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 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 aforesaid.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	13/02/2019 11:27
Date Of Accident	12/02/2019 12:55
Exact Location Of Accident	SLE SLIP ROAD TOWARDS WOODLANDS AVE 12
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PC7464T
Insured/Policyholder	
Name Of Registered Owner	DIAMOND COACH SINGAPORE PTE LTD
NRIC No	S7114411I
Email Address	BOOKING@DIAMONDCOACH.COM.SG
Mobile Phone No	(LOCAL) +65-97480340
Alternative Phone No	OFFICE-67558810
Vehicle Particulars	
Manufacturer	HIGER
Model	KLQ6118K
Exact Purpose for which vehicle was being used at time of accident	t .
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	D18MTSCBU000784
Cover Note Number	

Driver

Name of Driver TAN BOON BENG NRIC No S0219354Z Date Of Birth 06/08/1953 Occupation **OUTDOOR Date Of Driving Pass** 06/09/1977 **Driving Experience** 41 YEARS AND 5 MONTHS Gender MALE

Mobile Number (LOCAL) +65-97907708

Fax Number (LOCAL) +65-6755809

Contact Number

EMail Address HILMI@THEONEHOLDINGS.COM.SG Address BLK 656C JURONG WEST STREET 61 #05-317

Postcode 643656

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

1

NO

NO

2

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

On 12th Feb 2019 at 1255hrs while I was driving my bus PC7464T at the slip road of SLE towards Woodlands Ave 12,I slowed down because there is a small construction job at the same lane infront.Suddenly I heard a bang from my rear side.I then realized a lorry YP4042Y just hit my rear. I then go down to checked with the third party.Later on there is one vehicle under LTA registered passed by and told us to drive away to a safer location.We both drove off to Woddlands Ave 12 and exchanged particulars.No injury in this accident.That's all.

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 YP4042Y

Vehicle Make/Model/Colour MITSHUBISHI FUSO

Details Of Properties NIL

Vehicle Category GOODS VEHICLE
Name of Driver ONG CHEE HONG

NRIC/Passport Number S1484475I Contact Number 91117239

Address

Postcode

Insurance Company Name EQ INSURANCE COMPANY LTD

Nature Of Damage FRONT SIDE DENTED

No. Of Passenger (Including Driver)

2

Passenger 1 NAME: :

GENDER: : MALE

8 Woodlands Industrial Park E3 Singapore 757786 Phone: 67558810 Fax: 67558809

The One Holdings Ptd Ltd

SINGAPORE ACCIDENT STATEMENT

Date/Time of Reporting OD Claims TP Claims Reporting Purpose **Accident Details** Exact Location Date 12/2/19 Time Vehicle Make/Model Higer Vehicle No PC7464T Passenger Involves/Injury **Driver's Particulars** Jan Booksona Contact No Driver's Name 97907708 502193542 NRIC No Office No 67558810 Diamond Cock Email Address Company **Insured Company Details** Name Type of Coverage DISMISCBUDO 0784 Policy No **General Information of Accident** IP hit A rear Type Of Accident Weather Condition Video/Camera Road Surface 1.1 Captured **Third Party Vehicle Information** Chee Hoong Name/Nric No Vehicle No Contact No **Details Of Police Action** Any Report ril If Yes Please state TP Issued Case No **Other Vehicle Involvement**

Contact No.

Contact No

Details Of Witness

Remarks

MT0H19020000

1:00

Name Vehicle No

Name



SKETCH PLAN trom assols woodbroks **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT** 1255 hrs while 1206 bus PC746HT at the slip road towards woodlands Ave 12, I asson because there is a small construction ob at the lane in Ront heard a bong side, I then realised rear. down chaccod perty, Later on registorcel ocsseel to a safer location. 5 8 A to wall servers. No. accident inot's DECLARATION I/We declare the foregoing e true in every respect. Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: dilmi Deves (If driver is not the policyholder) Date & Time: 13 2 19 NRIC/FIN No .: 370292162

1030

SKETCH PLAN

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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:

Driver's Signature (If driver is not the policyholder)

Date & Time:

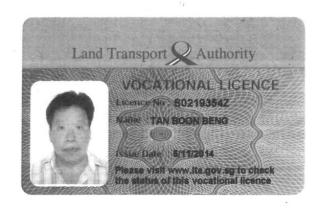
Reporting Centre Personnel's Signature

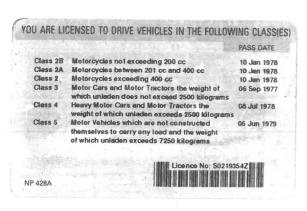
Name: Hilm D.

370292162











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 03/10/1980



Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623 Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES,1959 (MALAYSIA)

Cert No./Policy No.

: D18MTSCBU000784

1. Registration No.

: PC7464T

2. Insured Name

: DIAMOND COACH SINGAPORE PTE, LTD.

3. Commencement Date : 20 DECEMBER 2018 00:00

4. Expiry Date

: 19 DECEMBER 2019 23:59

5. Coverage

: Market value at time of loss - Comprehensive

6. Excess

: \$3500 - Section I

: \$1000 - Section II

7. Persons or Classes of Persons entitled to drive*

b) Any person provided he is in the Insured'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.

- 8. Limitations as to use*
- a) Use only for the carriage of passengers or goods in connection with the Insured's business.
- b) Use only in the Republic of Singapore.

The Policy does not cover

- 1) Use for racing, pacemaking, 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.
- 9. ExcelDrive Workshops & Accident Reporting

It is a condition precedent to liability that the Policyholder shall, together with the Motor Vehicle, call at the Company's Accident Reporting Center and report the accident within 24 hours of the accident or by the next working day thereof.

It is compulsory to have the accident repairs to the insured vehicle carried out at ExcelDrive Workshops, otherwise claim is not payable

In an emergency and for directions to the Company's Accident Reporting Centers, please contact our Emergency Hotline: (65) 6226 3323

Visit www.sompo.com.sg for list of ExcelDrive Workshops and Accident Reporting Centers.



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)

Sompo Insurance Singapore Pte. Ltd.

Date/Time of Issue: 04 DECEMBER 2018 13:48

tation 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

IMPORTANT NOTICE

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

 Insureds are further warned that on the sale of a motor vehicle or if for any reason the Insurance is terminated during its currency, 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. It is not transferable to a new owner of the Vehicle.

 Please note that this insurance is subject to the premium being paid and received in full by the offere the inception date where the Policy is to be issued to an Individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances.

Insurance coverage under this Policy is subject to the terms and conditions as stipulated in the Motor Insurance Policy.

Intermediary Code & Name : 11S13002 & SSTA INSURANCE AGENCY PTE LTD CI Code: 23H X_DZM52KNJYTMZAJ

