

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	12/03/2019 15:22
Date Of Accident	12/03/2019 07:00
Exact Location Of Accident	ALONG NEWTON ROAD TOWARDS MOULMEIN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA1991M
Insured/Policyholder	
Name Of Registered Owner	M/S CHUA AIR-CON BUS SERVICES
Co Reg No	53181088K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98519829
Alternative Phone No	OFFICE-98519829

Vehicle Particulars

Manufacturer	ISUZU
Model	LT133P-8.2 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	THIRD PARTY
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	DMB1SN1538651803
Cover Note Number	

Driver

Name of Driver	CHUA KHOON SENG
NRIC No	S0881215B
Date Of Birth	07/03/1951
Occupation	OUTDOOR
Date Of Driving Pass	27/08/1976
Driving Experience	42 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98519829
Fax Number	
Contact Number	OTHERS-98519829
Email Address	NOEMAIL

Address:	BLK 456 ANG MO KIO AVENUE 11 09-1554
Postcode	560456
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	RAINING
Road Surface	WET

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)	17

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190312/2074

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	SG1791G
Vehicle Make/Model/Colour	SBS BUS
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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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:

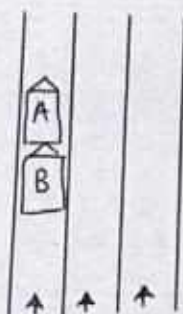
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

12/03/2019

Res L. WATTA

SKETCH PLAN



Newton Rd

A= PA1991 M
B= SG 1791 G.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

* P18 ref to police report * T/20/90312/2074

DECLARATION

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

X

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.:

12/03/2009
Reski Ma Har

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/03/2019 13:10	Vide Report No.:	Station Diary No.: 65
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Informant's Particulars

Name of Informant: CHUA KHOON SENG			Address: APT BLK 456 ANG MO KIO AVENUE 10 #09-1554 SINGAPORE 560456		
ID Type / ID No.: NRIC NO / S0881215B			Contact No.: Home/Office: Mobile: 98519829		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 68	Date of Birth: 07/03/1951	Type of Informant: Driver		
Race: Chinese			Language: Chinese	Institution / School Name:	
Occupation: Bus driver			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/03/2019 07:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 NEWTON ROAD MOULMEIN ROAD ALONG NEWTON ROAD TOWARDS MOULMEIN ROAD				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PA1991M	Bus/Coach/Mi nibus					16
SG1791G	Bus/Coach/Mi nibus					0

CONTINUATION OF REPORT

Brief Details.

On 12/03/2019 at about 0700hrs, I am travelling from Newton Road towards Molmein Road. As there are students boarding my bus, PA1991M and after boarding, I am about to move off. Suddenly, there is a SBS bus, SG1791G hit onto the rear of my bus. I then went down to make a check on the vehicle and the students' parent also went to make a check on their children for any injuries. The rear of my bus was dented in. All the students then alighted from the bus and wait for the next bus. There is a car recorder installed at the front of my bus.

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No. T/20190312/2074

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

JT
Sr Staff Sgt MOHAMED ARIFF BIN MOHAMED
KHAIR

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt YUS MASTARI I KHAZALI
Contact No.: 65476214

Authentication Stamp
NP168

Signature Of Informant:

Y.

Date/Time:
12/03/2019 13:10

Classification Of Case:

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

24 Apr 2013

Our ref 2404130501N052261556

CHUA AIR-CON BUS SERVICES
10 ANSON ROAD
#05-16
INTERNATONAL PLAZA
SINGAPORE 079903

Dear Sir/Madam

NOTIFICATION ON TRANSFER OF OWNERSHIP FOR VEHICLE NO. PA1991M

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 20130424110939282168. You are the registered owner of the vehicle with effect from 24 Apr 2013.

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 | : CHUA AIR-CON BUS SERVICES |
| 2. Identification No. Type | : Business |
| 3. Identification No. | : 53181088K |
| 4. Place Of Passport Issue | : - |
| 5. Vehicle No. | : PA1991M |
| 6. Vehicle Type | : Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus |
| 7. Vehicle Scheme | : Public Service Vehicle (Others) |
| 8. Vehicle Make | : ISUZU |
| 9. Vehicle Model | : LT133P |
| 10. Remarks | : This is a public service vehicle. |

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: PA 1991 M
veh insurance co: China

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: ~~888~~ SG 1791 G
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: SBS

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

Action taken : claim ng third party / claiming own damage / reporting only
No of Pax: 17 Pax

vehicle no: PA 1991 M
Owner contact no: 9851 9829
Date of accident: 12/03/2019
Location of accident: Newton Rd -> moulmein Rd
Time of accident: 07:00hrs
Any Injury: yes / no (if yes, must have police report)
yes

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0881215B



CHUA KHOON SENG
蔡鈞成
Race: CHINESE
Date of Birth: 07-03-1951
Country of Birth: SINGAPORE


REPUBLIC OF SINGAPORE — DRIVING LICENCE



CHUA KHOON SENG
Licence No: S0881215B
Date of Birth: 07 Mar 1951
Valid Until: 04 Sep 2003



Land Transport Authority



VOCATIONAL LICENCE
Licence No: S0881215B
Name: CHUA KHOON SENG
Issue Date: 9/9/2005
Please visit www.lta.gov.sg to check the status of this vocational licence

HP: 98519829.

2745366



NRIC No. **S0881215B**



Blood Group Date of issue
A+ **28-11-1995**

APT BLK 456 ANG MO KIO AVENUE 10 #09-1554
SINGAPORE 560456

NRIC No: **S0881215B** Date: **09/03/2010** No: **0435252**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

		PASS DATE
Class 2B	Motorcycles <= 200 CC	05 Nov 1976
Class 2A	Motorcycles between 201 CC and 400 CC	05 Nov 1976
Class 2	Motorcycles > 400 CC	05 Nov 1976
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	19 Jul 1973
Class 4*	Heavy motor cars and motor tractors > 2500 kg	27 Aug 1976

S0881215B

S / No. 9000255332

NP 426A



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	18/07/1984



MOTOR PRIVATE BUS

CERTIFICATE OF INSURANCEMotor 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)

ORIGINAL

CERTIFICATE No. **DMB1SN1538651803** Engine No : 6HH1269500
Chano: JALLT133PW3000015

1. Index Mark and Registration Number of Vehicle **PA1991M**

2. Name of Policy Holder **M/S CHUA AIR-CON BUS SERVICES**

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment **14 September 2018 Excess Sect. II S\$1,000.00**

4. Date of Expiry of Insurance **13 September 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 KHIONG 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: DOOS. & EVER
Authorised Signatory
Authorised Signatory