



Century Motors (Singapore) Pte Ltd

6 Marsiling Lane Singapore 739145 E: claims@autoinsure.com.sg

T: (65) 3157 2626

GST No.: MR85000009

Our Ref: SNB9695J WITHOUT PREJUDICE

Your Ref: YP4250M Accident Date: 18/06/2023

<u>13/7/23</u>

ATTENTION: MOTOR CLAIMS DEPT

Email: mt_claim@lonpac.com

Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

CLAIMANT: YONG AH HENG

ACCIDENT INVOLVING SNB9695J & YP4250M ALONG PIE, SINGAPORE ON 18/06/2023

We are instructed by **YONG AH HENG** to claim damages against your insured in connection with a road accident ON 18/06/2023 involving our client's motor registration number and motor vehicle registration number driven by you or your a driver at the material time.

We are instructed that your negligent driving and/or management of your vehicle caused the accident. As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair (with GST) after surveyor final esti.		\$ 1,458.00
2) Loss Of Use (Includes loss of PRS and loss of Sun & PHs (9 days X \$120)		\$ 1,080.00
3) LTA/GIA Search Fees		\$ 31.00
4) Other incidentals		\$ 200.00
	TOTAL:	\$ 2,769.00

A copy of each of the following supporting documents is enclosed:

- 1) GIA report of our Insured
- 2) Repairer's Invoice
- 3) Letter of Authorization
- 4) LTA/GIA Search Receipt
- 5) Rental Invoice

Please note that if you are insured and wish to claim under your insurance policy, you should immediately pass this letter to your insurer

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within **8 weeks** of your receipt of this letter.

For any further enquiry, kindly contact us via email to claims@autoinsure.com.sg or call 3157 2628 directly.

Yours Faithfully,

Mae
Claim Executive

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.

- 4. The issue and acceptance of this is form by instrained 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 19/06/2023 14:59 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 18/06/2023 13:53 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Volkswagen

Vehicle Registration Number SNB9695J

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YONG AH HENG NRIC No SXXXX908D Email Address ahhengy@gmail.com Mobile Phone No (Phone) +65-97118289 Alternative Phone No

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? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1390

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNA00273362201

DRIVER

Name of Driver YONG AH HENG NRIC No SXXXX908D Date Of Birth 12/01/1962 Occupation Outdoor

Date Of Driving Pass 14/01/1982 Driving experience 41 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-97118289 Alt. Phone Number Email Address ahhengy@gmail.com Address BLK 183B WOODLANDS ST 13 #17-623 Address complement Postcode 732183 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 Collision - Head to Rear Weather Conditions Clear Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name NA Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Bukit Panjang North Neighbourhood Police Post Police Station Address Blk 27 Marsiling Drive Singapore 730027 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT 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 YP4250M

Vehicle Manufacturer

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD

Motor Private Car

MX1E

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

AN0478A Cov. Type:C

SN

Engine No.: CAXE95083

CERTIFICATE No.

Index Mark and Registration Number of Vehicle

SNB9695J

Cha. No.:WWWZZZ16ZFM001605

AUTOSAFE

2. Name of Policy Holder

YONG AH HENG

 Effective date of the Commencement of 21/12/2022 Insurance for the purposes of the Regulations, (00:00:00) Ordinance or Enactment 21/12/2022

4. Date of Expiry of Insurance 20/12/2023 Named Drivers Ex Sect. I

\$\$500.00

DMPCSNA00273362201

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 \$\$3,000.00 \$\$500.00

Ex Sect. I - Age >= 26 * Age as at date of accident

EX ON WINDSCREEN . S\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his 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.

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward fultion driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

Agent Assistance (IH) Hotline: 6287 7077

Issued By: Wang Chong Yu Authorised Officer For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

箭 3 Anson Road #16-00 Springleaf Tower Singapore 079909

C 6389 6111

₱6222 1033

www.sg.cntaiping.com

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.
- 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 Traffic Police Department for investigation.

- 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;

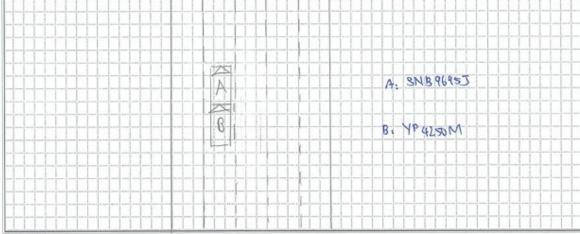
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of 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.

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)

Sketch Plan



Jun2022

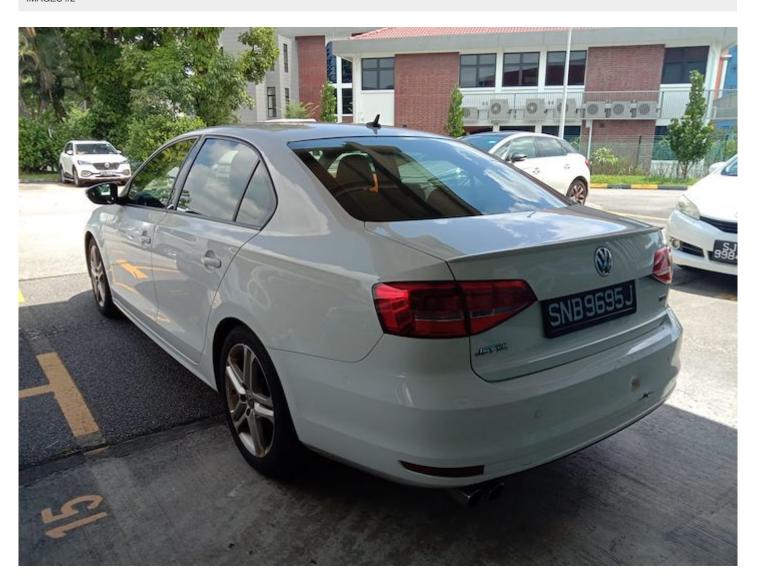
Refer to	police report 7/20230619/2042
-	Amend the statement of police cepart there are 5 lanes in total and the 5th lane is closed as the are tree catting on going. I was truckling at the 4th lane and the accident happen in 4thlane.

Declaration

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

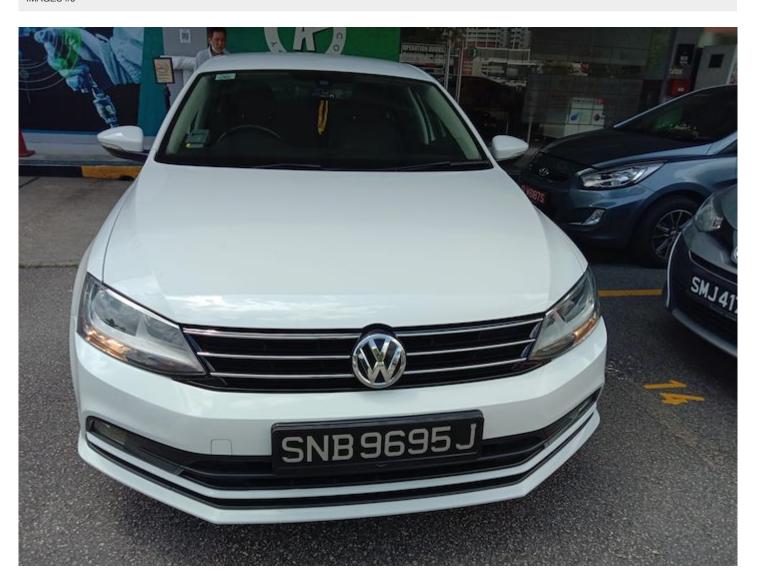
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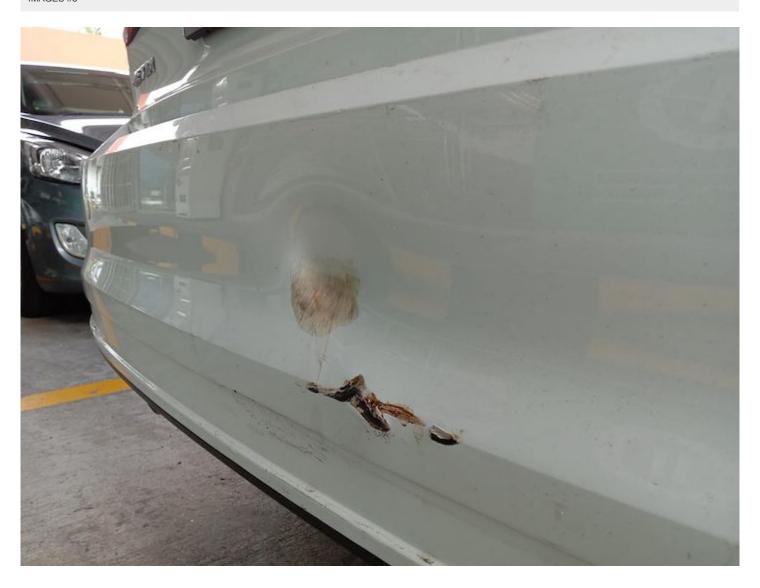








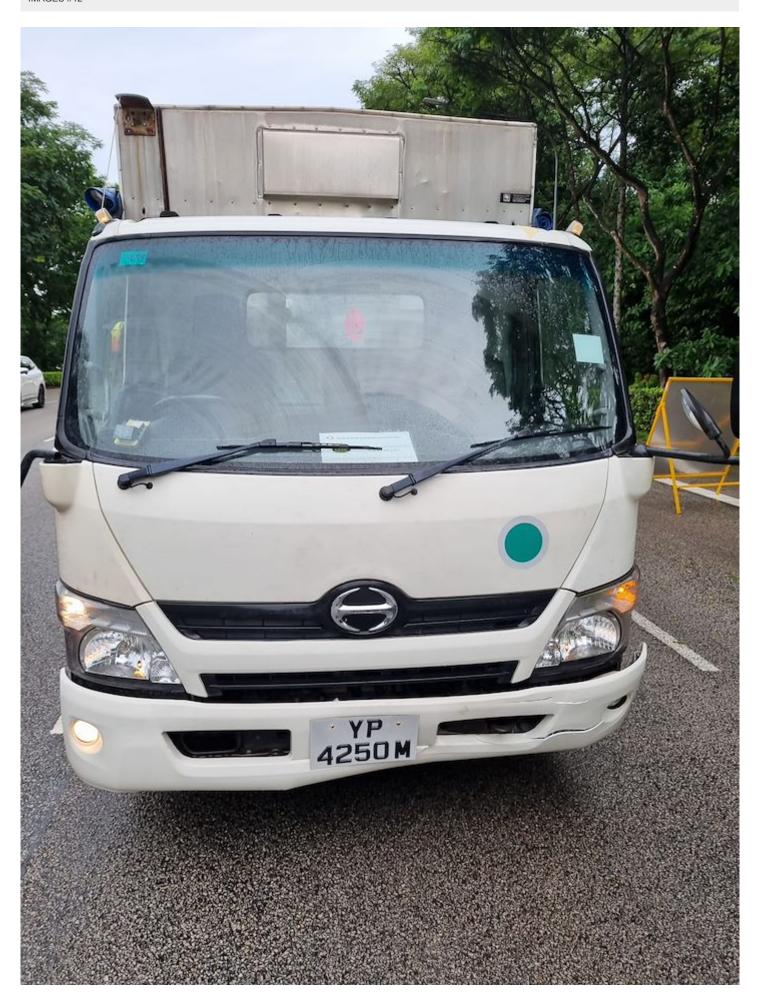


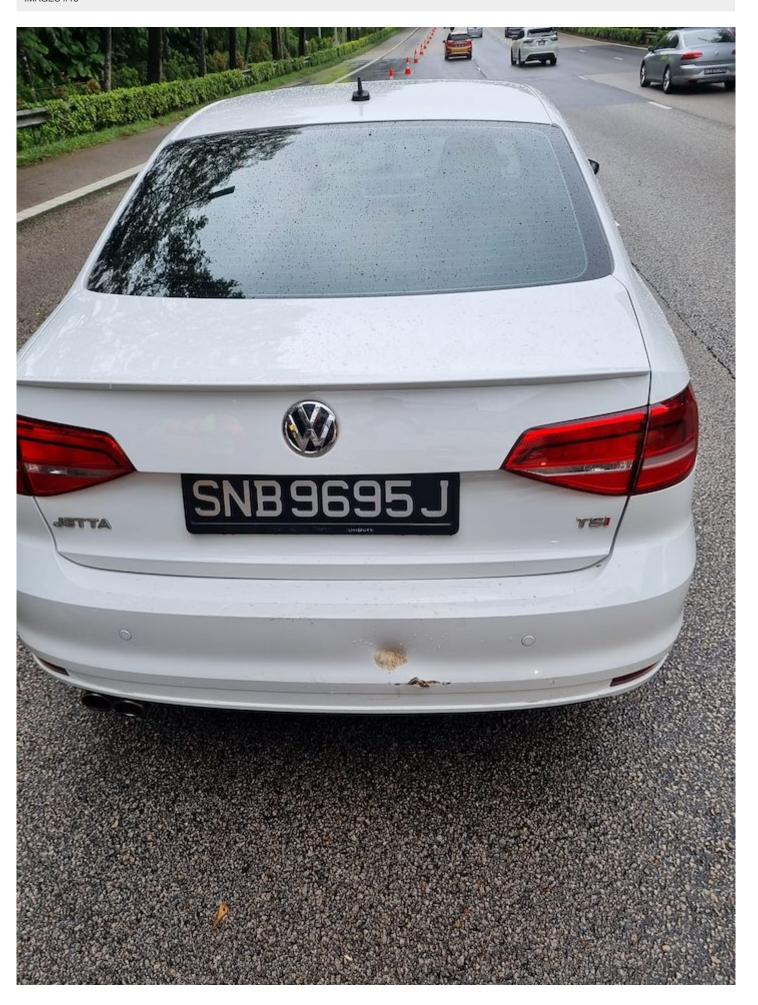


















1 of 3 Report No. T/20230619/2042

Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Tel No: 1800-3689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/06/2023 12:40			Vide Report No.:	Station Diary No.: 11			
Informa	nt's Particu	ulars					
Name of Informant: YONG AH HENG			Address: APT BLK 183B WOODLANDS STREET 13 #17-623 SINGAPORE 732183				
ID Type / ID No.; NRIC NO / S1532908D Nationality: SINGAPORE CITIZEN			Contact No.: Home/Office: Mobile: 97118289				
			Email:				
Sex: Age: Date of Birth: Male 61 12/01/1962			Type of Informant: Driver				
Race: Chinese			Language:				
Occupation: Bus driver			Driving Licence Informati Class: 3,4	on: Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/06/2023 13:35	Type of Location Expressway
Location: PAN-ISLAND Weather: Clear	EXPRESSWAY	Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled		Fraffic Volume: Heavy
Type of Collis	sion:			Anyone conveyed by ambulance:

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
SNB9695J	Car	VOLKSWAGO N	Jetta	White	Slightly Damaged	1		
YP4250M	Lorry	HINO	XZU710R- HKFMS3	White	Slightly Damaged	0		

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SNB9695J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNA0027336 2201	21/12/2022	20/12/2023			





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027 2 of 3 Report No. T/20230619/2042

Tel No: 1800-3689999

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian Ir	rvolved: No					14004788
No. of Pedestrian	s Injured: NIL		Use of Pe	destrian	Cross	ing: NA
Driver						
Name	YONG AH HENG			ID No		S1532908D
Related Vehicle	SNB9695J (Car)			Conta	ct No.	97118289
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

V1 : SNB9695J V2 : YP4250M

On 18/06/2023 at 1335hrs, I was driving V1 at PIE Towards Woodlands near Eng Neo Ave Exit for about 40KM/HR as the traffic was heavy at the point of time, the road was slightly wet as the rain stopped earlier. There are 4 lanes in total and the 4th lane is closed as there are tree cutting on going. As i was travelling at the 3rd lane on V1, i observed that there was a car infront which slowly came to a stop which i did as well. Out of sudden. V2 collided slightly onto V1 at the rear. Both V1 and V2 came step out of their vehicle and took photo of the accident. V2's driver contact their boss HP: 87268660 and he handed over the phone to me. I was informed by the boss to claim insurance against them. Thereafter we drove in our separate way and i was told by my insurance to lodged a Police Report regarding this.

I would like to state that i did not ask for V2's particular as his boss agree to go via insurance claim.

There was no one injure at the point of time and no government property involve.

V1 sustain minor dented (Circle Shape and 1 line mark) at the rear of the vehicle below car plate.

V2 sustain a dented and cracks at the front middle and left bumper.





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027 3 of 3 Report No. T/20230619/2042

Tel No: 1800-3689999

CONTINUATION OF REPORT

Signature of Officer Recording The Report: L / SGT 1 IVEN LIM CHANG HENG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 12:40
Officer In Charge Of Case: TP / GIA / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:



IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: SC2H236J0002 Original Report No: _ Vehicle Registration No: __SNB9695J Name (as shown in NRIC): YONG AH HENG NRIC/FIN/Passport No: S1532908D (*Vehicle Driver/Policyholder) (*) Please delete as appropriate BLK 183B WOODLANDS ST 13 #17-623 732183 __ Singapore (9711 8289 Contact (Tel):_ ____ Mobile No.: ___ ahhengy@gmail.com Email Address: _ 18/06/2023 Date of Accident: ____ Time of Accident: __ Place of Accident: _ Insurance Company: __ CHINA TAIPING (B) ADDITIONAL INFORMATION / AMENDMENTS: I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments: TO ATTACH NEW SKECTH PLAN Policyholder / Actual Driver's Signature Reporting Centre Personnel's Signature Date: Name (as in NRIC/ID card):

Date:

vJun202



Century Motors



Co. Reg No. : 192800002R GST Reg No. : MR85000009

6 MARSILING LANE SINGAPORE 739145, Tel No.: 3157 2626

TAX INVOICE

Account Details			Account No			Customer	Details	Customer Details		
LONPAC INSURANCE BHD 300 BEACH ROAD, 17 - 04/06 THE CONCOURSE SINGAPORE 199555		B2000520 / LONPAC Document No. 63001350		Mr Yong Ah Heng 183B Woodlands St 13 #17-623 Singapore 732183						
	NGAPURE 199000			Document 10/07/20			2193			
Ye	ar	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No.	/ Remarks	
3	0				SNB9695J/T	0	10829	SNB96	95J/TP	
	c	Chassis No.	Engine No.	Terms	SA / Counter	1	/ehicle In	Colle	ected On	
				60	Lim Mei Hong	-/-/	- 0,00	-/-/	0.00	
L	Cd		Job/Parts Desc	cription		Qty	Unit Price	Disc %	Amount	
		PANEL BEATING W	ELDING, AND SPR	AY PAINTING						
		PANEL BEATING W	ELDING, AND SPR	AY PAINTING						
		behalf of Motors (S) Pte Ltd		s Signature	Charge Su	- 33	Total GST 8.00	0%	1,350.0	



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

9 Temasek Boulevard, Suntec City Tower Two #42-01B Singapore 038989

 $\hbox{E-mail: gears-support@shift-technology.com}$

GST Registration: M400017735

TAX INVOICE

Date of Request: 20/06/2023 **Your Ref No: CM1131**

Dear Sir/Madam,

Date of Accident: 18/06/2023 13:30 (SGT)

Vehicle No: SNB9695J Place of Accident: Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)		
YP4250M	Singapore	(31.00)	1	(28.70)		
GST Amount	(2.30)					
Total Amount Due (GS	Total Amount Due (GST Inclusive)					

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.