

NATIONAL Assessment Centre Services			
Date In: 17/06/2019 18:30	Job description	Date & Time Completed	Done by
Ref No: 1281C719010719/4	SAS e-filing		
Veh No: PA 8865A	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 16/06/2019 19:30	i-Motor Claim Form		
OD: ⑥ : Reporting Only	i-Motor W/O (Within: OD: 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wkap / INC Assign Wkap / QW: ()		Tel: ()	Fax: ()
TP Particulars:	Veh No: SLX 8629Z	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%; F: 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 ()	

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NAI 904563	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30)			
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$40)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) RT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2019)			
Cal. 1:	6) TR: Re-inspection \$75			
Cal. 2/3:	7) N1: Idem DA + SMRT Survey \$160			
P. 1/1	8) NTUC: Additional Services:-			
	* N5: Courtesy Car / Tpt Allowance \$5			
	* N6: Repair Co-ordination \$10			
	* N7: Post Repair Inspection \$25			
	* N8: DV / Collect Excess Coordination \$5			
	TP (N11): TP (N-a INC) against INC \$20			
	9) N12: Idem Mobile \$0			
	Invoice dated: _____	For Charged		
	For Charged			

07-MAY-2019 18:30

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	17/06/2019 18:30
Date Of Accident	16/06/2019 19:30
Exact Location Of Accident	JURONG TOWN HALL ROAD TOWARDS AYE ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA8365A
Insured/Policyholder	
Name Of Registered Owner	TAN'S BUS SERVICES (TBS)
Co Reg No	53398621D
Email Address	MEL13NOV@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91372696
Alternative Phone No	OFFICE-91372696

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 COMMUTER GL (A)
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	DMB1SN3043041900
Cover Note Number	

Driver

Name of Driver	TAN YU CHUN
NRIC No	S8136098G
Date Of Birth	13/11/1981
Occupation	OUTDOOR
Date Of Driving Pass	08/09/2004
Driving Experience	14 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91372696
Fax Number	
Contact Number	OTHERS-91372696
Email Address	MEL13NOV@GMAIL.COM

Address	BLK 20 TEBAN GARDEN'S ROAD #08-101
Postcode	600020
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 - CROSS JUNCTION
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)	4

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	SLX3629Z
Vehicle Make/Model/Colour	HONDA CIVIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG SIEW MUI
NRIC/Passport Number	F2046399Q
Contact Number	91097363
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3

+	Passenger 1	NAME:	+
		GENDER:	+
+	Passenger 2	NAME:	+
		GENDER:	+

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**.
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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.


Policyholder's Signature
Date & Time:

17/06/19 1500


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

17/06/19 1500


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

17/06/2019
Rep. L. M. A. S.

SKETCH PLAN

JURONG TOWN HALL TOWARDS AYER PARK ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 16/08/19, AT ABOUT 1930HRS, I WAS TRAVELLING ON JURONG TOWN HALL TOWARD THE DIRECTION TO AYER. AS I WAS TURNING RIGHT TO AYER, SLX3692 WAS TURNING RIGHT ON MY RIGHT SIDE AND SUDDENLY SHE CHANGE HER DIRECTION TO THE LEFT AND HIT ONTO MY VEHICLE

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:

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

17/08/19 1500

17/08/19 1500

17/08/2019
Rashid
170803

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

12 Jun 2019

Our ref 1206190501N079099176

TAN'S BUS SERVICES (TBS)
APT BLK 20 TEBAN GARDENS ROAD
#08-101
SINGAPORE 600020

Dear Sir/Madam

Vehicle No. PA8365A Has Been Successfully Transferred To You

The vehicle PA8365A has been successfully transferred to you. The Business Transaction Reference No. is 20190612102107381538.

What You Need To Do:

- Check that the details in the Annex are correct.

You can find the full details in the Annex. Please check that they are correct. You can also view these details when you login to www.onemotoring.com.sg.

Visit www.onemotoring.com.sg for more information and to access a wide range of vehicle-related services. If you need a SingPass or CorpPass account, visit www.singpass.gov.sg or www.corppass.gov.sg.

Yours sincerely

Ng Lay Choo (Ms)
Deputy Director, VRL Service Operations
Vehicle Services Group
Land Transport Authority

[This letter is computer-generated, no signature is required.]

Annex

Transaction ref 20190612102107381538

Please check that the owner and vehicle details are correct:

1. Name	: TAN'S BUS SERVICES (TBS)
2. Identification No. Type	: Business
3. Identification No.	: 53398621D
4. Country/Region	: -
5. Vehicle Registration No.	: PA8365A
6. Previous Vehicle Registration No.	: -
7. Effective Date of Ownership	: 12 Jun 2019
8. Original Registration Date	: 10 Jan 2009
9. First Registration Date	: 10 Jan 2009
10. Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
11. Vehicle Scheme	: Public Service Vehicle (Others)
12. Attachment 1	: Air-Conditioned
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: TOYOTA
16. Vehicle Model	: HIACE COMMUTER GL 3.0 A
17. Year of Manufacture	: 2008
18. Primary Colour	: Silver
19. Secondary Colour	: -
20. Passenger Capacity	: 13
21. Chassis/Trailer Chassis No.	: KIDH2230004900 / -
22. Propellant	: Diesel
23. Engine No./Motor No.	: 1D1860961 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 2782 / -
25. Maximum Power Output(kW/bhp)	: 20.5 / -
26. Unladen Weight(kg)	: 1710
27. Maximum Laden Weight(kg)	: 3025
28. Open Market Value	: \$12,780.00
29. PARF Eligibility	: Yes
30. PARF Eligibility Expiry Date	: -
31. Minimum PARF Benefit	: \$100
32. No. of Transfers	: 2

Annex

Transaction ref: 20190612102107381538

Please check that the owner and vehicle details are correct:

33. IU Label No.	: 150213606
34. COE No.	: 8110105000263W
35. COE Expiry Date	: 31 Jan 2024
36. COE Category	: - Goods Vehicle & Bus
37. Quota Premium/Prevailing Quota Premium	: \$14,086.00 / \$14,086.00
38. Actual Quota Premium/PQP Paid	: \$14,086.00
39. Actual ARF Paid	: \$139.00
40. CO2 Emission(g/km)	: -
41. CO Emission(g/km)	: -
42. HC Emission(g/km)	: -
43. NOx Emission(g/km)	: -
44. PM Emission(mg/km)	: -
45. Actual CEVS/VES Rebate Utilised	: -
46. CEVS/VES Surcharge Paid	: -
47. Actual Green Vehicle Rebate Utilised	: -
48. Vehicle Lifespan Expiry Date	: 31 Jan 2029
49. Road Tax Amount	: -
50. Road Tax Start Date	: -
51. Road Tax End Date	: -
52. Remarks	: This is a public service vehicle.

ACCIDENT STATEMENT

ACCIDENT DATE: 16/06/2019 (DD/MM/YYYY), TIME: 19:30 (HH:MM)

LOCATION: JURONG TOWN HALL TOWARD AYE ENTERACE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: PA8365A
b) INSURANCE COMPANY: CHINA TAIANG
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA HIACE
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: TAN YU CHUN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 53598021D CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: TAN YU CHUN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S813609PG CONTACT: 91372696
c) ADDRESS: BLK 20 TEBAN GARDENS ROAD #08-101
S1600020

*d) DATE OF BIRTH: 13/11/1981 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 08/09/2004

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____
b) ROAD SURFACE: (DRY / WET / OTHERS) _____

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLX3692 MODEL: HONDA CIVIC
b) DRIVER'S NAME: NG SIEN MU
c) NRIC/FIN/PASSPORT: E20463990 CONTACT: 91097363

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

SEAN @ SATMOTORS.COM

email = MELBNOV@GMAIL.COM

VIDEO

* No of passenger
(including driver)
(4)

* No of passenger
(including driver)
(03)

* No of passenger
(including driver)
()

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8136098G



Name
TAN YU CHUN

陈 友 骏

Race
CHINESE
Date of birth
13-11-1981 Sex
M
Country of birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8136098G

Name

TAN YU CHUN

Birth Date: 13 Nov 1981

Issue Date: 08 Sep 2004



4883499

NRIC No: S8136098G



Date of issue
18-09-2012

APT BLK 20 TEBAN GARDENS ROAD #08-101
SINGAPORE 800020

NRIC No: S8136098G

Date: 24/12/2012

No: 7201700

For LKK/NAC Use Only

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

Class 2 Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

PASS DATE
08 Sep 2004



Licence No: S8136

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)

CERTIFICATE No.	DMB1SN3043041900	Engine No :1KD1860961 Chassis No:KDH2230004900
1. Index Mark and Registration Number of Vehicle	PA8365A	
2. Name of Policy Holder	M/S TAN'S BUS SERVICES (TBS)	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	11 JUNE 2019 (16:22 HOURS)	EX SECT. II S\$750.00
4. Date of Expiry of Insurance	10 JUNE 2020	
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.

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 SPRINT-TESTING.
- (2) USE WHILST DRAWING A TRAILER, EXCEPT THE TOWING (OTHER THAN FOR REWARD) OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

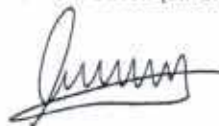
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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.



Countersigned By:

Authorised Officer



Authorised Signatory