

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	05/04/2019 10:49
Date Of Accident	14/03/2019 07:20
Exact Location Of Accident	ALONG LOYANG AVENUE TOWARDS TPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC4653J
Insured/Policyholder	
Name Of Registered Owner	KW BUS SERVICE
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84984950
Alternative Phone No	OFFICE-84984950

Vehicle Particulars

Manufacturer	HIGER
Model	PURPLE
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN3017621901
Cover Note Number	

Driver

Name of Driver	XU XUEYUAN
Passport No/FIN	G5277400X
Date Of Birth	24/03/1981
Occupation	OUTDOOR
Date Of Driving Pass	14/11/2012
Driving Experience	6 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84984950
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	-
Postcode	
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS WEST N.P.C
Police Station Address	ROAD: 1 WOODLANDS STREET 12 , POSTCODE: 738622 , 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 SKETCH PLAN AND POLICE REPORT T/20190404/2088

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
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	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

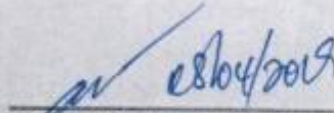
I understand, acknowledge, agree and consent that:

- (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.: _____

Accident Sketch Plan

DATE/TIME



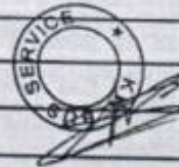
A= PC #653J

B= unknown van

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

* Pls ref to police report # T/20190404/2018

REMARKS: Owner is not aware of the accident until they received traffic police letter asking for driver to make a police report. However driver Xu Xueyuan has returned to China & only will return to Singapore in June 2019. Police report & GIM report was authorized by KW Bus Service to Manager Mr Ho Jun Xian to make both report on their driver behalf.



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:

08/04/2019
Reporting Centre Personnel's Signature
Name:
NRIC/TIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190404/2088

1 of 3

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

Report No. T/20190404/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/04/2019 13:40	Vide Report No.:	Station Diary No.: 250
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Informant's Particulars

Name of Informant: HO JUN XIAN			Address: APT BLK 889D WOODLANDS DRIVE 50 #14-261 SINGAPORE 734889	
ID Type / ID No.: NRIC NO / S8927242D			Contact No.:	Mobile: 84984950
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 29	Date of Birth: 20/08/1989	Type of Informant: Company Manager	
Race: Chinese			Language:	Institution / School Name:
Occupation: BUS SERVICES MANAGER			Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/03/2019 07:20	Type of Location: Merging Lanes
Location: Along Road 1 Traveling Toward Road 2 LOYANG AVENUE TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4653J	Bus/Coach/Minibus	HIGER		Purple	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
PC4653J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.			

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190404/2088

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Report No. T/20190404/2088

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Company Manager			
Name	HO JUN XIAN	ID No.	S8927242D
Related Vehicle	NIL	Contact No.	84984950
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Xu XueYuan	ID No.	G5277400X
Related Vehicle	NIL	Contact No.	81802733
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 14/03/2019 at 0718hrs, my driver namely: Xu XueYuan while travelling Loyang avenue turning right into TPE. A van had also turned into TPE via Tampines Ave 7. Upon arriving the merging lane, the van did not stop and gave way to my vehicle. Thus causing him to not have sufficient space and resulting him to slow down suddenly. My driver at that time did not stop the vehicle as there was no loud sounds or indications showing that there was a collision. Thus he continued his journey. I have the video recordings.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190404/2088

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

3 of 3

Report No. T/20190404/2088

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:

L /

Sgt 1 MOHAMMAD ZULFAEZAT BIN ROSLEE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

04/04/2019 13:40

Officer In Charge Of Case:

TP / GIA /

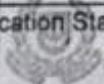
Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168



Signature:

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

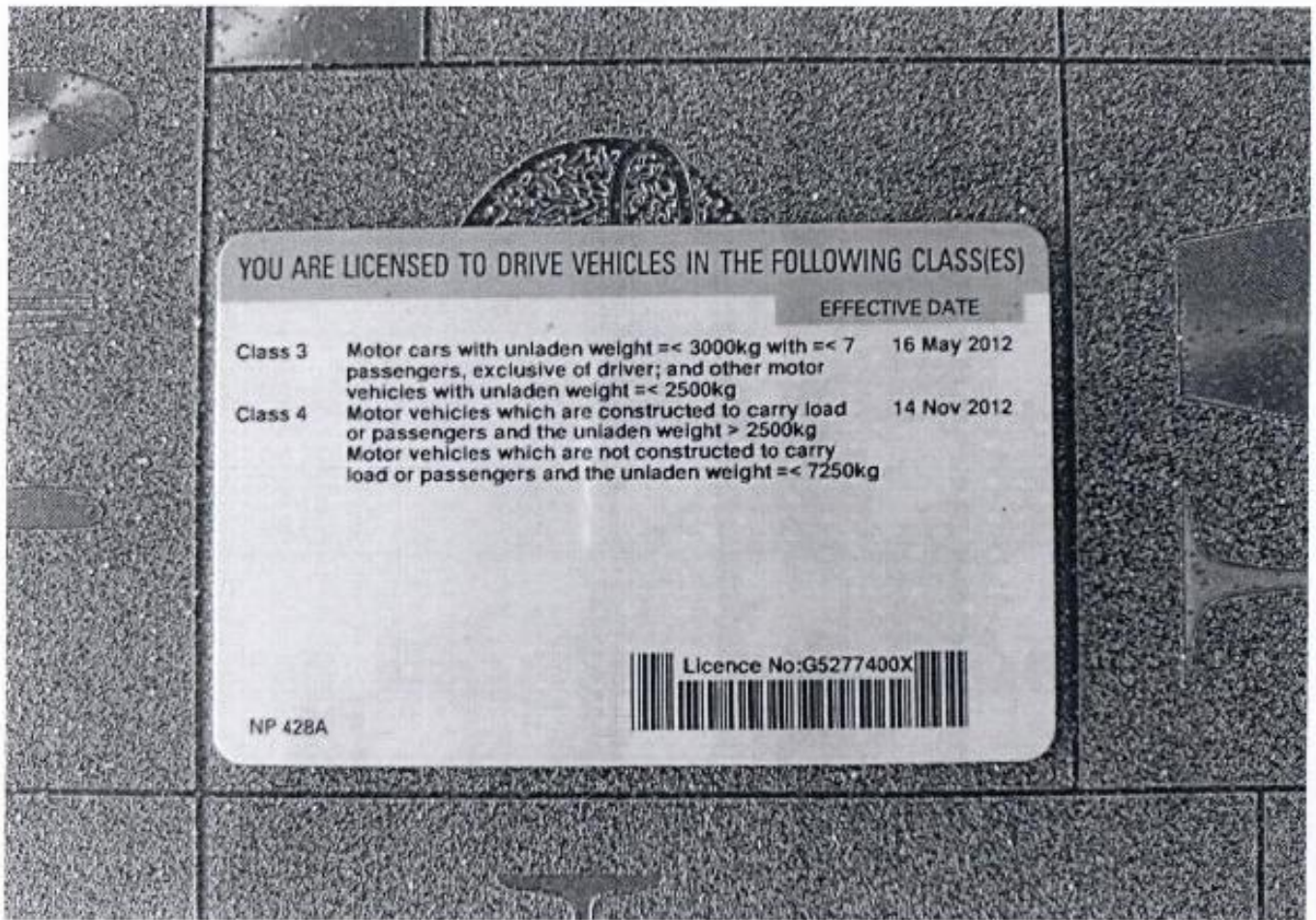
Licence Number: **G 5 2 7 7 4 0 0 X**
Name: **XU XUEYUAN**

Birth Date: **24 Mar 1981**
Issue Date: **11 May 2017**
Valid Till **15/05/2022**

002682375C



Driving License



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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	16 May 2012
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight $> 2500\text{kg}$ Motor vehicles which are not constructed to carry load or passengers and the unladen weight $\leq 7250\text{kg}$	14 Nov 2012

NP 428A

Licence No: G5277400X



Land Transport Authority

VOCATIONAL LICENCE

Licence No : **G5277400X**

Name : **XU XUEYUAN**

Issue Date : **18/2/2014**

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

Driving License

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	18/02/2014



Accident Photo



Identification Card

