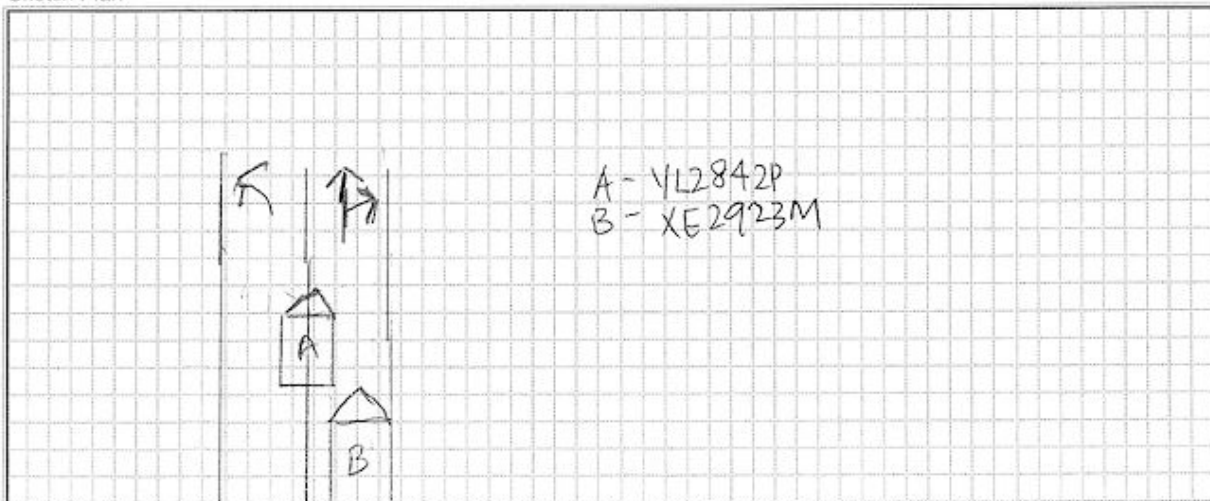
FRONTKEN
FRONTKEN (SINGAPORE) PTE LTD
One Stop Insurance & Claims Service for Motor Vehicle Accidents

Policyholder's Signature / Date & Time

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

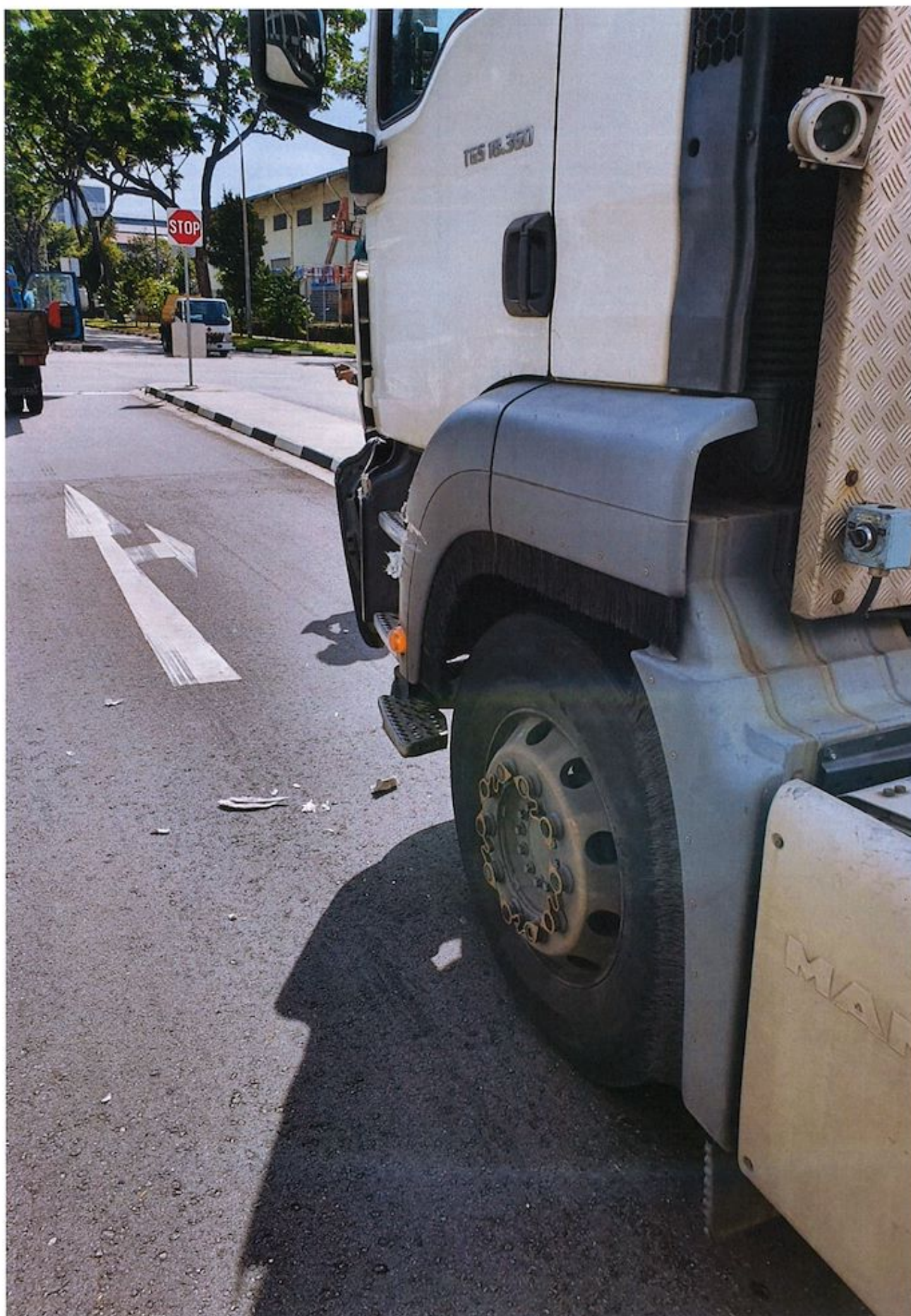
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Please note that you might be able to submit an Own Damage Claim under your own policy within 14 days. 1
() Claim Own Damage () Claim Third Party () Reporting Only () Claim OD/ TP at other workshop

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







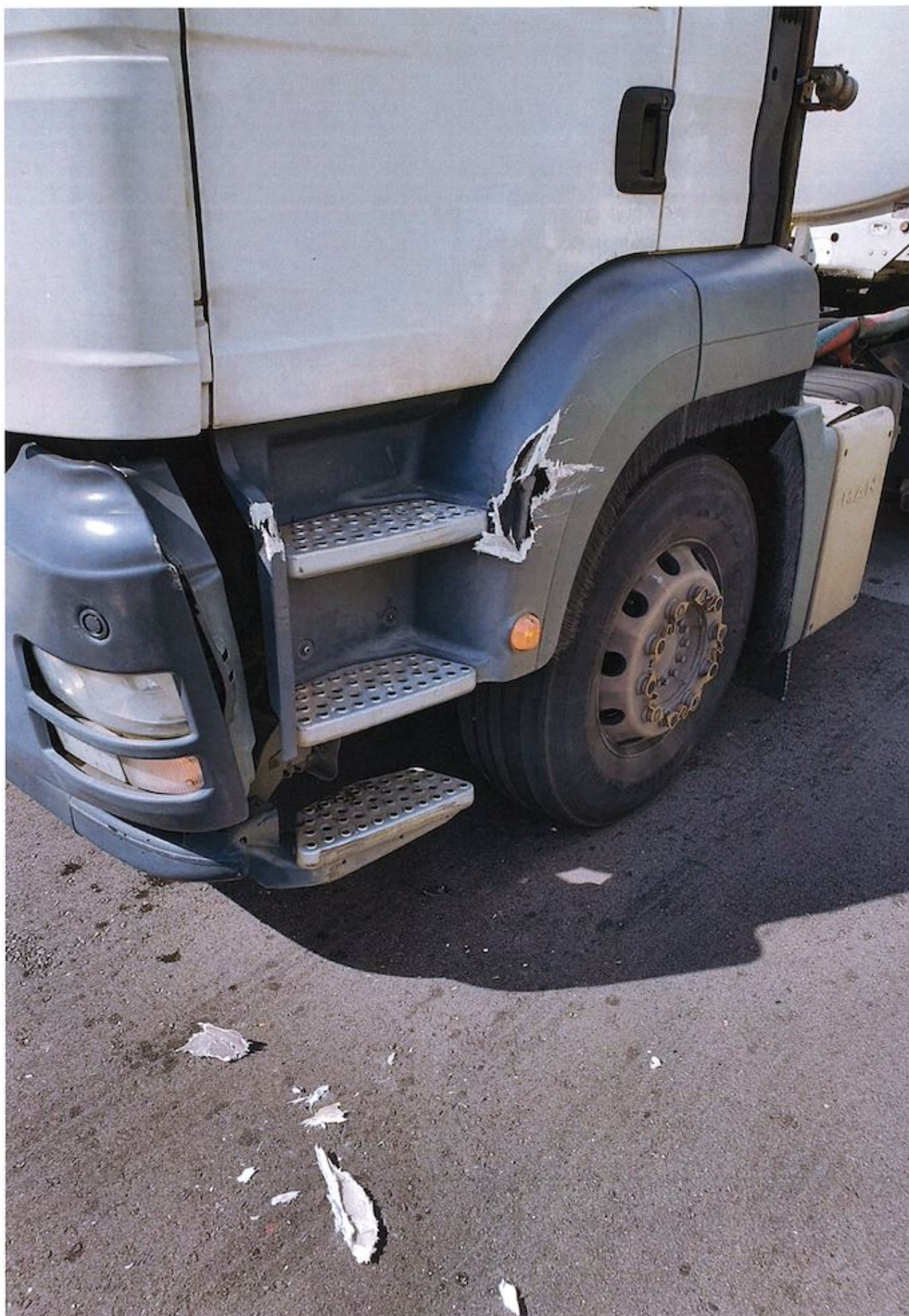

















LONPAC INSURANCE BHD (S98FC5635C)

(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

THE SCHEDULE

Class of Policy	: COMMERCIAL VEHICLE	Policy No.	: Z21VC05008877
Insured	: FRONTKEN (SINGAPORE) PTE LTD	Type of Cover	: THIRD PARTY
Address	: 156A GUL CIRCLE SINGAPORE 629614	Replacing CN/Policy No.	: Z20VC00109180
Nature of Business	: OTHERS - SURFACE ENGINEERING TECHNOLOGY	Account No	: Z10562

Period of Insurance			
(a) From 01/12/2021 To 30/11/2022 (both dates inclusive)			
(b) Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			

Description of Vehicle		The Policy's Premium			
Vehicle/Trailer Regn. No		Premium Component	%	Amount (\$\$)	Total (\$\$)
Vehicle/Trailer Regn. No	: YL2842P	Basic Premium			1,475.24
Make & Model of Vehicle	: ISUZU NPR71L	NCD	20.00%	295.05	
Type of Body	: LORRY	Premium After Discount			1,180.19
Engine No	: 4HG1933192	Gross Premium			1,180.19
Chassis No	: JAANPR71L27102815	Actual Gross Premium			1,180.19
Year of Registration	: 2002	GST	7.00%	82.61	
Tonnage	: 5.08	Total Premium Payable			1,262.80
Seating Capacity	: 2				
Sum Insured	: NOT APPLICABLE				