

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	18/08/2022 17:43 (SGT)
Reported by	Driver
Date of Accident	18/08/2022 14:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLE TOWARDS WOODLANDS AFTER MANDAI ROAD EXIT 8A
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA6745R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DO WING RIGHT 96881629
Company Reg No	53165528L
Email Address	reymund@dowingright.com.sg
Mobile Phone No	(Phone) +65-96881629
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	EVERY GA 660M
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	658

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05012422

DRIVER

Name of Driver	AMBIKAPATHY RAJA
Work Permit No	G6585673K
Date Of Birth	08/06/1987
Occupation	Outdoor

Date Of Driving Pass	01/06/2016
Driving experience	6 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83594503
Alt. Phone Number	-
Email Address	reymund@dowingright.com.sg
Address	MAXWELL HOUSE #09-17 (S) 069113
Address complement	-
Postcode	-
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	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	2
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	-

PASSENGER 1

Name	PASSSENGER
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

REFER WITH ATTACH.

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	SNA2625M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHEW EE LING
Contact Number	(Phone) +65-84881833
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	GBD6085X
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


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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.


Jo Wing Right 96881629

Policyholder's Signature / Date & Time

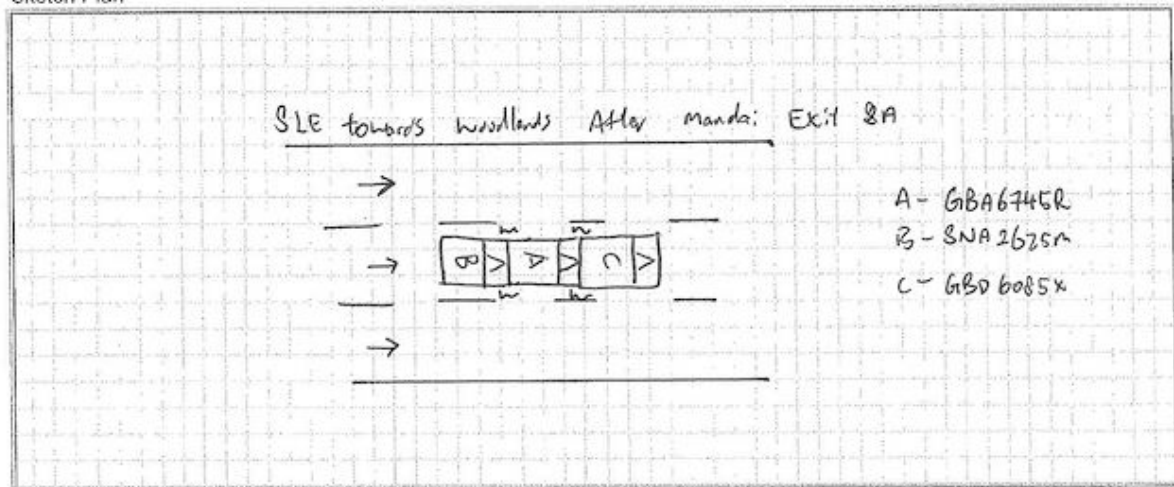
 18.08.2012
5 PM

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



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

Sketch Plan

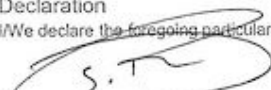


Describe Circumstance of the Accident

As per above date and time, I was driving GBA6745R along SLF towards woodlands on the center lane. Vehicles in front of me suddenly slowed down and stopped. As such, I applied brake and stopped accordingly. Out of sudden, I felt an impact from the rear. Due to the impact, my vehicle surged forward and collided onto veh(C) rear portion. I alighted and dismounted. Veh(B) SNA2625M front portion collided onto my vehicle rear portion and surged forward to collide onto veh(C) rear portion.

Declaration

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


Jo Wing Right 96881629

Policyholder's Signature / Date & Time

 18.08.2022
5PM

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



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













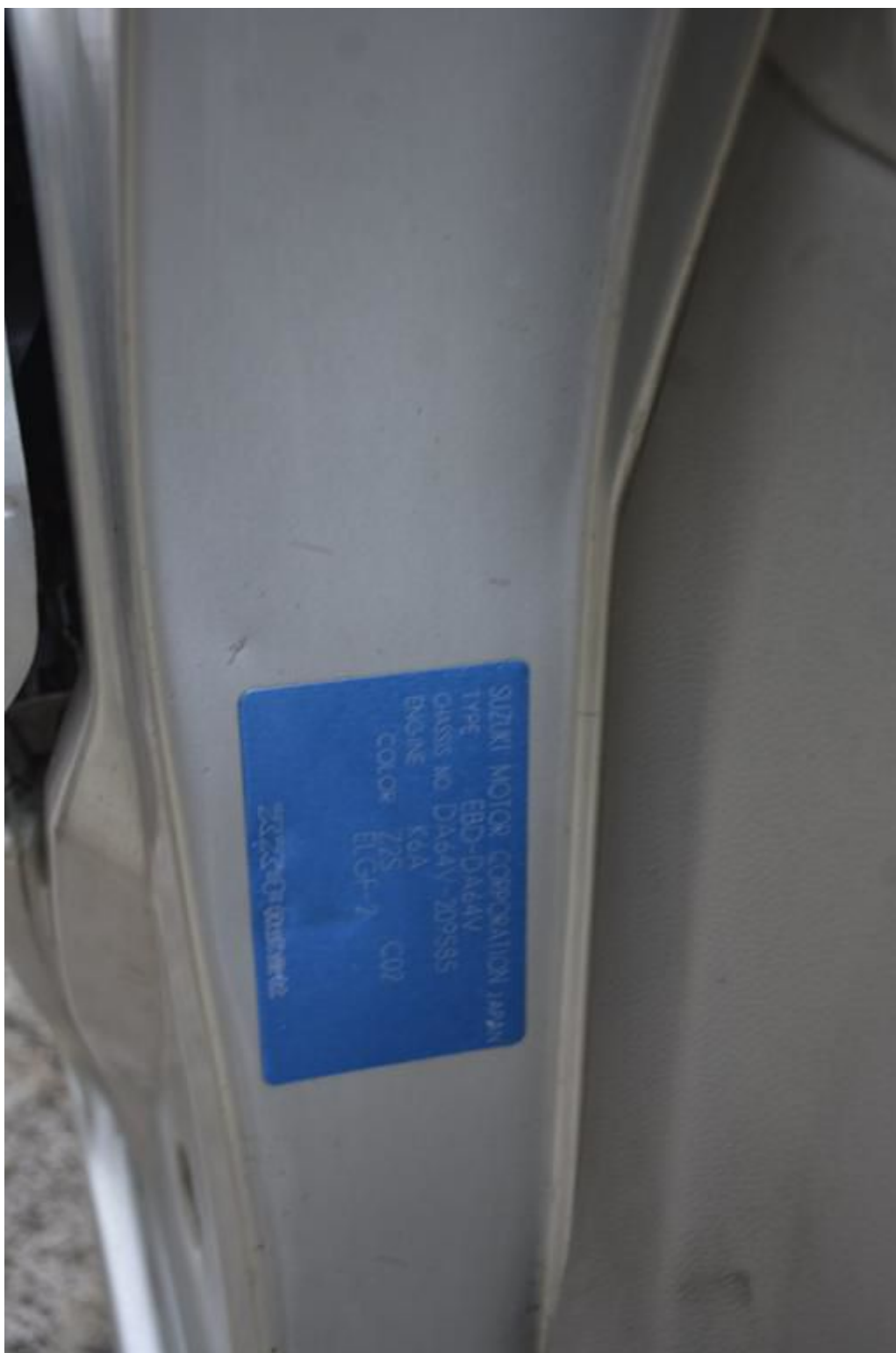

































LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

 Singapore Office: 300, Beach Road #17-04/05, 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. : Z22VC05012422

Type of Cover : THIRD PARTY FIRE & THEFT

1. Index Mark and Vehicle Registration Number

 SUZUKI EVERY GA 660 M
 - GBA6745R

2. Name of Policy Holder

DO WING RIGHT 96881629

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

21/06/2022

4. Date of Expiry of the Insurance

20/06/2023

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.

* 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 : THIAM HENG AUTO (S) PTE LTD

 CHIEF EXECUTIVE
 (Singapore Branch)

User ID: ELLATAN

Date Issued: 21/06/2022