ST0X23CL0001-01 / The One Holdings Pte Ltd ENTRY DATE & TIME: 21/12/2023 10:16 (SGT) SUBMITTED BY: Lim Zi Xuan VERSION: 2 (12/07/2024 13:44 (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 First Submission 21/12/2023 10:16 (SGT) Reported by **Actual Driver** Date of Accident 16/12/2023 14:08 (SGT) Exact Location of Accident Singapore Additional Location Information Junction of Brickland Rd & Sungei Tengah Road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Higer

7475

Vehicle Registration Number PC8250L

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Diamond Coach (S) Pte Ltd Company Reg No 2XXXXX503C Email Address booking@diamondcoach.com.sg Mobile Phone No (Phone) +65-91508771 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model **KLQ6118K** Variant Multi Color 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 Bus Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D20MCV0004877 03

DRIVER

Name of Driver Selladurai Suresh Passport No/FIN GXXXX633K Date Of Birth 25/05/1982 Occupation Outdoor

Driving Pass Date 27/05/2009 Driving experience 14 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-98602489 Alt. Phone Number Email Address booking@diamondcoach.com.sg Address Apt Blk 22 Marsiling Dr Address complement #05-109 Postcode 730022 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 Sketch Plan 2. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number XD8959B Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle

Yeo Eng Kim

SXXXX453D

Name of Driver

NRIC No

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	WC7789Z
Vehicle Manufacturer Vehicle Model	-
	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Yeo Hock Soon
NRIC No	SXXXX224H
Contact Number	-
Address	-
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
3	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

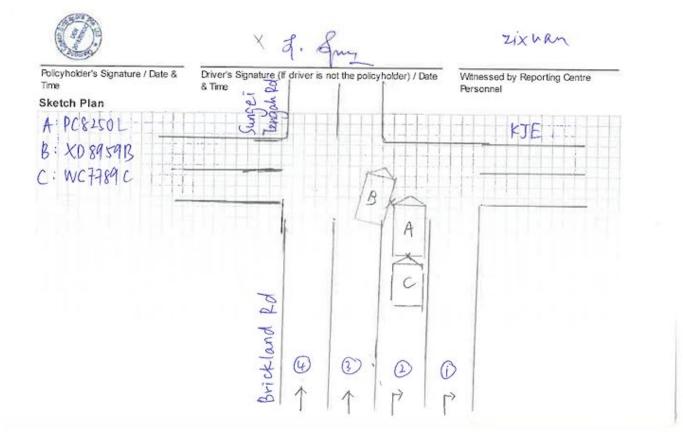
SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised 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.
- 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.
- 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Describe Circumstances of the Accident
On 16th Dec 2023 (@ about 14: 08hrs: I was driving a bus (PC82502) along
the 2nd lane of Brickland Road. After waiting for the traffic light. I was about
to turn right. Suddenly vehicle B (XD8959B) art into my lane and collider
onto my vehicle LH side mirror. Then I braked and vehicle (WC7789C) behir
my bus crashed in the rear of my bus. Then we exchanged particulars. That
all.
Ne declaration We declare the foregoing particulars are true in every respect.

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

& Time

Policyholder's Signature / Date &

Time

ZIXUM

Witnessed by Reporting Centre

Personnel



































GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

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

1.77	ADDENDUM
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
Original Report No :	STOX 23CL 0001 Vehicle Registration No: PC 8 250L Selladwai Swesh
Name(as shown in NRIC):	seriaawar suresh
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No:	G7304633K
Address:	Apt Blk 22 Marsiling Dr. 705-109, S730022
Contact (Tel):	(P/F):
(Email):	booking @ diamon d coach. com. sq
Date of Accident :	16/12/2023 Time of Accident: 14:08hrs
Place of Accident :	16/12/2023 Time of Accident: 14:08hrs Junction of Bricklan d Rd 4 Sungei Tengah Road
Insurance Company:	TII O
to WC7789 =	
J. Smy	
ignature of Vehicle Owner /	/ Driver
ate: 1/7/2024	
(1) 7 10 7	

Operating Hours: Monday to Friday 9am to 5pm