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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 29/10/2022 16:39 (SGT) Reported by Date of Accident 28/10/2022 14:30 (SGT) Exact Location of Accident Singapore Additional Location Information **WOODLANDS AVENUE 10** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Hino

Vehicle Registration Number XF3917A

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner HUP LEE CRANE SERVICE PTE LTD Company Reg No 201005403R **Email Address** admin@huplee.com.sg Mobile Phone No (Phone) +65-97359059 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model FS1ETMA-KAS 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 12913

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd Policy Number / Cover Note Number Z22VC05012893

DRIVER

Name of Driver SOH KENG GIAP NRIC No S0939004I Date Of Birth 17/02/1951 Occupation Outdoor

| Date Of Driving Pass Driving experience Gender Mobile Number | 23/11/1972 49 YEARS AND 11 MONTHS Male |
|--|---|
| Alt. Phone Number | (Phone) +65-96249788 |
| Email Address | admin@huplee.com.sg |
| Address | APT BLK 204C PUNGGOL FIELD #08-338 (S) 823204 |
| 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 | Collided into Property |
| Weather Conditions | Clear |
| Road Surface | Dry |
| | |
| OTHER INFORMATION | |
| Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident | No 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? | NO |
| n yoo, agamot whom: | |
| CIRCUMSTANCES OF ACCIDENT | |
| REFER WITH ATTACHED. | |
| 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 | SMA4717E |
| Vehicle Manufacturer | - |
| Vehicle Model | <u>-</u> |
| Vehicle Variant | _ |
| Vehicle Colour | _ |
| Vehicle Category | Private car |
| 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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- 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.

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

- 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.
- 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.



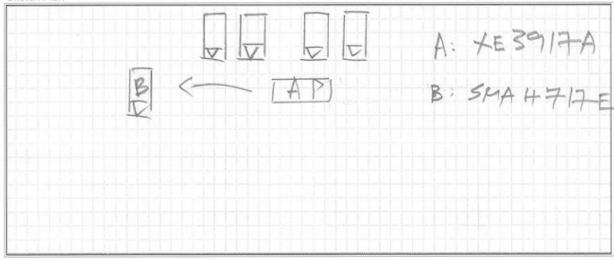
Policyholder's Signature / Date & Time



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



Sketch Plan



1

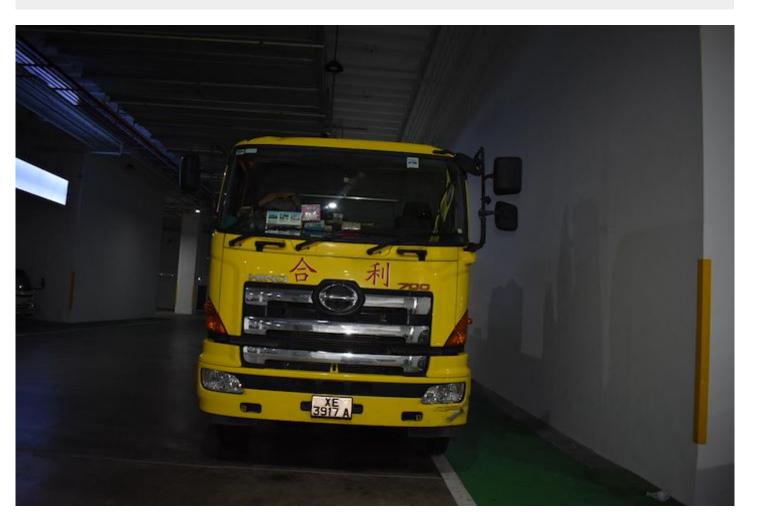
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| ollided with parted car StiA HATTE. |
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| : Please note that your insurer may have 14 days time frame for you to submit an own |
| ge claim under your own policy, please check your policy for more information. |
| ge claim under your own policy, please check your policy for more information. |

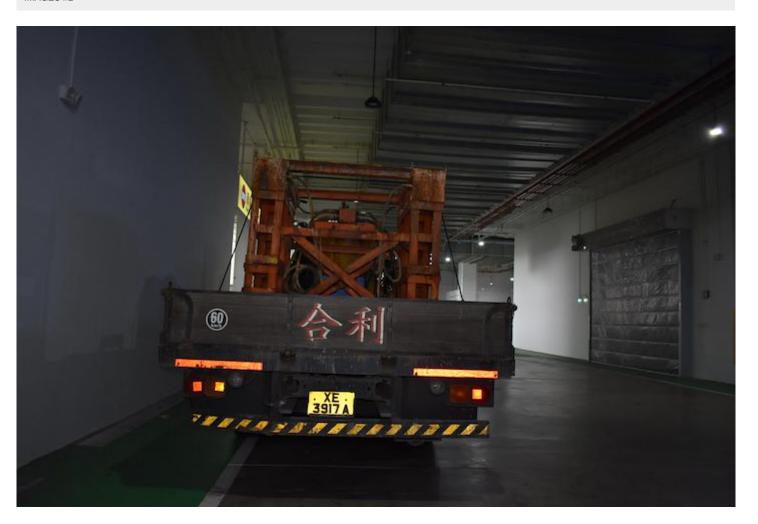
I/We declare the foregoing particulars are true in every respect.

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

Policyholder's Signature / Date & Time

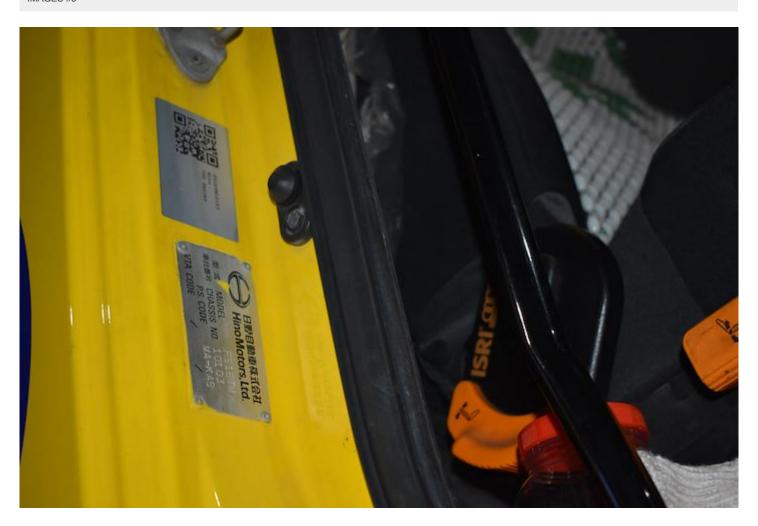
Driver's Signature (if driver is not the policyholder) / Date & Time

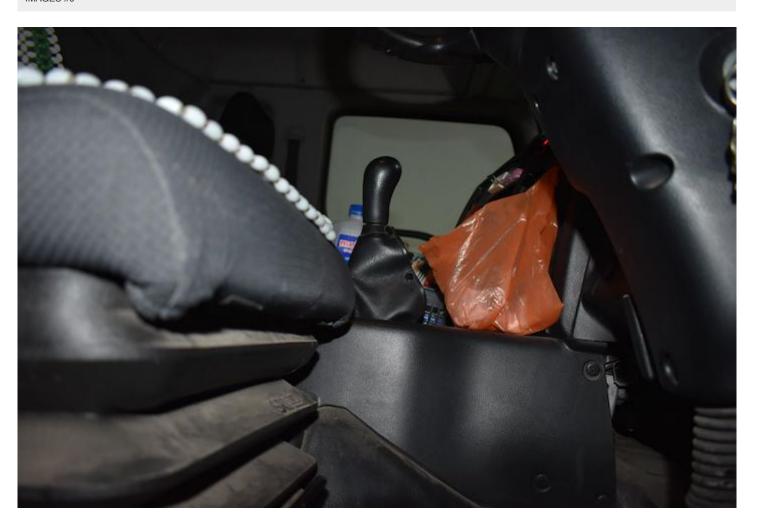












M2300



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.: 222VC05012893

Name of Policy Holder

Type of Cover : COMPREHENSIVE

HUP LEE CRANE SERVICE PTE LTD

1. Index Mark and Vehicle Registration Number

HINO HINO FSTETMA-KAS

23/07/2022

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

Date of Expiry of the Insurance

22/07/2023

Person To Drive

(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.

Excess

; S\$ 1,500.00 (SECTION 1)

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

S\$ 200.00 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: SING INVESTMENTS & FINANCE LIMITED

(Singapore Branch)

Date Issued: 19/07/2022



Certificate of Insurance - Page 1 of 1