## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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

	ACCIDENT STATEMENT
Date Of Report	09/10/2018 16:32
Date Of Accident	08/10/2018 14:35
Exact Location Of Accident	ANG MO KIO AVENUE 1
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	PC7036X
Insured/Policyholder	
Name Of Registered Owner	A&S TRANSIT PTE. LTD
Co Reg No	201216917G
Email Address	ZEPHANG@ANSTRANSPORTATION.COM
Mobile Phone No	
Alternative Phone No	OFFICE-63831111
Vehicle Particulars	
Manufacturer	YUTONG
Model	ZK6107HE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	5095393771
Cover Note Number	
Driver	
Name of Driver	SUKHJINDER SINGH
NRIC No.	G3126774P

Name of Driver	SUKHJINDER SINGH		
NRIC No	G3126774P		
Date Of Birth	24/04/1991		
Occupation	OUTDOOR		
Date Of Driving Pass	05/06/2018		
Driving Experience	0 YEAR AND 4 MONTH		

MALE Gender

Mobile Number (LOCAL) +65-82537412

Fax Number Contact Number

EMail Address NOEMAIL Address

46C HILLSIDE DRIVE

Postcode

548993

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

20

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

DRIZZLING

Road Surface

WET

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? 2 NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

10 UBI AVENUE 3

Police Station Address

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes,against whom?

NO

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

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NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

FT782A

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

YONG JIA QUAN

NRIC/Passport Number

S9670290F

Contact Number

87331723

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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 Centra 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 lodgment of this report to the insurers, you hareby 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - 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 ma;
  - (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.
- (a) 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: DELBRICIO

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

# Sketch Plan #2 Pg. 1

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# Common Statement Pg. 1





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20181008/7018

#### REPORT OF A TRAFFIC ACCIDENT

	ne Report N 118 18:31	/lade:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars		1000 (1000 NOT	
Name of ANG XII	Informant: NG LER		Address: 46C HILLSIDE DRIVE SINGAPORE 548993		
	/ ID No.; D / S84181	22F	Contact No.: Home/Office: Mobile: 90608477		
National SINGAP	ity: ORE CITIZ	ĽEN	Email: zephang@anstranspor	rtation.com	
Sex: Male	Age:	Date of Birth: 03/07/1984	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English	Institution / School Name:	
Occupat Managin officer		Chief executive	Driving Licence Inform Class:	ation: Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/10/2018 14:35	Type of Location X-Junction
Location: ANG MO KIO	AVENUE 1			
Weather:		Road Surface: Wet		Road Speed Limit: 60 Km/h
Drizzling		4401		OU KIII/II
Drizzling Traffic Flow: One Way		Traffic Control: Traffic Light - Wo	2012	Traffic Volume: Moderate

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FT782A	Motorcycle	HONDA		Black	Seriously Damaged	
PC7036X	Bus/Coach/Mi nibus	YUTONG	ZK6107HE	Multi-Colored	Slightly Damaged	0

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

# Common Statement Pg. 1





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865

2 of 3 Report No. T/20181008/7018

Tel No: 65470000

CONTINUATION OF REPORT

Rider		100	2. Commence (1995)	-1244		A SECTION AND SECTION AND SECTION ASSESSMENT
Name	Yong Jia Quan			ID No.	8	S9670290F
Related Vehicle	FT782A (Motorcycle)			Conta	ct No.	87331723
Hospital/Clinic	NIL			Class Driving Licence Expiry	g ce &	Class; 2B Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	
Driver		975				
Name	Sukhjinder Singh			ID No	0	G3126774P
Related Vehicle	PC7036X (Bus/Coach/Minibus)			Contact No.		82537412
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: 2B,3,4 Date of Expiry: 05/02/2023
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	
Vehicle Owner				256440	A STATE OF	
Name	ANG XING LER			ID No		S8418122F
Related Vehicle	NIL			Contact No.		90608477
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	11/15	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o		NIL	

#### Brief Details.

The driver was driving along ang mo kio ave 1, he decelerated and brake for the red light at the traffic junction and a motor cycle hit my bus from behind.

## Common Statement Pg. 1





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20181008/7018

CONTINUATION OF REPORT

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NP168

Informant is not able to provide sketch plan

Signature Of Informant: The identity of the person making this report I been authenticated by SingPass. No signatur required.			
Date/Time: 08/10/2018 18:31			
Classification Of Case:			

## > Back to OneMotoring

#### **Enquire Transfer Fee**

Vehicle Details

Vehicle No.: PC7036X

Vehicle Type: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus

Vehicle Attachment 1: Air-Conditioned

Vehicle Scheme : Public Service Vehicle (Others)

Vehicle Make: YUTONG

Vehicle Model: ZK6107HE MANUAL
Chassis No.: LZYTBTD68H1045155

Propellant: Diesel

Engine No.: ISB67E525022275473

Engine Capacity: 6690 cc

Maximum Power Output:

 Maximum Laden Weight:
 15500 kg

 Unladen Weight:
 11180 kg

 Year Of Manufacture:
 2017

 Original Registration Date:
 21 Dec 2017

 Lifespan Expiry Date:
 20 Dec 2037

COE Category: C - Goods Vehicle & Bus

 Quota Premium:
 \$48,902.00

 COE Expiry Date:
 20 Dec 2027

 Road Tax Expiry Date:
 20 Dec 2018

 Inspection Due Date:
 20 Dec 2018

 Intended Transfer Date:
 31 Jul 2018

CO2 Emission : CO Emission : HC Emission : NOx Emission : -

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

Amount Before GST GST Amount After GST (S\$) (S\$) (S\$)

Transfer Fee: 25.00 - 25.00

Total Amount Payable: 25.00

You may print this page for reference.

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