

ATION: Assessment Centre Services

Date: 29/05/2023	Job description	Time & Time Completed	Done by
RefNo NA/LPC23005408/d4	SAS e-filing		
VehNo YP 3448S	E-mail (within 2hrs, AP: 2hrs)		
DOA 26/05/2023 10:52am	I-Motor Claim Form		
OD/ TP/ Reporting Only	I-Motor W/O (within OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SGN 1221R	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 reparker.		
() Total Loss Case : to e-mail Insurer URGENTLY.		
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. (

Remarks: (INC Hotline: 6788 0610)	Date & Time Completed	Done by
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	Invoice Preparation Checklist	Amc (\$)	Id Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$30)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments:	5) PT: Follow-Through Survey (Resurvey) \$30		
Call 1:	For claiming against INC Only (wef 10 Jan 2005)		
Call 2/3:	6) TR: Re-inspection \$75		
	7) NI: Idau DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (N-n INC) against INC \$20		
	9) N12: Idau Mobile \$0		
	Invoice dated	Fax Charged	
	Invoice dated	Fax 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	29/05/2023 09:55 (SGT)
Reported by	Actual Driver
Date of Accident	26/05/2023 10:52 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BRICKLAND ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP3448S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ALN ENGINEERING PTE LTD
Company Reg No	2XXXXX516N
Email Address	admin@alnengrg.com.sg
Mobile Phone No	(Phone) +65-67497445
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	FUSO FM65FM2RDEB
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	7545

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z23VC05015409

DRIVER

Name of Driver	MALAIYANDI PAKINATHAN
NRIC No	SXXXX013Z
Date Of Birth	06/10/1961
Occupation	Outdoor

Date Of Driving Pass	28/06/2002
Driving experience	20 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91841243
Alt. Phone Number	-
Email Address	admin@alnengrg.com.sg
Address	APT BLK 70 CIRCUIT ROAD
Address complement	# 02-71
Postcode	370070
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	SGN1221R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	UMAHANTHAN MAHENDRAM
NRIC No	SXXXX179B

Contact Number	.....	(Phone) +65-91065501
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.



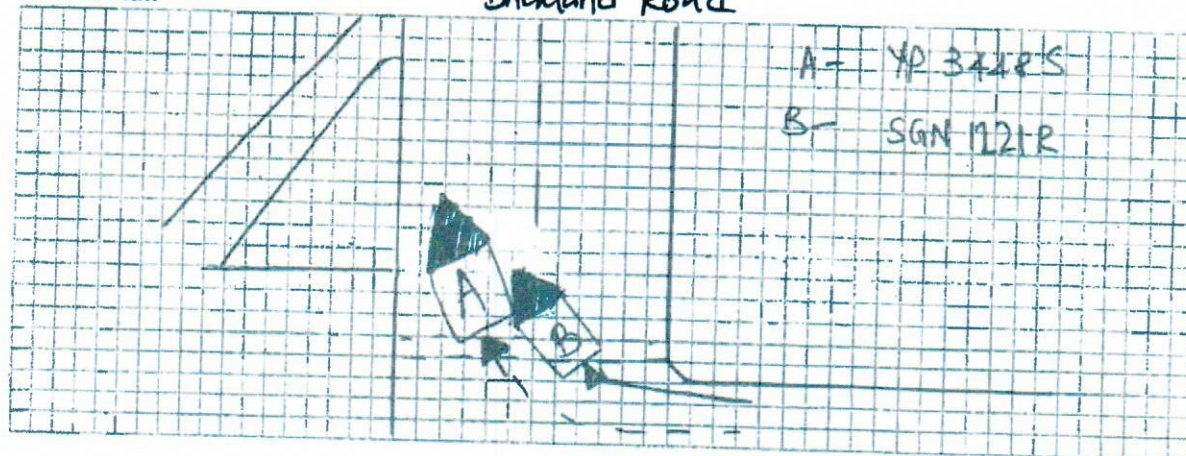
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Brickland Road



Describe Circumstance of the Accident

On the above stated date and time, I was travelling along Bickland Road turning to KTE (BKE). My vehicle and vehicle B was turning together to KTE (BKE) and vehicle B suddenly hit the rear right side of my vehicle. My lorry is a heavy vehicle and I was on the extreme left side of the lane. So as I was making the turn vehicle B also made the turn all of sudden which made him to collide with my vehicle.

Declaration

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



Policyholder's Signature / Date & Time

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

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

[Signature] 26/5/2023

[Signature] 29/5/2023

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 26/05/2023	TIME OF ACCIDENT : 10:52am
VEHICLE NO : YP 34485	TRANSMISSION : AUTO / <u>MANUAL</u>
MAKE & MODEL : Mitsubishi Fuso	LOCATION : Brickland Road
EXACT PURPOSE USE DURING ACCIDENT : <u>EMPLOYMENT</u> / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE : OD / THIRD PARTY / <u>REPORTING ONLY</u>
INSURANCE COMPANY : Lompac	POLICY NO : Z23VC05015409
TYPE OF COVERAGE : <u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : (SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER : ALN Engineering Pte Ltd	NRIC : 200513516N
ADDRESS :	CONTACT NO : 67497445
EMAIL ADDRESS : admin@alnengtg.com.sg	VIDEO RECORDING : YES / <u>NO</u>
NAME OF DRIVER : AS ABOVE / IF NO : Malaiyandi Pakinathan	NRIC : <u>814650132</u> CONTACT NO : <u>91841243</u>
DRIVER OWNER RELATIONSHIP : <u>employee</u>	PASSENGER : <u>0</u> MALE () FEMALE ()
DATE OF BIRTH : 06 / 10 / 1961	DRIVING PASSING DATE : 28 / 06 / 2002
OCCUPATION : INDOOR / <u>OUTDOOR</u>	ADDRESS : Apt Blk 70 Circuit Road # 02-71, S370070
ANY INJURIES : <u>NO</u> , IF YES : _____	POLICE REPORT : <u>NO</u> / IF YES WHERE ? _____
WEATHER CONDITION : <u>CLEAR</u> / RAINING / OTHERS	ROAD SURFACE : <u>DRY</u> / WET / OTHERS
VEHICLE B REG NO : <u>SGN 1221R</u>	VEHICLE C REG NO : _____
DRIVER NAME : <u>umichanthan Mahendram</u>	DRIVER NAME : _____
NRIC : <u>87762179B</u>	NRIC : _____
CONTACT : <u>91065501</u>	CONTACT : _____
VEHICLE D REG NO : _____	ANY WITNESS ? <u>NO</u> , IF YES :
DRIVER NAME : _____	NAME : _____
NRIC : _____	CONTACT : _____
CONTACT : _____	
WAS NOTICE OF PROSECUTION GIVEN? (YES / <u>NO</u>) IF YES, AGAINST WHOM : _____	WERE SEAT BELTS WORN ? : YES / <u>NO</u> WERE INJURY CONVEYED BY AMBULANCE : YES / <u>NO</u>



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.: F6-0005635-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.: Z23VC05015409

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

MITSUBISHI FUSO FM65FM2RDEB
- YP3448S

2. Name of Policy Holder

ALN ENGINEERING PTE LTD

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

01/01/2023

4. Date of Expiry of the Insurance

31/12/2023

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.

Excess

: S\$ 700.00 (SECTION 1)

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

S\$ 100.00 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 : MAYBANK

Anele

CHIEF EXECUTIVE
(Singapore Branch)

User ID: NCORHAYATI

Date Issued: 14/12/2022