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SN0922C10004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 01/12/2022 12:19 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (01/12/2022 12:19 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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

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 Form by insurance companies is not an admission of policy liability of 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 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 01/12/2022 12:19 (SGT) Reported by Driver Date of Accident 30/11/2022 16:40 (SGT) **Exact Location of Accident** Singapore Additional Location Information PIONEER RD AFT PIONEER WALK TRAFFIC JUNC Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XE1385Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner L3H RESOURCES PTE. LTD. Company Reg No 2XXXXXX060H **Email Address** 1845ktlim@gmail.com Mobile Phone No (Phone) +65-98457368 Alternative Phone No.

VEHICLE PARTICULARS

Manufacturer lveco Model Trakker Variant Exact purpose for which vehicle was being used at time of Employment

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

CC

Commercial vehicle Transmission Auto 12882

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd Policy Number / Cover Note Number Z22VC05012632

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TAN YONG CHOON SXXXX129E 15/10/1960 Outdoor

No - Reporting only

Data Of Data		
Date Of Driving Pass	18/11/1982	
Driving experience	40 YEARS	
Gender	Male	
Mobile Number	(Phone) +65-94306995	
Alt. Phone Number	(1 Hone) 105-94500995	
Email Address	1045141.	
Address	1845ktlim@gmail.com	
Address complement	BLK 148 GANGSA RD	
Postcode	#09-297	
Is the driver the policyholder?	670148	
If No, Relationship of the Driver with the Insured	No	
Does Driver Own Other Vehicles?	Employee	
Vehicle Registration Number of Other Vehicle Owned by Driver	No	
Insurance Company of Other Vehicle Owned by Driver	-	
2,721101	-	
GENERAL INFORMATION OF THE ACCIDENT		
GENERAL INFORMATION OF THE ACCIDENT		
No. 25		
Type of Accident	Collision - Change/areas	
Weather Conditions	Collision - Change/cross lane Raining	
Road Surface		
	Wet	
OTHER INFORMATION		
Was south		
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?		
Was notice of intended Prosecution given?	No	
If yes, against whom?	No	
ii yes, against whom?	=	
CIRCUMSTANCES OF ACCIDENT		
PLS REFER TO THE ATTACHED STATEMENT.		
2 Course Programme Transport		
ATTACHMENT(S)		
Are accident photos available for attachment?		
Was there any video contured by 0 = 0	Yes	
Was there any video captured by Car Camera?	No	
DETAILS OF OTHER	VEHICLE PROPERTY 1	模拟 经总统制度 医全性性神经
Vehicle Registration Number	XE3702C	
Vehicle Manufacturer	AL0/020	

Commercial vehicle

- Contract	
	Accident

Vehicle Category

Name of Driver Contact Number

Vehicle Manufacturer
Vehicle Model Vehicle Variant Vehicle Colour

Address	
Postcode	
Insurance Company Name	
Nature Of Damage	100
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1.5

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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.

1-12-22

Policyholder's Signature / Date & Time

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

MACK

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

Sketch Plan

Winn2022

Describe Circumstance of the Accident	
I was travelling straight along	Droneer Road
on the 2nd lane of A3-lanes road	d. Suddenly
the weh B from my rear swerved	of his uch
to the right lane and hit conto	my rean
right portion of my weh.	

Declaration

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel / Date & Time

(Name as in NRIC/ID card)

1-12-22

ACCIDENT STATEMENT

ACCIDENT DATE: 30/11/22 (DD/MM/YYYY), TIME: 1/6. 40 (HH:MA	
1. DETAILS OF VEHICLE	work
CIVERIOLE VILLED TO TO TO THE TARK	ic juice
GIVEHICLE NUMBER: XE 13857	(
DINSURANCE COMPANY: LONPAC	
CIPCUCY NUMBER: Z>> VCO50/2632	
THE COMPREHENCE THE	
TITE BALOON / COUPE / MPV /VAN / LODGE	
DIVEHICLE CATEGORY: (PRIVATE ACOMMERCIAL / MOTORCYCLE)	
TAKE TOU CLAIMING UNDER YOUR OWN INCOME.	
THE STATE OF THE PARTY OF ALL A DECOME	
/ TOLIC / HOLIJFR	
DINRIC/FIN/PASSPORT	
0017.	amis
C)ADDRESS: CONTACT: 9737	9843
	7368
CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	() 0 -
- Control of Control	
(Including driver) OINAME: TAN YONG CHOON MALE / FEMALE!	
(1) STANGARING ASSPORT JY 4/6/19/5	95
	2
#09-397 (670/88)	
*d)DATE OF BIRTH: (/5 / 10 / 1960)(DD/MM/YYYY)	
FIYEARS OF DRIVING EXPRERIENCE: 18/4/198)	
4. WAS DRIVER AN EMPLOYED ON THE REST (1988)	
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANYP (YES) NO)	
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 5. GIWEATHER CONDITION: (CLEAR RAINING / OTHERS	
DIROAD SURFACE: (DRY WELF OTHERS	
6. WAS ANYBODY INJURED (YES ANO)	
7. GIREPORTED TO POLICE (YES NO)	
P 7E3, PLEASE STATE WHICH POLICE STATION	
J. THIRD PARTY VEHICLE	
a) VEHICLE NUMBER: XE3702C	
DRIVER'S NAME	
O NRIC/FIN/PASSPORT: CONTACT:	
LUKD SAKU VEHICLE	
d) VEHICLE NUMBER:MODEL:	
DRIVER'S NAME: MODEL	
NRIC/FIN/PASSPORT: CONTACT:	

mail = 1845 Kt Limber guest. com.

VIDEO =



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) 6296 3767 Website: www.lonpac.com.sg GST Reg No.: F0-0005635-C

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.: Z22VC05012632

Type of Cover: COMPREHENSIVE

. Index Mark and Vehicle Registration Number

IVECO TRAKKER AUTO AT260T41

- XE1385Y

2. Name of Policy Holder

L3H RESOURCES PTE. LTD.

 Effective Date of the Commencement of Insurance for the purpose of the Act 06/07/2022

4. Date of Expiry of the Insurance

05/07/2023

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 TRIALOR SPEED TESTING.

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

Excess

: S\$ 2,000.00 (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.

CHIEF EXECUTIVE (Singapore Branch)

User ID: HSLIM Date Issued: 04/07/2022