



SMRT Automotive Services Pte Ltd  
251 North Bridge Road Singapore 179102  
Tel: 65 63311000 Fax: 65 63340247

## Tax Invoice

GST Reg No. : MR-8500001-7  
CRN : 199004280Z  
Invoice No. : IV181100441  
Date : 23.11.2018  
Vehicle No. : SG5786X  
Your Ref No. : BUS/08/18/1032  
Our Ref No. : 24097768  
Terms : 30 Days

Customer Code: 3000066

SMRT BUSES LTD

Block Unit  
STREET 62  
6 ANG MO KIO  
SINGAPORE 569140



Description	Qty	Unit Cost	Add %	/ (Discount) Amount	Amount
<b>Parts</b>					
LAMP, STOP:LED (MAN BUS)	1.00	\$1141.70	(10.00 )	\$ 114.17	\$ 1027.53
OUTDOOR CAMERA	1.00	\$1890.00	(10.00 )	\$ 189.00	\$ 1701.00
Sub-Total					\$ 2728.53
<b>Labour</b>					
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	1.00	\$ 795.00	0.00	\$ 0.00	\$ 795.00
<b>Others</b>					
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	1.00	\$ 300.00	0.00	\$ 0.00	\$ 300.00
GRAND TOTAL					\$ 3,823.53

Remark :

Make/Model : MAN A95  
Accident Date : 27.08.2018

N.B. Payment by cheque should be crossed and made payable to 'SMRT Automotive Services Pte Ltd'.  
No receipt will be issued unless requested.

Authorised Signature  
for SMRT Automotive Services Pte Ltd

## Enquire Transaction History

### Transaction History Details

Log Date/Time:	29 Aug 2018 / 09:22:24		
Asset Type:	Vehicle	Transaction Amount:	\$7.49
Asset ID:	PC798B		
Transaction Type:	18.32 Insurance Enquiry (GIRO Payment)	Channel:	External Agency
User ID:	ESASBAHO - BALQISH BINTE ABDUL HALIL	Business Transaction Reference No.:	20180829092224403147

Search Date / Time: 27 Aug 2018 18:25:00  
Insurance Company: AXA INSURANCE PTE LTD  
Information displayed is correct as at the log date and time.

Enquire Related Logs

OK

## 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 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	29/08/2018 09:17
Date Of Accident	27/08/2018 18:25
Exact Location Of Accident	FULLERTON RD - BS: 03011 (FULLERTON SQ)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG5786X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	MAN
Model	MAN A22
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	BUS

### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18090224MFBP
Cover Note Number	

### Driver

Name of Driver	ZHANG HONGLI
NRIC No	G2595592M
Date Of Birth	02/06/1972
Occupation	OUTDOOR
Date Of Driving Pass	20/04/2015
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address NOADDRESS  
 Postcode  
 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 SIDE SWIPE  
 Weather Conditions CLEAR  
 Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles involved in the accident  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance? 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) 20

#### 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

WHILE MY BUS WAS STATIONARY AT BUS STOP 03011 (FULLERTON SQUARE) ALONG FULLERTON ROAD CONDUCTING PAX ACTIVITY, THE REAR RIGHT PORTION OF MY BUS WAS GRAZED BY A PTE BUS (PC798B) THAT WAS OVERTAKING MY BUS..

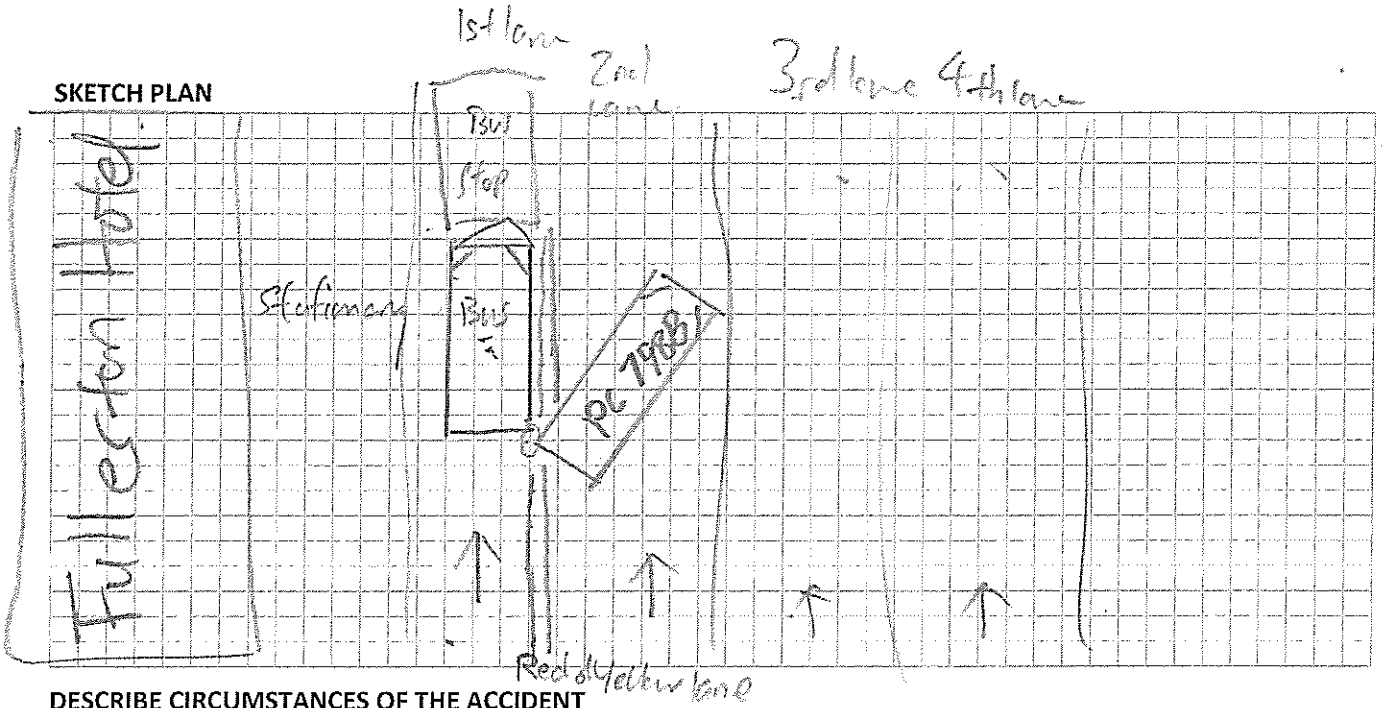
#### Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: PENDING DOWNLOAD  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number PC798B  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category BUS  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO REPORT

## 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:

zhang Hong L



Reporting Centre Personnel's Signature  
Name: BALQISH  
NRIC/FIN No.: S8340325Z