

NATIONAL Assessment Centre Services.

[ver 1 Jan 05]

NA/1901/116

Date In: 13/01/2009 16:24	Job description	Date & Time Completed	Done by
Ref No: NA/1901/1900267914	SAS e-filing		
Veh No: PA 888EC	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 11/01/2009 14:40	I-Motor Claim Form		
OID / TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SLN 589SK	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: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date of Incident: _____

Location: _____

Weather: _____

Time of Day: _____

Witnesses: _____

Police Report: _____

Insurance Claim: _____

NA/1901/116	1) AR: Accident Reporting (\$30)	INC (\$30)
2) DA: Damage Assessment (\$100)		
3) TP: Towing Fee	\$40/\$45	
4) FT: Follow-Through Survey	\$120	
5) FT: Follow-Through Survey (Resurvey)	\$30	
For claiming against INC Only (wef 10 Jan 2005)		
6) TR: Re-inspection	\$75	
7) NI: Idao DA + SMRT Survey	\$160	
8) NTUC Additional Services:		
ON:		
*NS: Courtesy Car / Tpl Allowance	\$5	
*NG: Repair Co-ordination	\$10	
*N2: Post Repair Inspection	\$25	
*NB: DV / Collect Excess Coordination	\$5	
*NT: DV / Collect Excess Coordination	\$20	
TP (Nil) : TP (Nil) INC against INC	\$0	
9) NI: Idao Mobile		
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	13/02/2019 16:24
Date Of Accident	11/01/2019 14:40
Exact Location Of Accident	ALONG RIVER VALLEY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA8445C
Insured/Policyholder	
Name Of Registered Owner	POO SEE YEOW BUN SERVICES PTE LTD
Co Reg No	201530592E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98430003
Alternative Phone No	OFFICE-91435662

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ROSA-4.9 D L MT (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	DMB1SN3083561801
Cover Note Number	

Driver

Name of Driver	ASMAWI BIN ASMAULLAH
NRIC No	S1699656D
Date Of Birth	06/06/1965
Occupation	OUTDOOR
Date Of Driving Pass	23/12/1988
Driving Experience	30 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98430003
Fax Number	
Contact Number	OTHERS-91435662
Email Address	NOEMAIL

Address	BLK 63 WOODLANDS DRIVE 42 #01-23
Postcode	730603
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 (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)	10

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	SLN5895K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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. 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.

POO SEE YEOW BUS SERVICES PTE LTD.

No. 25A Hillview Ave
#05-12 Glendale Park
Singapore 669617
Tel: 6310 1979 HP: 9843 0003
Fax: 6310 1979
Reg. No. 201530592E

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

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

SKETCH PLAN

A = PA8445C

B = SLN5895K



River valley Rd.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/01/2019 @ 14:40hrs, I was driving my bus PA8445C along River valley Rd when there is a stationary car in front of me with hazard lights on. I was doing a lane switch when my bus front RH brushed onto SLN5895K.

DECLARATION

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

POO SEE YEOW BUS SERVICES PTE LTD

No. 25A Hillview Ave
#05-12 Glendale Park

Singapore 650617

Tel: 6744 0310 1979 HP: 9843 0003

Reg. 201530592E

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

13/02/2019

Rafael Lim

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: _____

veh insurance co: _____

Relationship with insured: Employee & Employer

Witness (if any): yes / no

Witness name: _____

Witness hp: _____

Witness email (if any): _____

Witness add: _____

Witness IC no: _____

Third party veh number: SLN 5095K

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: 10 pax.

vehicle no: PAB445C

Owner contact no: 9843 0003

Date of accident: 11/01/19

Location of accident: River Valley Rd

Time of accident: 15:40hrs

Any injury: yes / no (if yes, must have police report)

HEALTHY CARD NO. 8104-001

Name: **ASMAWI BIN ASMAULLAH**


Photo: 

Race: **MALAY**

Date of Birth: **06-06-1965** Sex: **M**

Country of Birth: **SINGAPORE**

REPUBLIC OF SINGAPORE **DRIVING LICENCE**


Photo: 

Licence Number: **S1699656D**


Name: **ASMAWI BIN ASMAULLAH**

Birth Date: **06 Jun 1965**

Issue Date: **29 Nov 2014**

Barcode:  002371438D

Land Transport Authority

Photo: 

VOCATIONAL LICENCE

Licence No: **S1699656D**

Name: **ASMAWI BIN ASMAULLAH**

Issue Date: **27/6/2011**

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

HP. 9143 - 5662.



NRC No: S1699656D

Blood Group: Date of issue:

A+

29-10-1994

1PT BLK 603 WOODLANDS DRIVE 42 #01-23

SINGAPORE 730603

NRC No: S1699656D

Date: 02-04-2003

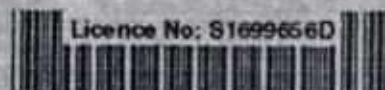
No: 4667314

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

EFFECTIVE DATE

Class 2B	Motorcycles \leq 200 cc	12 Aug 1988
Class 2A	Motorcycles between 201 cc and 400 cc	12 Aug 1988
Class 3	Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	29 Nov 1984
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight $<$ 7250kg	23 Dec 1988
Class 5	Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	30 Apr 1990

NP 428A



Licence No: S1699656D

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

Type	Description	Issue Date
02	TAXI VL	21/07/2004
03	BUS VL	16/11/1990



MOTOR PRIVATE BUS

CERTIFICATE OF INSURANCEMotor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1999
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No. **DMB13N3083561801** Engine No: **4M50022711**
Chassis No: **8EE30JF00120**

1. Index Mark and Registration Number of Vehicle **PAS445C**

2. Name of Policy Holder **POO SEE YEOM BUS SERVICES PTE LTD**

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment **30 November 2018** Excess Sect. II **S\$1,000.00**

4. Date of Expiry of Insurance **29 November 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 or any person driving with policyholder's 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. : YONG KHONG 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: **DDOS & EVEN**

Authorised Officer



Authorised Signatory

> [Back to OneMotoring](#)

ROC: 201530592E

Enquire Transfer Fee

Vehicle Details

Vehicle No.:	PA8445C
Vehicle Type:	Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
Vehicle Attachment 1:	Air-Conditioned
Vehicle Scheme:	Public Service Vehicle (Others)
Vehicle Make:	MITSUBISHI
Vehicle Model:	ROSA BUS 4.9L MT 2WD 6T TURBO
Chassis No.:	BE63DJF00120
Propellant:	Diesel
Engine No.:	4M50D22711
Engine Capacity:	4899 cc
Maximum Power Output:	-
Maximum Laden Weight:	6020 kg
Unladen Weight:	4020 kg
Year Of Manufacture:	2008
Original Registration Date:	06 Mar 2009
Lifespan Expiry Date:	05 Mar 2029
COE Category:	C - Goods Vehicle & Bus
PQP Paid:	\$14,094.00
COE Expiry Date:	31 Dec 2023
Road Tax Expiry Date:	05 Mar 2019
Inspection Due Date:	06 May 2019
Intended Transfer Date:	15 Feb 2019
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

The current road tax expiry is 05 Mar 2019. You may renew the road tax from 06 Dec 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 05 Mar 2019, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late 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 transfer

Amount Payable (From 06 Mar 2019 to 05 Sep 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST
Transfer Fee:	25.00	-	
Sub Total:			
Nett Road Tax Amount (After Offsetting Over Payment):	50.00	-	

Total Amount Payable:

Amount Payable (From 06 Mar 2019 to 05 Mar 2020)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST
Transfer Fee:	25.00	-	
Sub Total:			
Nett Road Tax Amount (After Offsetting Over Payment):	320.00	-	

Total Amount Payable:

Message

This vehicle has a road tax Over Payment of \$76.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively where applicable.

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

You may print this page for reference.