



## 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	24/09/2018 14:35
Date Of Accident	22/09/2018 13:15
Exact Location Of Accident	TAMPINES ST 23
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC4482K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COZY BUS LLP
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97744460

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COMMUTER GL 3.0
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MJ000302-R00
Cover Note Number	

### Driver

Name of Driver	JUBRI BIN KASSIM
NRIC No	S1645630F
Date Of Birth	03/07/1964
Occupation	OUTDOOR
Date Of Driving Pass	26/11/2002
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97744460
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 739 PASIR RIS DR 10 #11-07
Postcode	510739
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)	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

PLS REFER TO THE ATTACHED STATEMENT.

### Attachment(s)

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

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU2207E
Vehicle Make/Model/Colour	VOLKSWAGON PASSAT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG SOON HOE JOSHUA
NRIC/Passport Number	S8200205G
Contact Number	96671738
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

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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: 22/9/18



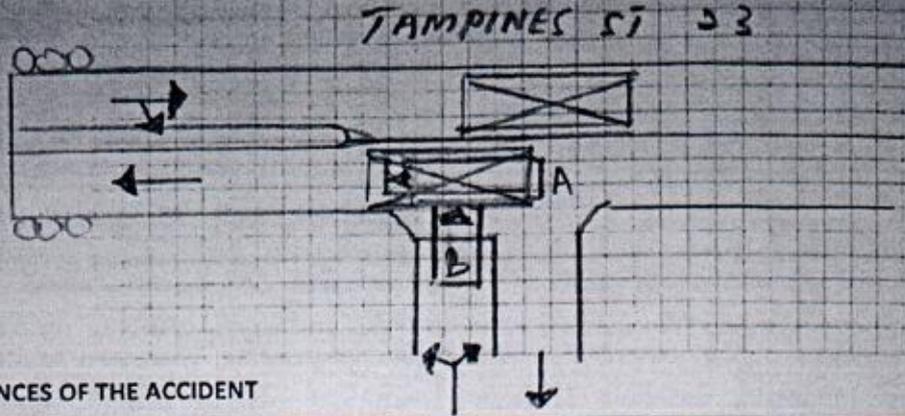
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 22/9/18

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

SKETCH PLAN

A - PC4482K

B - SL42207E

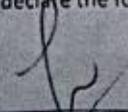
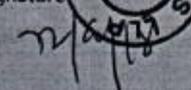


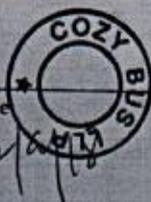
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

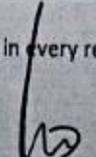
P/s refer to the attached statement.

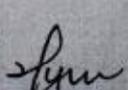
DECLARATION

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

\*   
Policyholder's Signature  
Date & Time: 



 22/9/18  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 24/09/18  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

I WAS TRAVELLING STRAIGHT ALONG TAMPINES STREET 23 ,SUDDENLY VEH(B) BEARING REG NO  
SLU2207E CAME OUT FROM THE CARPARK WITHOUT LOOKING FOR ONCOMING VEH AND HIT ONTO  
MY LEFT SIDE PORTION OF MY VEH.



# ACCIDENT STATEMENT

ACCIDENT DATE: 22/9/2018 (DD/MM/YYYY), TIME: 13:15 (HH:MM)

LOCATION: Tampine st 23

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: PC 4482 K  
b) INSURANCE COMPANY: TOYOTA MARINE  
c) POLICY NUMBER: 18-MJ000302-R00  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: TOYOTA  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: working time  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: Jubri bin Kassim (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S1645630/F CONTACT: 97744460  
c) ADDRESS: Blk 739 # 11-07 Pasir ris Dr. 10 (S) S10739

\*d) DATE OF BIRTH: 03/07/1964 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 23/11/1982

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) \_\_\_\_\_

b) ROAD SURFACE: (DRY / WET / OTHERS) \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLU 2207 E MODEL: VOLKSWAGON PASSAT  
b) DRIVER'S NAME: Ong Soon Hoe joshua  
c) NRIC/FIN/PASSPORT: S8200205G CONTACT: 9667 1738

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\*No of passenger  
(Including driver)  
(L)

\*No of passenger  
(Including driver)  
( )

\*No of passenger  
(Including driver)  
( )

VIDEO =

22/09/18

email =

company

stamp

fax =

or

by email

VIDEO =

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **S1645630F**

Name: **JUBRI BIN KASSIM**

Birth Date: **03 Jul 1964**  
Issue Date: **06 May 2003**

000458950C



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES**

Class	Description	Issue Date
Class 2B	Motorcycles not exceeding 200 cc	27 May 1982
Class 2A	Motorcycles between 201 cc and 400 cc	06 May 2003
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	23 Nov 1902
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	31 May 1995
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	06 Sep 1995

NP 428A

Licence No: S1645630F



**Land Transport Authority**

**VOCATIONAL LICENCE**

Licence No : **S1645630F**  
Name : **JUBRI BIN KASSIM**

Card Issue Date : **16/09/2017**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
12	TAXI VL	27/06/1996
03	BUS VL	26/11/2002
04	BUS ATTENDANT	26/11/2002



**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1645630F**

Name: **JUBRI BIN KASSIM**

Race: **MALAY**

Date of Birth: **03-07-1964** Sex: **M**

Country of Birth: **SINGAPORE**



3114227

NRIC No: **S1645630F**

Blood Group: **B+** Date of issue: **27-12-1999**

Address: **APT BLK 739 PASIR RIS DRIVE 1J #11-07 SINGAPORE 510739**






**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)**

Policy No.: 18-MJ000302-R00 (Excursion Bus)

- |   |              |                                   |
|---|--------------|-----------------------------------|
| <b>1. Index Mark and Registration Number of Vehicle</b>                               | PC4482K      | <b>Chassis No.:</b> KDH2230025377 |
| <b>2. Name of Policyholder</b>  | COZY BUS LLP |                                   |
| <b>3. Effective date of the Commencement of Insurance for the purposes of the Act</b> | 09/03/2018   |                                   |
| <b>4. Date of Expiry of Insurance</b>   | 08/03/2019   |                                   |

**5. Persons or Class of Persons entitled to drive\***

Any person provided he is in the Policyholder's employ and is driving on their order or with 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

**6. Limitations as to use\***

Use only for the carriage of passengers or goods in connection with the Insured's business as a Travel Agency.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) 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 Vehicles (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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

**IMPORTANT NOTICE**

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

**ADDITIONAL INFORMATION**

Account: 2421DDA

<b>Insurance Plan:</b>	Comprehensive Approved Workshop Plan	
<b>Limit for total loss or theft:</b>	Prevailing Market Value	
<b>Policy Excess:</b>	Own Damage Claims	SGD 2,000
	Excess-Third Party (Sect II)	SGD 3,000
	Windscreen Excess	SGD 300
<b>Financial Interest:</b>	UNITED OVERSEAS BANK LIMITED	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature