

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 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 ability.
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 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 Report	15/12/2017 15:21
Date Of Accident	14/12/2017 18:00
Exact Location Of Accident	JUNCTION OF ADMIRALTY ROAD WEST & WOODLANDS AVE 4
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	CB77H
Insured/Policyholder	
Name Of Registered Owner	AIK SHEN BUS SERVICE
Co Reg No	29635400K
Email Address	AIKSHEN1@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96327095
Alternative Phone No	OFFICE-62694708
Vehicle Particulars	
Manufacturer	YUTONG
Model	ZK6107H-6.7 D (M)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY GOING TO FETCH CUSTOMER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	BUS
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5068101650-03
Cover Note Number	
Driver	
Name of Driver	LIM EK CHOI
NRIC No	S0705794F
Date Of Birth	27/09/1950
Occupation	OUTDOOR
Date Of Driving Pass	21/10/1975
Driving Experience	42 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94569755
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK. 177 WOODLANDS ST. 13 #13-279
Postcode	730177
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON THE MENTION DATE & TIME, I WAS AT THE WOODLANDS AVE 4 TRAFFIC LIGHT, BEFORE MOVING OFF, THE TRAFFIC LIGHT WENT FAULTY. EVERY CAR JUST INCH FORWARD. I WANT TO TURN RIGHT, I TURN RIGHT AND STOP AT THE PEDESTRIANS CROSSING TO LET TWO PEDESTRIANS CROSS. SUDDENLY VEHICLE B GRACE AGAINST MY BUS FRONT LEFT PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	CB3868M
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	CHELLAIAH MURUGESAN
NRIC/Passport Number	G8231978L
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan

SKETCH PLAN

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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



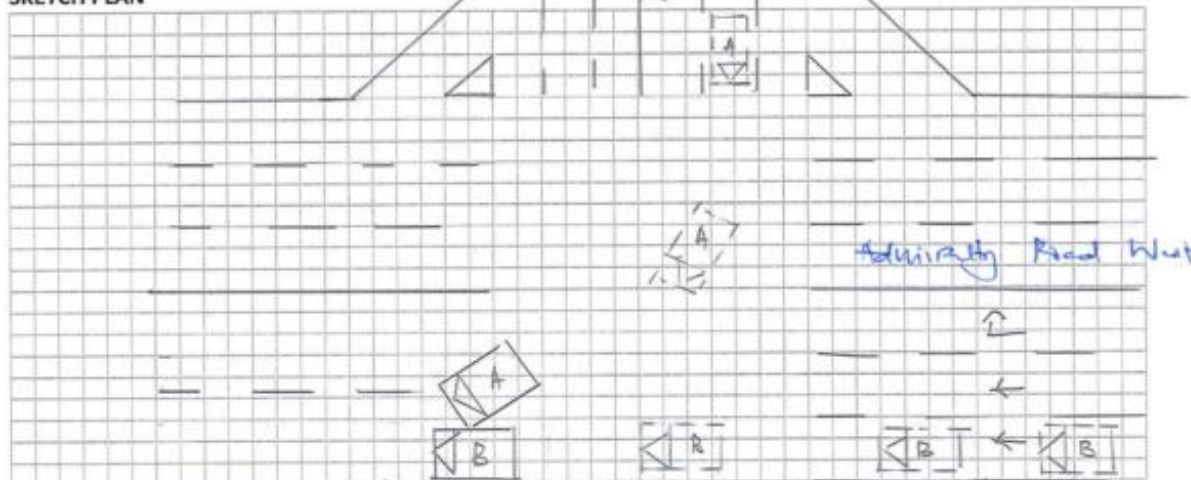
Policyholder's Signature
Date & Time:

X Lin
Driver's Signature
(If driver is not the policyholder)
Date & Time:

[Signature]
Reporting Centre Personnel's Signature
Name: *Teo Wee Sheng*
NRIC/FIN No.: *S84603070*

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A - CB7714
B - PC3861m

on the ABOVE mention date & time. I WAS AT the
Woodlands Ave 4 TRAFFIC light, BEFORE moving OFF,
the traffic light went faulty. Every CAR just inch
forward. I want to turn Right. I turn Right and
stop at the pedestrians crossing, to let two pedestrians
cross. Suddenly van B' GRACE against my Bus Front
left portion.

During time of Accident, I was going to fetch customer.

DECLARATION

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



Policyholder's signature
Date & Time

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Tee Wei San
NRIC/FIN No.: S89603070

LOG CARD Pg. 1

Vehicle Registration Details Information

<https://vrl.lta.gov.sg/lta/vrl/action/searchVehicleByOwner?FUNCTION...>

Text size + -

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company
Cert No.: 29635400K
Owner ID Type: Business
Owner Name: AIK SHEN BUS SERVICE
Registered Address: APT BLK 337 WOODLANDS AVENUE 1 #07-531 SINGAPORE 730337
Mailing Address: -
Birth Date: -

Vehicle Particulars

Vehicle No.: CB77H
Previous Vehicle No.: -
Effective Date of Ownership: 27 Dec 2012
Original Regn Date: 27 Dec 2012
Registration Date: 27 Dec 2012
Year of Manufacture: 2011
Vehicle Type: School Transport Bus/Coach/Minibus
Vehicle Scheme: School Bus with AWC
Vehicle Attachment 1: Air-Conditioned
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: YUTONG
Vehicle Model: ZK6107H
Primary Colour: White
Secondary Colour: -
Passenger Capacity: 47
Chassis No.: LZYTBD64B1033723
Engine No.: ISBE425022007670
Engine Capacity/Power
Rating: 6693 cc / -
Maximum Power Output: -
Propellant: Diesel
Max Unladen Weight: 11200 kg
Maximum Laden Weight: 16500 kg
Open Market Value: \$117,936.00
PARF Eligibility: No
PARF Eligibility Expiry Date: -
Minimum PARF Benefit: -
No. of Transfers: 0
IU Label No.: 2050094570
COE No.: -
COE Expiry Date: -



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)

Certificate Number : 5068101650-03

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle

: CB77H

Chassis Number

: LZYTBTD64B1033723

2. Name of Policyholder

: AIK SHEN BUS SERVICE

3. Effective Date of Insurance

: 23 Jul 2017

27 Dec 2017

4. Expiry Date of Insurance

: 22 Jul 2018

26 Dec 2018

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/her 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*

(a) Use for the carriage of passengers in connection with the Policyholder's business.

(b) Limited to carry 48 passengers

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

GEOGRAPHICAL LIMIT : WITHIN THE REPUBLIC OF SINGAPORE ONLY

EXCESS (SECTION I) : S\$3,000

EXCESS (SECTION II) : S\$1,500

WINDSCREEN EXCESS : S\$500

INSURE WITH COE : YES

HIRE PURCHASE COMPANY : SING INVESTMENTS & FINANCE LTD

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : ODDS & EVEN (00000614917)

Date of Issue : 22 Jun 2017 10:49 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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