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SN0823670001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 07/06/2023 10:14 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (07/06/2023 10:14 (SGT))



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.

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

07/06/2023 10:14 (SGT) **Actual Driver** 06/06/2023 16:15 (SGT) Upper Changi Rd N, Singapore TURNING LEFT INTO UPPER CHANGI ROAD EAST Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

YP8710B

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

STAR ENVIRONMENTAL SERVICES PTE. LTD.

2XXXXX264G

star.envi18@gmail.com

(Phone) +65-97784889

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Transmission

CC

Mitsuhishi Canter

Employment

No - Reporting only Commercial vehicle

Manual

2998

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Lonpac Insurance Bhd Z23VC05017476

DRIVER

Name of Driver

Passport No/FIN

Date Of Birth

Occupation

SANGAR MADHANRAJ

GXXXX267X

24/06/1991

Outdoor



Date Of Driving Pass 25/11/2021 Driving experience 1 YEAR AND 7 MONTHS Gender Male Mobile Number (Phone) +65-83122141 Alt. Phone Number Email Address star.envi18@gmail.com Address 9 TRACTOR ROAD Address complement Postcode 627970 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Employee Does Driver Own Other Vehicles? 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) 2 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 PASSENGER 1 Name R.RAMKUMAR Gender Male 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 SKETCH PLAN 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 **SLX4695A** Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WILSON TAN QIU YUN
NRIC No	SXXXX168J
Contact Number	(Phone) +65-91544484
Address	- <u>-</u>
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 <u>truthful and 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.
- 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

Actual Driver's Signature (if driver is not the Only Witnessed by Reporting Centre Personnel policyholder) / Date & Time (Name as in NRIC/ID card)

Sketch Plan

WPM CHANGEL FOR DEASY

GIVENBY

DATE OF THE SECOND STATES AND THE SECOND STATES AND THE SECOND SECOND

vJun2022

UPPER CHARGE ROMO MORTH

Describe Circumstance of the Accident ON 06/06/2023 AT ABOUT 16:15 HRS I WAS AT UPPER
CHANLIT ROAD MORTH & WAYTHO TO TURKE LEFT INTO
UPPAR CHANGI ROAD EAST. STOP AT THE JUNECTUM FOR
THE GRAHM DIGHT WITHOU IT TURM GRAHM I MAKE
A LAFT TURE & SUDDENLY I FECT A BUMP ON
my last there is A CAR Sex 4695A WAS A?
THE LEFT SIDE WHICH I DID MOT MOTICE HE WAS
THERE MY UKEN SIDE BRUSH A GAINST THE FROM OF
The CAR THAN ALL

Declaration

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

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)

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT: 06 - 06 - 2023	TIME OF ACCIDENT : 15 Pm
VEHICLE NO: YP 8710 B	TRANSMISION: AUTO/MANUAL
MAKE & MODEL: MITSUBISHI	LOCATION: UPPAR Changi Rode North
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE: OD / THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY: LON PAC INSUPPRINCE BILD	POLICY NO: Z 23 VC 05017476
TYPE OF COVERAGE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : (SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER: M. YARTHARAN	NRIC: G16962267X
ADDRESS: 05 coleman Street 1/02-17	CONTACT NO:
Pehinsula Excelsion Hotel (5) 1798	97784889
EMAIL ADDRESS: Star. envil 8 @gmil.com	VIDEO RECORDING : YES / NO
NAME OF DRIVER : AS ABOVE / IF NO : S. MADINAN PAJ	NRIC: CONTACT NO: 83122141
DRIVER OWNER RELATIONSHIOP :	PASSENGER: MALE () FEMALE ()
DATE OF BIRTH : 24 / 66 / 1991	DRIVING PASSING DATE: 25/ 1 / 2021
OCCUPATION: INDOOR / OUTDOOR	ADDRESS: 9, Tractor Road 627970
ANY INJURIES : NO, IF YES :	POLICE REPORT : NO/ IF YES WHERE ?
WEATHER CONDITION: CLEAR / RAINING / OTHERS	ROAD SURFACE : DRY / WET / OTHERS
VEHICLE B REG NO: SIX 4695A	VEHICLE C REG NO :
DRIVER NAME: WILSON TAN QIU YUN	DRIVER NAME :
NRIC: 57314168J	NRIC :
CONTACT: 91544484	CONTACT :
VEHICLE D REG NO :	ANY WITNESS? NO, IF YES:
DRIVER NAME :	NAME :
NRIC :	CONTACT:
CONTACT:	
WAS NOTICE OF PROSECUTION GIVEN? (YES /NO) IF YES, AGAINST WHOM:	WERE SEAT BELTS WORN ?: YES / NO
	WERE INJURY CONVEYED BY AMBULANCE : YES / NO



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.: Z23VC05017476

Type of Cover: COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

MITSUBISHI CANTER FEB71ER4SDEN

- YP8710B

2. Name of Policy Holder

STAR ENVIRONMENTAL SERVICES PTE LTD

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

14/05/2023

4. Date of Expiry of the Insurance

13/05/2024

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.

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\$ 2,500.00 (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-Part / Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE (Singapore Branch)

User ID: LEROI Date Issued: 24/04/2023