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 10/07/2023 15:49 (SGT) Reported by **Actual Driver** Date of Accident 10/07/2023 08:25 (SGT) Exact Location of Accident Bartley Rd East, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN2311U

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TS Landscape & CE Pte Ltd Company Reg No 2XXXXX673N Email Address tslandscape.contracts@gmail.com Mobile Phone No (Phone) +65-65430281 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Isuzu Model NMR85 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

No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC

2982

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd Policy Number / Cover Note Number Z23VC05015754

DRIVER

Name of Driver Bepari ABdul HQU Passport No/FIN GXXXX019L Date Of Birth 06/04/1992 Occupation Outdoor

Date Of Driving Pass 03/07/2023 Driving experience 0 MONTH Gender Male Mobile Number (Phone) +65-81521996 Alt. Phone Number Email Address tslandscape.contracts@gmail.com Address c/o company address Address complement Postcode 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 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? 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to the 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 WC1570B Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Commercial vehicle

Lim Leong Hai

SXXXX094G

Vehicle Category

Name of Driver

NRIC No

Contact Number	-	
Address	-	
Address complement	 <u>-</u>	
Postcode	-	
Insurance Company Name	 <u>-</u>	
Nature Of Damage	 <u>-</u>	
Details of property damaged in accident		
No. Of Passenger (Including Driver)		



SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Actual Driver.
- 3 Information provided must be as <u>Institut and accurate as possible</u>. Any wilfut 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.
- 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 fodgement of this report to the insurers, you handly 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 postessed 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 socident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responsing 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); anotice
- (v) complying with applicable law in administering, processing, fundling and/or dealing with my dains. (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

TS-LANDSCAPE & TECHTON any of the Insurers and/or GIA to their third-party service providers or agents 15 CHANGI NORTH STREETIC 19033; stod outside of Singapore, for one or more of the above Purposes.

I-LOFT @ CHANGI, SINGAPORE 498765

TEL: 6543-0281 FAX: 6543-0520

Gyow

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Ture
10 JUL 2023

Sketch Plan

Driver's Signature if teliver is not the policyholder / Date
& Time
10 JUL 2023

Withested by Repetiting Centre Personnel
(Name as in NRIC/ID card)

Jenny Lim

A. YN D3 IN U

B. WC I5 10 B.

1

01	1 10.07.23 at about 0825 in the morning, 9 was driving along
Во	artley Road Rust on the 2nd lane. As I was moving in a
_	straight manner, there was a strong impact from my left.
	The impact was so great that it pushed my vehicle to the
	right side. I stopped my vehicle and got down to check
	A truck bearing no. W C 1570B had encroached into
	my lane from 3rd lane and thus collided into the left
	side of my rehide. I asked the truck driver for his
	details and he gave me bnly his IC. I took a
_	few photos at the scene and left.
	WER WAR E STREET - 401 2 CHANG, SINGARORE ARE OS
	PROTEIN LIKE SHAPE
_	
_	

Declaration

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

TS LANDSCAPE & CE PTE LTD

15 CHANGI NORTH STREET 1 #01-33 I-LOFT @ CHANGI, SINGAPORE 498765

TEL: 6543-0281 FAX: 6543-0520 Driver's Signature (if driver is not the policyholder) / Date 8 Time 4 0 JUL 2023

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

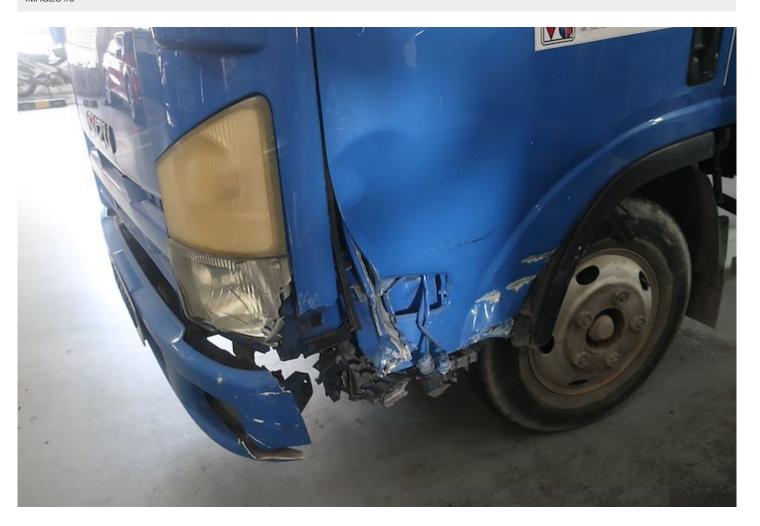
Jenny Lim
2

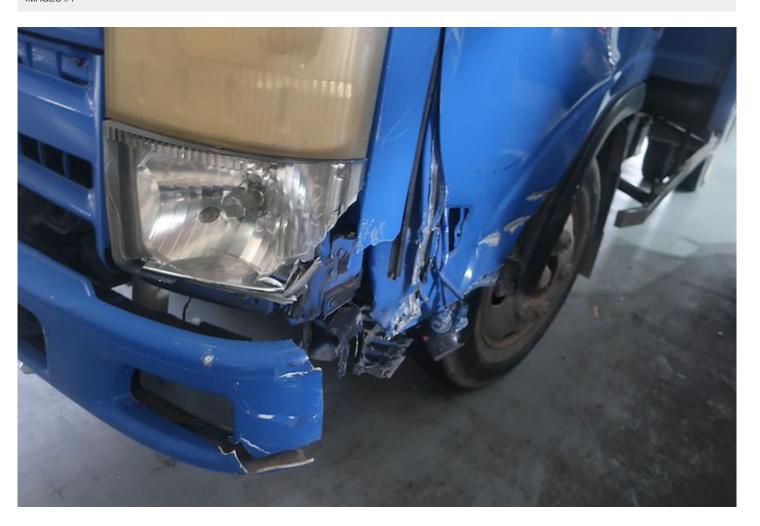
40 JUL 2023

*29360





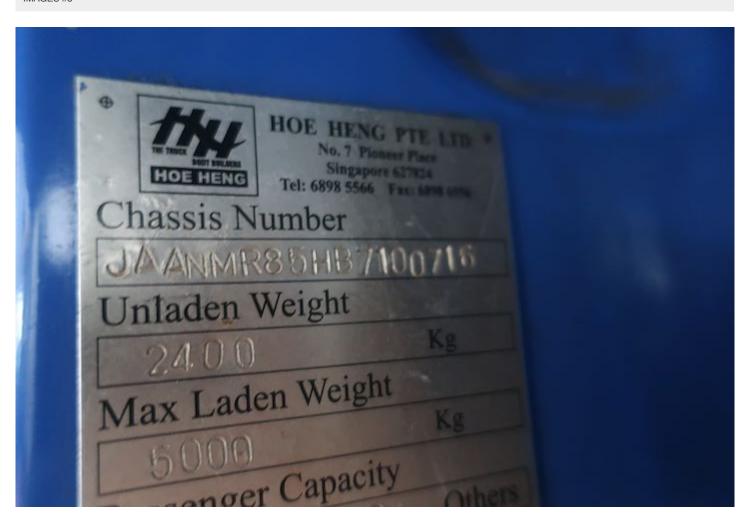














LONPAC INSURANCE BHD (SBSFC5635C)

Singapore Office: 300, Beach Road #17-04/05, The Concourse, Singapore 199555. Tel: (85) 8250 7383 Fax: (65) 6296 3767 Website: www.ionpac.com.sg GST Reg No.: FG-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.: Z23VC05015754

Type of Cover: COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

ISUZU NMR85UH5A 3.0 MT TURBO 2WD 2DR 5.0T

- YN2311U

2. Name of Policy Holder

TS LANDSCAPE & CE PTE LYD

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

20/01/2023

4. Date of Expiry of the Insurance

19/01/2024

(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.

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

: \$\$ 700.00 (SECTION 1)

\$\$ 2,500.00 (SECTION 1) ADDITIONAL EXCESS FOR YOUNG AND/OR INEXPERIENCED DRIVERS \$\$ 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: THINK ONE CREDIT PTE LTD

CHIEF EXECUTIVE

(Singapore Branch)

TAN INSURANCE BROKERS PTE LTD 3A/5A Aliwal Street, Chenn Leonn Building Singapore 199896 www.tib.com.sg

陳保險經紀私營有限公司

Tel: (65) 6742 6766 Fax: (65) 6742 6669

User ID: Y12002 Date Issued: 09/01/2023

Certificate of Insurance - Page 1 of 1