

NATIONAL Assessment Centre Services

Date: 25/04/2023
 RefNo: NA/LPC23004223/d4
 VehNo: VN1025C
 DOA: 24/04/2023 14:38
 OD/TP/Reporting Only

TP Insurer:

Job description: SAS e-filing
 Date & Time Completed:
 Done by:
 E-mail (within 2hrs, Aft 2hrs):
 I-Motor Claim Form:
 I-Motor W/O (Within: OD 2hrs, TP 4hrs):
 I-Photo Uploaded:
 Assessment/Survey Report:
 Ass't Report by Fax / Hand to Owner/Wksp:

Preferred Wksp / INC Assign Wksp / QW: (

TP Particulars: Vch No: SJE 9534Y, INC () / Non-INC ()
 Owner / Driver: (Tel:)
 Policy No: () Period: () Cover Type: ()
 Confirmed by: (Date: Time:)
 Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]
 Year of Registration: () Warranty: YES () / NO ()
 Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.
 () Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co. ()

Remarks: (INC Hotline: 6788 6616)
 1) Apply for Transport Allowance () / Courtesy Car ()
 2) QC Check / Post Repair Inspection ()
 3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time	Actions

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cont. 1:

Cont. 2/3:

Invoice Preparation Checklist		Am't (\$)	Am't
		Est. Bill	Add
1) AR: Accident Reporting (\$30);			
2) DA: Damage Assessment (\$100); INC (\$80)			
3) TP: Towing Fee	\$40/\$45		
4) FT: Follow-Through Survey	\$120		
5) PT: Follow-Through Survey (Resurvey)	\$30		
For claiming against INC Only (wef 10 Jan 2005)			
6) TR: Re-inspection	\$75		
7) N1: Idau DA + SMRT Survey	\$160		
8) NTUC Additional Services:-			
ON*			
*N5: Courtesy Car / Tpt Allowance	\$5		
*N6: Repair Co-ordination	\$10		
*N7: Post Repair Inspection	\$25		
*N8: DV / Collect Excess Coordination	\$5		
TP (N11): TP (N7n INC) against INC	\$20		
9) N12: Idau Mobile	\$10		
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

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	25/04/2023 10:17 (SGT)
Reported by	Actual Driver
Date of Accident	24/04/2023 14:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TOWARDS CITY BEFORE BRADDELL EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN1025C
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	HYLAND HOLDINGS PTE LTD
Company Reg No	2XXXXXX236K
Email Address	selim@hyland.com.sg
Mobile Phone No	(Phone) +65-83442315
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fe83be6srdea
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2977

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05012071

DRIVER

Name of Driver	UZZAL
Passport No/FIN	FXXXX052L

Date Of Driving Pass	26/09/2020
Driving experience	2 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83442315
Alt. Phone Number	-
Email Address	selim@hyland.com.sg
Address	200 TAGORE LANE
Address complement	-
Postcode	787590
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	Side Swipe
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

PLEASE REFER TO THE ATTACHED STATEMENT

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	SJE9534Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	

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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5. Any false reporting may be referred to the Police for investigation.
6. The 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.

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.



[Signature]

Policyholder's Signature / Date & Time



[Signature]

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

[Signature]

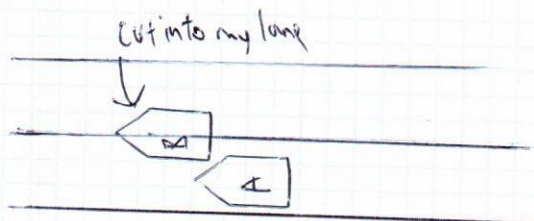
25/4/2023

Witnessed by Reporting Centre Personnel

Sketch Plan

CTE TOWARDS CITY BEFORE BRADDEL EXIT

YN1025C
SJE9534Y



Describe Circumstances of the Accident

I WAS TRAVELLING ALONG CTE TOWARDS CITY BEFORE BRADDEL EXIT. SUDDENLY VEHICLE B (SJE9534Y) CUT INTO MY LANE AND HIT ONTO MY VEHICLE.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

Witnessed 25/4/2023

Accident Reporting Draft

VEHICLE NO: YN1025C

MODEL: MIT FE83B

AUTO MANUAL

DATE OF ACCIDENT	24/4/2023	C.C: 2,977
TIME OF ACCIDENT	1438	HRS AM/PM
LOCATION OF ACCIDENT	CTE TOWARDS CITY BEFORE BRADDEL EXIT	
EXACT PURPOSE USE DURING ACCIDENT	<u>EMPLOYMENT</u> PRIVATE USE/ PRIVATE HIRE	
NAME OF OWNER	HYLAND HOLDINGS PTE. LTD.	
CONTACT NO.	83442315	EMAIL: SELIM@HYLAND.COM.SG
NRIC	200909236K	
CLAIM TYPE	<u>OD / THIRD PARTY</u> REPORTING ONLY 3P	
INSURANCE CO.	LONPAC	
TYPE OF COVERAGE	<u>COMPREHENSIVE</u> THIRD PARTY/ THIRD PARTY FIRE & THEFT	
POLICY NO.		
NAME OF DRIVER	AS ABOVE / IF NO: UZZAL	
NRIC	F8155052L	ANY PASSENGER: 0
DATE OF BIRTH	9/3/1975	
OCCUPATION	<u>OUTDOOR</u> / INDOOR	
DATE OF DRIVING PASS	26/9/2020	
GENDER	<u>MALE</u> / FEMALE	
CONTACT NO.	83442315	EMAIL: SELIM@HYLAND.COM.SG
ADDRESS	200 TAGORE LANE S(787590)	
DOES DRIVER OWN OTHER VEHICLES	NO/ IF YES: REG NO.	
RELATIONSHIP	EMPLOYEE/ IF NO:	
WEATHER CONDITION	<u>CLEAR</u> / RAINY/ OTHER: CLEAR	
ROAD SURFACE	<u>DRY</u> / WET/ OTHER: DRY	
ANY INJURIES	<u>NO</u> / IF YES: YES - DRIVER (UZZAL) (M)	
CONTACT NO.		
POLICE REPORT	<u>NO</u> IF YES: NOTICE OF INTENDED PROSECUTION GIVEN?	
VIDEO RECORDING	<u>NO</u> / YES NO/IF YES: WHO?	
AUDIO RECORDING	<u>NO</u> / YES SCENE PHOTO(S) <u>NO</u> / YES	
VEHICLE B NO.	SJE9534Y	ANY PASSENGER:
NAME		
CONTACT NO.		
VEHICLE C NO.	ANY PASSENGER:	
VEHICLE D NO.	ANY PASSENGER:	
VEHICLE E NO.	ANY PASSENGER:	
VEHICLE F NO.	ANY PASSENGER:	
ANY WITNESS		
WITNESS CONTACT NO.		
PARTICULAR WORKSHOP		
MOBILE NO.		
CONTACT PERSON		
FAX NO.		
HAVE YOU BEEN APPROACHED BY UNKNOWN PERSON SOLICITING(S)/ OFFERING ACCIDENT CLAIMS ASSISTANCE?	<u>NO</u> / YES	

Ryder Auto Pte Ltd

2 Kaki Bukit Ave 2, #02-19/22 @ Kaki Bukit Auto Hub,
Singapore 417921

Email: ryderautoworkshop@gmail.com

Tel: 67418277



LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 301 Beach Road #17-04/08, The Centara, Singapore 189558

Tel: (65) 6292 7388 Fax: (65) 6296 2987 Website: www.lonpac.com.sg

OST Reg No.: F0-005535-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.: Z22VC05012071

Type of Cover: **THIRD PARTY**

1. Index Mark and Vehicle Registration Number

**MITSUBISHI FE83BE6SRDEA
- YN1025C**

2. Name of Policy Holder

HYLAND HOLDINGS PTE LTD

3. 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 TRIAL OR SPEED TESTING.

USE WHILST 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.

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

Anick

CHIEF EXECUTIVE
(Singapore Branch)

User ID: ZHANGNAN
Date Issued: 01/06/2022

