

NATIONAL Assessment Centre Services (wef 1 Jan'06)

Date In: 06/06/2023	Job description	Date & Time Completed	Done by
Ref No: NA/LPC23005802/d4	SAS e-filing		
Veh No: YQ 2092K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 30/05/2023 15:35	i-Motor Claim Form		
OD / TP / <u>Reporting Only</u>	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: **SMR 5661K** 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%. F: 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)	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

	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
	2) DA : Damage Assessment (\$100); INC (\$80)		
Driver/Owner:	3) TF : Towing Fee \$40/\$45		
	4) FT : Follow-Through Survey \$120		
Contact No:	5) FT : Follow-Through Survey (Resurvey) \$30		
	<i>For claiming against INC Only (wef 10 Jan 2005)</i>		
Damaged Portion:	6) TR : Re-inspection \$75		
	7) N1 : Idac 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		
QC Checked by (Engr-In-Charge):			
Auditors' Comments :-			
Cat. 1:	TP (N11) : TP (Non INC) against INC	\$20	
	9) N12: Idac Mobile	\$30	
Cat. 2 / 3:	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	06/06/2023 15:09 (SGT)
Reported by	Actual Driver
Date of Accident	30/05/2023 15:35 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG LORNIE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YQ2092K

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ASSOCIATED ENTERPRISES (S) PTE LTD
Company Reg No	1XXXXX283H
Email Address	thida@aespl.com.sg
Mobile Phone No	(Phone) +65-64550555
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU710R 14FT WIDE CAB 7T
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	4009

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z23VC05015619

DRIVER

Name of Driver	LEE TECK HEONG
NRIC No	SXXXX110B
Date Of Birth	09/05/1971
Occupation	Outdoor

Date Of Driving Pass	12/11/1990
Driving experience	32 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96714491
Alt. Phone Number	-
Email Address	thida@aespl.com.sg
Address	APT BLK 684C JURONG WEST STREET 64
Address complement	# 15-129
Postcode	643684
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	No Collision
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	SMR5661K
Vehicle Manufacturer	-
Vehicle Model	-
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

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 Authorised 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. 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

[Signature] 06/06/23

[Signature] 6/6/2023

Sketch Plan

Along Jormie Road

<p>— NO COLLISION —</p>	<p>A- YQ 2092K</p> <p>B- SMR 5661K</p>
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Describe Circumstance of the Accident

on the above stated date and time, I was informed by my insurance that my lorry was involved in an accident with SMK 5661K. As I know, my lorry did not involved in any accident, with SMK 5661K. I was carrying some heavy loads on my vehicle, it was some woods waste and 2 palletes which were tied up strongly. As I know, it might be the wastes or maybe some tiny types of things which might flew out and hit SMK 5661K. Since there is no collision between my vehicle and SMK 5661K I'm just lodging a report only.

Declaration

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



Policyholder's Signature / Date & Time

 06/06/23

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

 6/6/2023

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

Dear Sirs/Mdm

We refer to the above accident.

We have received third party property damage claim from the owner of vehicle number SMR5661K

We note that the accident has not been reported to us.

Please assist to get the insured driver at the time of accident to drive the insured vehicle to any of our Authorised workshops to file the accident report (Singapore Accident Statement) as soon as possible. We append herewith our list of Authorised workshops for your reference:

Our Panels | Lonpac Insurance Singapore

The driver also has to bring along the following items:

- 1) Driving license
- 2) NRIC if he is Singaporean/Singapore Permanent Resident, or Work Permit if he is a foreign worker
- 3) Certificate of Insurance
- 4) Company stamp

Thank you.

Best Regards

Eng Huey Ni
Asst. Claims Manager | Lonpac Insurance Bhd
300 Beach Road, #17-04 The Concourse, Singapore 199555
DID: 6279 9244 | Fax: (65) 6296 2706

We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

From: Thida <thida@aespl.com.sg>

Sent: Monday, June 5, 2023 2:43 PM

To: ENG HUEY NI <hneng@lonpac.com>

Cc: MT_Claim_SG <mt_claim@lonpac.com>; 'Enquiry' <enquiry@aespl.com.sg>

Subject: RE: Our Ref: 23/23/23/VC05/027480 - Non-Reporting- Accident involving YQ2092K (insured) & SMR5661K on 30.5.2023 at about 1535hr along Lornie Road

Hello Eng Huey Ni,

Our company lorry don't have any accident. If have our driver will inform to company.

Regards,
Thida

We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

From: ENG HUEY NI <hneng@lonpac.com>

Sent: Monday, 5 June 2023 2:08 PM

To: enquiry@aespl.com.sg; thida@aespl.com.sg

Cc: MT_Claim_SG <mt_claim@lonpac.com>

Subject: Our Ref: 23/23/23/VC05/027480 - Non-Reporting- Accident involving YQ2092K (insured) & SMR5661K on 30.5.2023 at about 1535hr along Lornie Road

Lonpac External - General

Lonpac External - General

Associated Enterprises (S) Pte Ltd

Thida

From: ENG HUEY NI <hneng@lonpac.com>
Sent: Monday, 5 June 2023 3:40 PM
To: Thida
Cc: MT_Claim_SG; 'Enquiry'
Subject: RE: Our Ref: 23/23/23/VC05/027480 - Non-Reporting- Accident involving YQ2092K (insured) & SMR5661K on 30.5.2023 at about 1535hr along Lornie Road

Lonpac External - General

Lonpac External - General

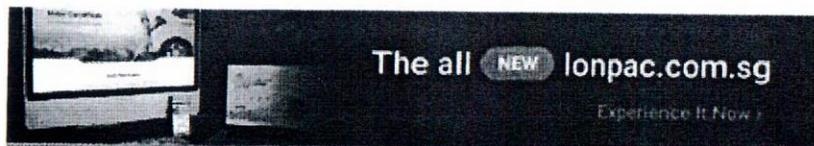
Hi Thida,

Thank you for your prompt reply.

Even if there was no collision, the insured is still required to lodge a GIA report (Singapore Accident accident) as a formal record in order for us to handle the third party claim accordingly.

Best Regards

Eng Huey Ni
Asst. Claims Manager | Lonpac Insurance Bhd
300 Beach Road, #17-04 The Concourse, Singapore 199555
DID: 6279 9244 | Fax: (65) 6296 2706



IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 30/05/2023	TIME OF ACCIDENT : 15:35 pm
VEHICLE NO : YQ 2092K	TRANSMISSION : AUTO / <u>MANUAL</u>
MAKE & MODEL : Hino / XZU710R	LOCATION : Along Jernie Road
EXACT PURPOSE USE DURING ACCIDENT : <u>EMPLOYMENT</u> / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE : OD / THIRD PARTY / <u>REPORTING ONLY</u>
INSURANCE COMPANY : Lonpae	POLICY NO : 223VC05015619
TYPE OF COVERAGE : <u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : (SALOON / <u>COUPE/MPV/VAN/LORRY/MOTORCYCLE</u>)
NAME OF OWNER : Associated Enterprises (S) pte ltd	NRIC : 197900283H
ADDRESS :	CONTACT NO : 6455 0555
EMAIL ADDRESS : hida@aespl.com.sg	VIDEO RECORDING : YES / <u>NO</u>
NAME OF DRIVER : AS ABOVE / IF NO : Lee Teck Heong	NRIC : <u>S7116110B</u> CONTACT NO : <u>9671 4411</u>
DRIVER OWNER RELATIONSHIP : <u>employee</u>	PASSENGER : 0 MALE () FEMALE ()
DATE OF BIRTH : 09 / 05 / 1971	DRIVING PASSING DATE : 12 / 11 / 1990
OCCUPATION : INDOOR / <u>OUTDOOR</u>	ADDRESS : Apt Blk 684C Junong West street 64 # 15-129, SG43684
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>SMR 5661K</u>	VEHICLE C REG NO : _____
DRIVER NAME : _____	DRIVER NAME : _____
NRIC : _____	NRIC : _____
CONTACT : _____	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 ? : <u>YES</u> / NO
	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) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-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. : Z23VC05015619

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

HINO XZU710R 14FT
- YQ2092K

2. Name of Policy Holder

ASSOCIATED ENTERPRISES (S) PTE LTD

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

08/01/2023

4. Date of Expiry of the Insurance

07/01/2024

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 WHILE 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 OR DISTRIBUTOR-OWNED MOTOR WORKSHOP

* 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 : DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD

CHIEF EXECUTIVE
(Singapore Branch)

User ID: FA2058

Date Issued: 29/12/2022