

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 12/10/2022 13:44 (SGT)
Reported by Both
Date of Accident 11/10/2022 20:30 (SGT)
Exact Location of Accident Near 43 Lor 27 Geylang, Singapore 388176
Additional Location Information SIMS AVE SLIP ROAD TO LORONG 27 GEYLANG
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMQ131L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN LEE HOON
NRIC No SXXXX654A
Email Address JTANLH@YAHOO.COM
Mobile Phone No (Phone) +65-92257725
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Eclipse cross
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1499

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Policy Number / Cover Note Number Z22VP05032087

DRIVER

Name of Driver TAN LEE HOON
NRIC No SXXXX654A
Date Of Birth 10/02/1974
Occupation Indoor

Date Of Driving Pass	12/06/1993
Driving experience	29 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92257725
Alt. Phone Number	-
Email Address	JTANLH@YAHOO.COM
Address	365 CHOA CHU KANG AVE 3
Address complement	01-31
Postcode	689886
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Change/cross lane
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 SUMMARY & SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE TOO LARGE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBS5023C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
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) -

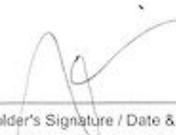
SKETCH PLAN

IMPORTANT NOTICE

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.

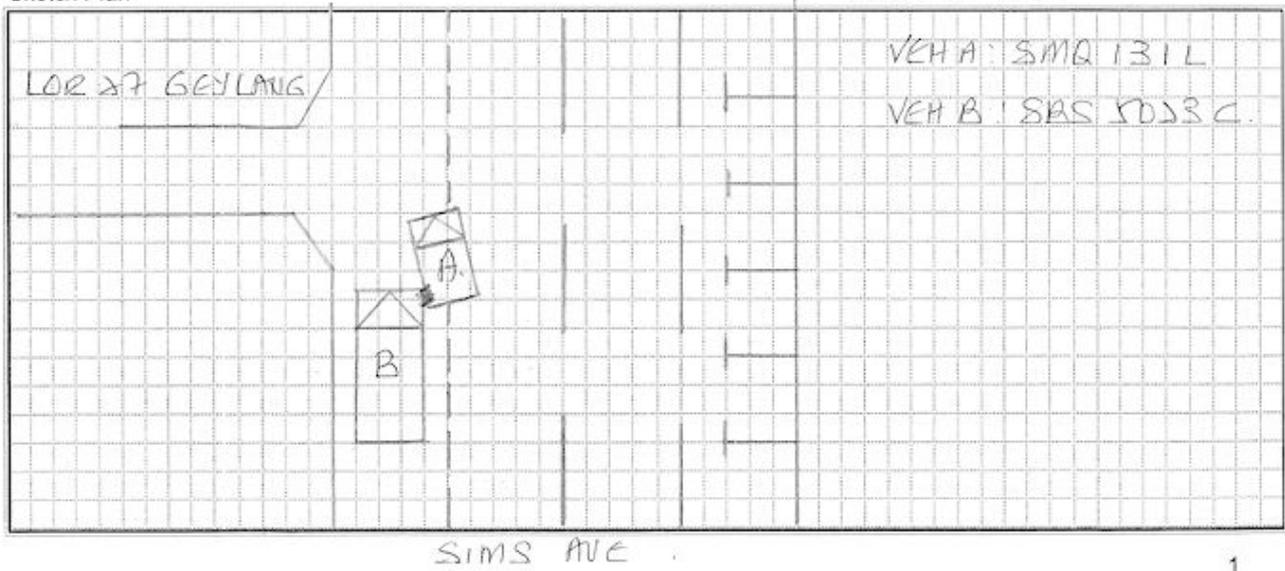

 Policyholder's Signature / Date & Time


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



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

Sketch Plan



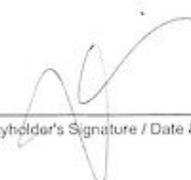
Describe Circumstance of the Accident

On 11 Oct 2022 at about 8:30pm, I was driving my vehicle SMO 131 L along Sias Ave turning left to Lor 27 Geylang.

I was behind the bus which was stationary picking up passengers @ the bus-stop. I overtake the bus and turn onto Lor 27 Geylang in front of the bus. The accident happened when I was turning left to Lor 27 Geylang.

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



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












LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/06, The Concourse, Singapore 199555.

Tel: (65) 6250 7388 Fax: (65) 6256 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MX3

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. : Z22VP05032087

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

 MITSUBISHI ECLIPSE CROSS 1.5
 - SMQ131L

2. Name of Policy Holder

TAN LEE HOON

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

20/09/2022

4. Date of Expiry of the Insurance

19/09/2023

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\$ 500.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 1,500.00 (SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS

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.

H.P. Owner : HONG LEONG FINANCE LIMITED

 CHIEF EXECUTIVE
 (Singapore Branch)

User ID: EMOTORHAZE

Date Issued: 13/09/2022