

## 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	31/12/2018 09:22
Date Of Accident	29/12/2018 14:55
Exact Location Of Accident	PIE BEFORE EXIT 15A
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF9727Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SBS TRANSIT LTD
Co Reg No	A199206653M
Email Address	RALPHANG@SBSTRANSIT.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63837407

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	M491018
Cover Note Number	

### Driver

Name of Driver	SEOW YONG HUA (XIAO RONGHUA)
NRIC No	S7513384G
Date Of Birth	29/04/1975
Occupation	INDOOR
Date Of Driving Pass	16/04/2003
Driving Experience	15 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84280643
Fax Number	
Contact Number	
Email Address	SEOWYH@SBSTRANSIT.COM.SG

Address	BLK 240 HOUGANG ST 22 #05-29
Postcode	530240
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) 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)	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

PLEASE REFER TO ATTACHED .

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	DRIVER DID NOT PROVIDE AT TIME OF REPORTNG
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV9707P
Vehicle Make/Model/Colour	SUBARU
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG ENG SENG
NRIC/Passport Number	S1809584Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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. The 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 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)

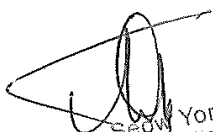
I understand, acknowledge, agree and consent that:

- (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.

SBS Transit Ltd  
205 Braddell Road  
Singapore 579701

Policyholder's Signature  
Date & Time:

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

  
Seow Yong Hua  
Investigation Officer  
Bus Safety

31 DEC 2018

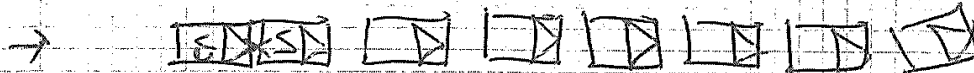
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SKETCH PLAN

V1: SKV 9707P

V2: GBF 9707H

Towards  
Exit 15A

PIB towards Exit 15A

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am an investigation officer attached to Bus Safety Dept located at 205 Braddell Rd (S579701) West along Level 1. I joined SRT on 01/12/2015.

2. On 29/12/18, I was deployed to perform investigation officer starting from 0800hrs and will end on 20/12/18 @ 0800hrs. At about 1455hrs, I was driving the van (V2 refers) at the extreme left lane along PIB before Exit 15A when the front portion of the van chert onto the rear portion of the 3P car (V1 refers).
3. The driver of 3P car and myself then drove to the emergency lane. We took photographs of each other vehicles and exchange particulars. I enquired from the driver of 3P car whether anybody injured from this party and the informed there was no injury to himself and this passenger. I did not sustain any injury either. Driver of 3P car further informed that he will revert back to me for any damages claim after inspection at this preformed workshop.
4. I checked for any damages at the rear portion of 3P car and there was none. However, the front bumper and number plate of the van was dented.

## DECLARATION

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

SBS Transit Ltd  
205 Braddell Road  
Singapore 579701

Policyholder's Signature  
Date & Time:

Ng Yung Hua  
Investigation Officer  
Bus Safety

Driver's Signature (If driver is not the policyholder)  
Date & Time: 31 DEC 2018

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

# Sketch Plan Pg. 3

**SBS Transit**

DISTRICT : Bus Safety Dept  
ROUTE GROUP : -  
SHIFT : -  
I.O : Ang Chong Boon

REPORT NO: -  
DATE & TIME OF REPORTED:  
30/12/2018 @ 0830hrs

VEHICLE NO: GBF 9727Y	SER NO: -	MAKE: Nissan	DATE & TIME OF ACCIDENT: 29/12/2018 @ 1455hrs	LOCATION: PIE before Exit 15A
NAME OF Driver: Seow Yong Hua		STAFF NO 129792	NRIC NO: S7513384G	AGE: 43 SEX: Male
ADDRESS OF DRIVER Blk 240 Hougang Street 22 #05-29 S(530240)			CLASS OF LICENCE Class 2B, 3, 4	DATE OF EXPIRY -
TEL NO: 63837492	DATE OF JOINING SERVICE: 01/12/2015		DATE OF CONVERTING TO BC: -	

Particulars of the witness:-

NAME: -	NRIC NO: -	TEL NO: -	ADDRESS OF WITNESS (if available): -
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Particulars of the other party:-

VEHICLE NO: SKV 9707P	COLOUR: Grey	MAKE: Subaru	NAME & ADDRESS OF DRIVER (if available): Ong Eng Seng, S1809584Z, 7 Rivervale Link #03-33 S(545125)
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NATURE OF ACCIDENT: Minor	WEATHER: Fine	ROAD SURFACE: Dry
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OPERATING HOURS DURING WHICH ACCIDENT OCCURRED

Less than 1 hour	1 hour – 4 hours	4 hours – 8 hours	8 hours - 12 hours	12 hours & above	<input checked="" type="checkbox"/>
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<b>Type of location:</b> 01 <input type="checkbox"/> Bend 02 <input type="checkbox"/> Slip Road 03 <input type="checkbox"/> Car Park/Bus Park 04 <input type="checkbox"/> Flyover/Bridge 05 <input type="checkbox"/> Gradient 06 <input type="checkbox"/> T-junction 07 <input type="checkbox"/> X-junction 08 <input type="checkbox"/> Y-junction 09 <input type="checkbox"/> Roundabout 10 <input checked="" type="checkbox"/> Straight Road 11 <input type="checkbox"/> Bus Stop 12 <input type="checkbox"/> District 13 <input type="checkbox"/> Terminal/Interchange	<b>Traffic Volume</b> 1 <input checked="" type="checkbox"/> Heavy 2 <input type="checkbox"/> Moderate 3 <input type="checkbox"/> Light 4 <input type="checkbox"/> No Traffic  <b>Traffic Flow</b> 1 <input checked="" type="checkbox"/> One way 2 <input type="checkbox"/> Two way 3 <input type="checkbox"/> Dual carriageway	<b>Traffic Control</b> i) Traffic Light 1 <input type="checkbox"/> Operating Correctly 2 <input type="checkbox"/> Operating Incorrectly  ii) Other controls 3 <input type="checkbox"/> Pedestrian Crossing 4 <input type="checkbox"/> Policeman Controlled 5 <input type="checkbox"/> School Crossing Warden 6 <input type="checkbox"/> Temp Traffic Light/Beacon 7 <input type="checkbox"/> Not Controlled 8 <input type="checkbox"/> School Crossing Warden	<b>Type of collision:</b> i) Between Moving Vehicles 1 <input type="checkbox"/> Head On 2 <input type="checkbox"/> Head to side 3 <input checked="" type="checkbox"/> Head to rear 4 <input type="checkbox"/> Side Swipe – Opposite Direction 5 <input type="checkbox"/> Side Swipe – Same Direction 6 <input type="checkbox"/> Reversing 7 <input type="checkbox"/> Others (Specify) Grazed kerb  ii) Moving Vehicles Against 1 <input type="checkbox"/> Parked Vehicle 2 <input type="checkbox"/> Pedestrian 3 <input type="checkbox"/> Animal 4 <input type="checkbox"/> Lamp post/Tree 5 <input type="checkbox"/> Road Divider / Kerb 6 <input type="checkbox"/> Bicycle 7 <input type="checkbox"/> Others (Specify) Car
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#Put a cross X in the appropriate box where necessary:-

I am an Investigation Officer attached to Bus Safety Department located at No.205 Braddell Road, Singapore 579701 West Wing Level 1. I joined SBST on 01/12/2015.

2. On 29/12/2018, I was deployed to perform duty Investigation Officer starting from 0800hrs and will end on 30/12/2018 at 0800hrs. At about 1455hrs, I was driving the duty van registration number GBF9727Y at the extreme left lane along PIE before Exit 15A when the front portion of the van collided into the rear portion of the 3P car.

**Sketch Plan Pg. 4**

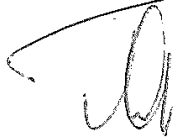


3. The driver of 3P car and myself then drove to the emergency lane. We took photographs of each other vehicles and exchange particulars. I enquired from the driver of 3P car whether anybody injured from his party and he informed there was no injury to himself and his passenger. I did not sustain any injury either. Driver of 3P car further informed that he will revert back to me for any damages claim after inspection from his preferred workshop.

4. I checked for any damages at the rear portion of the 3P car and there was none. However, the front bumper and number plate of the van was dented.

5. As the van could still be driven, I then drove the van back to Braddell HQ and parked the van for the remaining of my duty hours. The accident was reported promptly to my immediate supervisor accordingly.

Statement read over to me in English  
and I affirmed it to be true and correct



SIGNATURE OF DRIVER



NAME & DESIGNATION OF RECORDER



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792K | GST. Reg. No. M2-0078806-X  
 64 Cecil Street #04/ #05/ #06-02 IOB Building Singapore 049711  
 Office (65) 63476100 Email insure@iii.com.sg  
 Fax (65) 62244174 Website www.iii.com.sg

## 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)

This certificate is not transferable to a new owner of the vehicle. If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory insurance.

The Certificate must be returned if the Insurance is suspended during its currency.

## INCLUSION

Agency Code: <b>10827SE</b> <b>Comprehensive</b>	Excess <b>S\$750/- all claims &amp; additional \$2500/- all claims for age &lt; 21 years or &gt; 65 years &amp;/or S'pore D.L. &lt; 2 years</b> Windscreen Excess <b>S\$50.00</b>
<b>CERTIFICATE NO.</b>	<b>M491018</b>
1. Index Mark and Registration Number of Vehicle	<b>GBF9727Y</b>
2. Name of Policy Holder	<b>SBS Transit Ltd</b>
3. Effective date of the commencement of Insurance for the purposes of the Act	<b>21<sup>st</sup> April 2017</b>
4. Date of Expiry of Insurance	<b>31<sup>st</sup> March 2020</b>
5. Persons or Classes of Persons entitled to drive*	<p>Any person who is driving on the Policyholder's 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</p>
6. Limitations as to use*	<p>(1) Use in connection with the Policyholder's business.          (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.          (3) Use for social, domestic and pleasure purposes.  <b>The Policy does not cover</b>          (1) Use for hire or reward or for racing, pace-making, reliability trial, or speed-testing          (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle</p>

\*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

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)

Date of issue **RL/09.04.2017**

for India International Insurance Pte. Ltd.  
(APPROVED INSURERS)

M Z 300C (GOODS CARRYING)  
PRIVATE TYPE

*Authorized Signatory*

## IMPORTANT NOTICE

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.


Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.


IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

Agent / Broker Name **ComfortDelgro Ins Brokers**

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7513384G




Name  
SEOW YONG HUA  
(XIAO RONGHUA)  
萧 荣 华  
Race  
CHINESE  
Date of birth 29-04-1975 Sex M  
Country of birth SINGAPORE



S7513384G

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7513384G  
Name  
SEOW YONG HUA  
(XIAO RONGHUA)  
Birth Date: 29 Apr 1975  
Issue Date: 16 Apr 2004



001195099G

3506773



NRIC No. S7513384G



Date of issue  
23-03-2004

APT BLK 240 HOUGANG STREET 22 #05-29  
SINGAPORE 530240  
S7513384G 04/10/2013

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

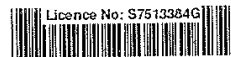
	PASS DATE
Class 2B Motorcycles <= 200 CC	14 Nov 1998
Class 3 Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	16 Apr 2003
Class 4 Heavy motor cars and motor tractors > 2500 kg	17 Jun 2019

S7513384G

S / No. 9000100314

NP 428A

Licence No: S7513384G





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





