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.

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 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 24/07/2024 15:29 (SGT) Reported by **Actual Driver** Date of Accident 24/07/2024 08:10 (SGT) Exact Location of Accident ECP, Singapore Additional Location Information ECP (City) (Near Exit 7A) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PD3378E

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Diamond Coach Singapore Pte Ltd Company Reg No 2XXXXX503C Email Address booking@diamondcoach.com.sg Mobile Phone No (Phone) +65-93299907 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Volvo Model B11r 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 10837

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D23MCV0007939

DRIVER

Name of Driver Abdul Malik Bin Aris NRIC No SXXXX960I Date Of Birth 18/04/1966 Occupation Outdoor

Driving Pass Date 17/02/1994 Driving experience 30 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-96384583 Alt. Phone Number Email Address booking@diamondcoach.com.sg Address Apt Blk 747 Woodlands Circle Address complement #08-708 Postcode 730747 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 Collision - Head to Rear

Type of Accident Collision - Head to Rear Weather Conditions Clear Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 17 No
PASSENGER 1	
Name Gender	NA Male
PASSENGER 2	
Name Gender	NA Male
PASSENGER 3	
Name Gender	NA Male
PASSENGER 4	
Name Gender	NA Male
PASSENGER 5	
Name Gender	NA Female
PASSENGER 6	
Name Gender PASSENGER 7	NA Female

NA

Female

Name

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Traffic Police

(Phone) +65-65470000

(Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

Was notice of intended Prosecution given?

No

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? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLH5129X Vehicle Manufacturer Honda Vehicle Model Civic Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver Yow Hoe Chor NRIC No SXXXX641E Contact Number (Phone) +65-93693191 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 Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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.
- 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)

Lunderstand, 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.

(collective), the "Purposes")

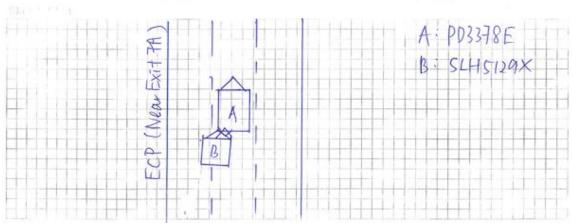
- (b) all inserer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers law turns, may/are permitted to collect, use, disclose and/or process my third and in time or more of the above Purposes; and
- (c) my service (greation mayor in the disclose) If the Visual Control of the first the first the province of the first service of the first the first service of the first servic



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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240724/7032

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 24/07/2024 11:24		Vide Report No.: G/20240724/0048	Station Diary No.:	
Informan	t's Particular	S			
Name of Informant: Abdul Malik Bin Aris		Address: 747 Woodlands Circle #08-708 SINGAPORE 730747			
ID Type / ID No.: NRIC NO / S1752960I			Contact No.: Home/Office: Mobile: 96384583		
Nationality: SINGAPORE CITIZEN		Email: booking@diamondcoach.	com.sg		
Sex: Age: Date of Birth: Male 58 18/04/1966		Type of Informant: Driver			
Race: Malay		Language: English			
Occupation: Bus driver		Driving Licence Information Class:	on: Date of Expiry:		

General Information	of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/07/2024 08:10	Type of Location Straight Road	
Location:	1				
EAST COAST PAR	RKWAY				
Weather: Clear		Road Surface: Dry			
		Traffic Control: Not Controlled	0.000	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				one conveyed by bulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
PD3378E	Bus/Coach/Mini bus					0

Details of Person Involved		
Any Pedestrian Involved: No	AS:	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA	



T/20240724/7032

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20240724/7032

CONTINUATION OF REPORT

Driver						
Name	Abdul Malik Bin Aris		ID No),	S1752960I	
Related Vehicle	PD3378E (Bus/Coach/Minibus)			Conta	act No.	96384583
Hospital/Clinic	NIL			Class Drivir Licen Expir	ıg	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Dis			narge	NIL	
No. of Days grante	ed Medical Leave (MC)	NIL	Degree of	Injury	NIL	

Brief Details.

On the above mentioned date & time. I was driving my bus plate number PD3378E with 16 passenger on board. I was travelling along ECP (City) towards Harbourfront on the second lane. Suddenly I felt the impact from my bus rear portion. I stopped my bus and came down and saw Vehicle B SLH5129X hit on my bus rear portion. We exchange particulars and contact numbers. Then I saw that the driver of Vehicle B was injured and called the traffic police.



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



3 of 3 Report No. T/20240724/7032

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/07/2024 11:24
Officer In Charge Of Case:	Classification Of Case:
NP168	