

NATIONAL Assessment Centre Services.

(wef 1 Jan 2003)

MAA/18/42238

Date In: 02/11/2018 14:34	Job description	Date & Time Completed	Done by
Ref No: N/A/CTI/180/9946/y	SAS e-filing		
Veh No: PH 9559 P	E-mail (w/this 8hrs, AIC 2hrs)		
D.O.A: 01/11/2018 16:00	I-Motor Claim Form		
OD / TP: Reporting Only	I-Motor W/O (w/this: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: UK/Knowal Bus INC () / Non-INC ()

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]

Year of Registration: (

Warranty: YES (

NO (

Excess: (\$

Loading: \$1,000 (

)/\$2,000 (

)

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks: (INC Hotline: 6788 6616)

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time:

Actions:

NA/1807/108

Claimant's Particulars:	Invoice/Preparation Charge:	Amount:	Remarks:
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$30)		
Damaged Portion:	3) TP: Towing Fee \$40/145		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2003)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	IE (N11): TP (N-n INC) against INC \$20		
	9) N12: Idao Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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 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 aforesaid.

ACCIDENT STATEMENT

Date Of Report	02/11/2018 14:34
Date Of Accident	01/11/2018 16:00
Exact Location Of Accident	AYE TOWARDS CLEMENTI AVENUE 6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PH9559P
Insured/Policyholder	
Name Of Registered Owner	I'ANG BUS TRANSPORT SREVICES
Co Reg No	53179924K
Email Address	CONNECT3WINNIE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96388289
Alternative Phone No	OFFICE-96388289

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	RM117NSRDEB-7.5 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	BUS

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMB1SN3094321700
Cover Note Number	

Driver

Name of Driver	ANG GUAN JOO (HONG YUANYU)
NRIC No	S76230601
Date Of Birth	02/08/1976
Occupation	OUTDOOR
Date Of Driving Pass	16/08/2003
Driving Experience	15 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96388289
Fax Number	
Contact Number	OTHERS-96388289
Email Address	CONNECT3WINNIE@GMAIL.COM

Address	BLK 653A JURONG WEST STREET 61 #09-420
Postcode	541653
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	2
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)	45

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

PLEASE REFER TO SKETCH PLAN

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	UNKNOWN
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

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7. By the lodgment 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)**

I understand, acknowledge, agree and consent that:

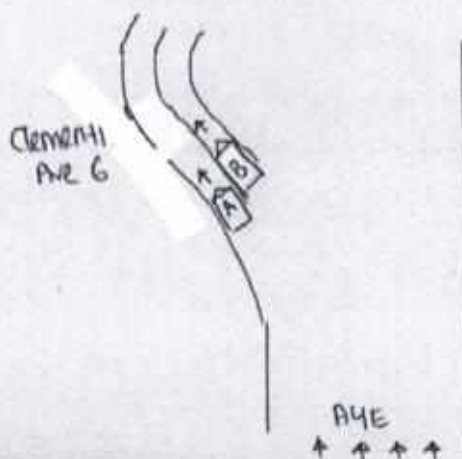
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

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

SKETCH PLAN



A = PH9559P

B = unknown BUS.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 01/11/2018 @ 16:00hrs. I was driving my bus PH9559P from AYE entering to Clementi Ave 6 & suddenly my bus stalled due to insufficient air from my bus & I on my hazard light & a big bus drove past me & at that moment my bus can move off & my bus brushed slightly onto the said bus left body but I am unable to take down the number plate.

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:
NRIC/FIN No.:



01/11/2018

Rash. Lim

10 Sin Ming Drive Singapore 575701

Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

11 Dec 2017

Our ref 1112170501N052952640

L'ANG BUS TRANSPORT SERVICES
APT BLK 653A JURONG WEST STREET 61
#09-420
SINGAPORE 641653

Dear Sir/Madam

NOTIFICATION ON TRANSFER OF OWNERSHIP FOR VEHICLE NO. PH9559P

We are pleased to inform you that your application to transfer ownership of the above-mentioned vehicle has been approved. The Business Transaction Reference No. is 20171211110905016136. You are the registered owner of the vehicle with effect from 11 Dec 2017.

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

- | | |
|----------------------------|--|
| 1. Name | : L'ANG BUS TRANSPORT SERVICES |
| 2. Identification No. Type | : Business |
| 3. Identification No. | : 53179924K |
| 4. Place Of Passport Issue | : - |
| 5. Vehicle No. | : PH9559P |
| 6. Vehicle Type | : D20 - Private Hire Bus/Coach/Minibus |
| 7. Vehicle Scheme | : Bus Carrying School Children |
| 8. Vehicle Make | : MITSUBISHI |
| 9. Vehicle Model | : RM117NSRDEB |
| 10. Remarks | : Upon the expiry of the vehicle's 5-year COE on 25 Jan 2020, you may further renew the COE of your vehicle for another 5 years, subject to the statutory lifespan (if applicable) of the vehicle. This is a public service vehicle. |

Annex A

Transaction ref 20171211110905016136

The owner and vehicle particulars for Vehicle No. PH9559P as at 11 Dec 2017 are as follows:

1. Name	: TANG BUS TRANSPORT SERVICES
2. Identification No. Type	: Business
3. Identification No.	: 53179924K
4. Place Of Passport Issue	: -
5. Vehicle No.	: PH9559P
6. Previous Vehicle No.	: -
7. Effective Date of Ownership	: 11 Dec 2017
8. Original Registration Date	: 26 Jan 2005
9. First Registration Date	: 26 Jan 2005
10. Vehicle Type	: D20 - Private Hire Bus/Coach/Minibus
11. Vehicle Scheme	: Bus Carrying School Children
12. Attachment 1	: Air-Conditioned
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: MITSUBISHI
16. Vehicle Model	: RM117NSRDEB
17. Year of Manufacture	: 2004
18. Primary Colour	: Multi-Colour
19. Secondary Colour	: -
20. Passenger Capacity	: 49
21. Chassis/Trailer Chassis No.	: RM117NB20302 / -
22. Propellant	: Diesel
23. Engine No./Motor No.	: 6D16971691 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 7545 / -
25. Maximum Power Output(kW/bhp)	: - / -
26. Unladen Weight(kg)	: 9420

Road surface: Dry / Wet
Weather condition: Clear / Raining
Speed: _____

Usage of veh during of accident:

Does driver own a vehicle: yes / no
if yes, veh number plate: PH9559P
veh insurance co: _____

Relationship with insured: Owner
Witness (if any): yes/no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: (Unknown Big Plate)
Name of third party driver: _____
IC of third party driver: _____
HP of third party driver: _____
Address of third party driver: _____
Insured/Co name of third party vehicle: _____
Contact number of insured/Co: _____
Insurance co of third party vehicle: _____

Police report (if any): yes/no
Police report reported at which police station: _____
Any intended prosecution given: yes /no
if yes, against whom: veh A /veh B driver

Action taken : claiming third party / claiming own damage / reporting only
No of Pax: 45px

vehicle no: PH9559P
Owner contact no: 9368 8289
Date of accident: 01/11/2018
Location of accident: A4E to Clementi Ave 6
Time of accident: 16:00hrs
Any Injury: yes/no (if yes, must have police report)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S76230601



Name

ANG GUAN JOO
(HONG YUANYU)

洪 源 裕

Race

CHINESE

Date of birth

02-08-1976

Sex

M

Country of birth

SINGAPORE

S76230601

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S76230601

Name

ANG GUAN JOO
(HONG YUANYU)



Birth Date: 02 Aug 1976

Issue Date: 13 Jan 2006



Land Transport Authority

VOCATIONAL LICENCE

Licence No: S76230601

Name: ANG GUAN JOO

Issue Date: 3/10/2005



Please visit www.lta.gov.sg to check
the status of this vocational licence

3315211




NRIC No: **576230601**

DATE OF BIRTH
05-12-2005

Address
**APT BLK 653A JURONG WEST STREET 61
#09-420
SINGAPORE 641653**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

		PASS DATE
1	Class 2B Motorcycles <= 200 CC	07 Mar 2001
1	Class 2A Motorcycles between 201 CC and 400 CC	16 Apr 2002
1	Class 2 Motorcycles > 400 CC	16 Mar 2004
1	Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver and motor tractor/vehicles <= 2500 kg	14 Jul 2001
1	Class 4 Heavy motor cars and motor tractors > 2500 kg	16 Aug 2003
1	Class 5 Motor vehicles > 7250 kg not constructed to carry any load	12 Mar 2007

S / No. 9000065050


NP 420A

576230601

576230601

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
03	BUS VL	06/08/2004
04	BUS ATTENDANT	06/08/2004



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 No.	DMB1SN3094321700	Engine No : 6D16971691 Chassis No: RM117NB20302
1. Index Mark and Registration Number of Vehicle	PH9559P	
2. Name of Policy Holder	M/S I'ANG BUS TRANSPORT SERVICES	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	11 DECEMBER 2017 (10:01 HOURS)	EX SECT. II S\$1,000.00
4. Date of Expiry of Insurance	25 JANUARY 2019	
5. Persons or Classes 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.

6. Limitations as to use: *

USE ONLY FOR THE CARRIAGE OF PASSENGERS OR GOODS IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS AS SPECIFIED IN THE SCHEDULE.

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.

HIRE PURCHASE CO. : TATCO CREDIT PTE LTD AS HP OWNER

* 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 provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia). Please see reverse
For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorized Officer

Authorized Signatory

Countersigned By: