

NATIONAL Assessment Centre Services (w/1 Jaxfax) **MA906214**

Date In: 15/08/2018 18:29	Job description	Date & Time Completed	Done by
Ref No: N/A/CT219014263/4	SAS e-filing		
Veh No: PC 4845 E	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 13/08/2019 11:01	I-Motor Claim Form		
OD: 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/Whan		

Preferred Wksp / HNC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: **YN 7600 S** 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: (\$) Lending: \$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 / Non-INC (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 / Action:

Claimant's Particulars	Invoice Preparation Checklist	Amnt (\$)	Amnt (\$)
Driver/Owner:	Invoice	In Bill	Add Bill
Contact No:	1) AR: Accident Reporting (\$30)		
Damaged Portion:	2) DA: Damage Assessment (\$100); INC (\$80)		
QC Checked by (Engn-In-Charge):	3) TP: Towing Fee \$40/\$45		
Additional Comments:	4) FT: Follow-Through Survey \$120		
Est. J:	5) PT: Follow-Through Survey (Resurvey) \$30		
Est. 2/3:	For claimant request INC Only (w/ 10 Jan 2005)		
1/1	6) TR: TR Inspection \$75		
	7) NI: Idm DA + SMRT Survey \$160		
	8) NIUC Additional Services:		
	* NI: Courtesy Car / Tpi Allowance \$5		
	* NI: Repair Co-ordination \$10		
	* NI: Post Repair Inspection \$25		
	* NI: DV / Collect Excess Coordination \$5		
	* NI (N1) / TP (N-in-INC) against INC \$20		
	* NI2: Idm Mobile \$0		
	Invoice dated	Pen Charged	
		Pen 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	15/08/2019 18:29
Date Of Accident	13/08/2019 11:00
Exact Location Of Accident	ALONG 21 CHIA PING ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC4842E
Insured/Policyholder	
Name Of Registered Owner	AEDGE HOLDINGS PTE LTD
Co Reg No	200509323E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91460806
Alternative Phone No	OFFICE-97230492

Vehicle Particulars

Manufacturer	YUTONG
Model	ZK6107H-6.7 D (M)
Exact Purpose for which vehicle was being used at time of accident	BUS WAR PARKED
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
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Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN1925171900
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FARIS BIN ABDUL MUTALIB
NRIC No	S8927398F
Date Of Birth	11/08/1989
Occupation	OUTDOOR
Date Of Driving Pass	21/12/2012
Driving Experience	6 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91460806
Fax Number	
Contact Number	OTHERS-97230492
Email Address	NOEMAIL

Address BLK 419 JURONG WEST STREET 42
#09-1005

Postcode 640419

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name JURONG WEST NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-2689999 - FAX NO: 62672438

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190814/2043

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 YN7600S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name ETIQA INSURANCE PTE LTD

SKETCH PLAN

IMPORTANT NOTICE

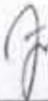
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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)**

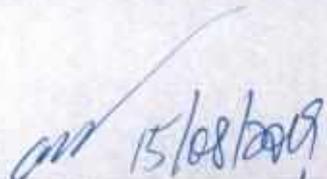
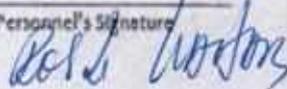
I understand, acknowledge, agree and consent that:

- (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:




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


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



**SINGAPORE
POLICE FORCE**



T/20190814/2043

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3
Report No. T/20190814/2043

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/08/2019 11:24	Vide Report No.:	Station Diary No.: 78
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Informant's Particulars			
Name of Informant: MUHAMMAD FARIS BIN ABDUL MUTALIB		Address: APT BLK 140D CORPORATION DRIVE #04-76 SINGAPORE 614140	
ID Type / ID No.: NRIC NO / S8927398F		Contact No.:	Mobile: 97230492
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 30	Date of Birth: 11/08/1989	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Bus driver		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 13/08/2019 11:00	Type of Location: Straight Road
Location: CHIA PING ROAD Outside Tiger Balm factory.				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4842E	Bus/Coach/Minibus				Totally Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190814/2043

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 3

Report No. T/20190814/2043

CONTINUATION OF REPORT

Driver			
Name	MUHAMMAD FARIS BIN ABDUL MUTALIB	ID No.	S8927398F
Related Vehicle	NIL	Contact No.	97230492
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 13/08/2019 at about 1100hrs I last parked my company bus bearing plate number (PC4842E) along 21 Chia Ping Road in front of Tiger Balm factory. On 13/08/2019 at about 1630hrs I discovered that my bus left side mirror was badly damaged. I noticed there is a CCTV outside the company thus I approached the security officer namely Somtha Bhai and ask for details as she informed that she saw a lorry bearing plate number YP7600 with unknown last alphabet collided onto my bus.



**SINGAPORE
POLICE FORCE**



T/20190814/2043

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

3 of 3

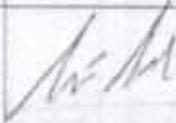
Report No. T/20190814/2043

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: J/ SC2 LINUS LEOK YI QUAN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 14/08/2019 11:24
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp NP168 	

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 x Employer
Witness (if any): yes/no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: YP76002
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: Etiga -INS.

Police report (if any) yes/no
Police report reported at which police station: Jurong West N.P.C
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 Fax: 0 fax

Connect3 client vehicle no: PC4842E
Owner contact no: 9146 0806
Date of accident: 13/08/2019
Location of accident: Chia Ping Rd
Time of accident : 11:00
Any injury: yes / no (if yes, must have police report)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8927398F



Name

MUHAMMAD FARIS BIN ABDUL
MUTALIB

Race
CHINESE

Date of birth
11-08-1989

Sex
M

Country of birth
SINGAPORE

For LKK/NAC Use Only

Land Transport Authority

For LKK/NAC Use Only

VOCATIONAL LICENCE

Licence No : 88927398F

Name : MUHAMMAD FARIS BIN ABDUL
MUTALIB

Issue Date : 28/11/2014

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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8927398F

Name

MUHAMMAD FARIS BIN ABDUL
MUTALIB

For LKK/NAC Use Only

Birth Date: 11 Aug 1989

Issue Date: 10 Dec 2014





3800840




NRIC No. **S8927398F**

For LKK/NAC Use Only

Date of Issue
18-08-2004

APT BLK 419 JURONG WEST STREET 42 #09-1005
SINGAPORE 640419

NRIC No: **S8927398F** Date: **18/11/2018 (R)**

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 675701.

Type	Description	Issue Date
03	BUS VL	26/11/2014
04	BUS ATTENDANT	26/11/2014

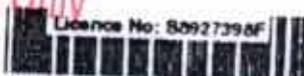
For LKK/NAC Use Only



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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	29 Oct 2007
Class 2A Motorcycles between 201 cc and 400 cc	30 Dec 2008
Class 2 Motorcycles > 400 cc	18 Sep 2012
Class 3 Motor Cars <= 3000kg with <=7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	19 Nov 2008
Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	21 Dec 2012
Class 5 Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	
Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	11 Nov 2013

For LKK/NAC Use Only



NP 428A

MOTOR PRIVATE BUS

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)

H SM
BR0120A
Cov. Type: C
PLM 330572

ORIGINAL

CERTIFICATE No.

08M18N1925171900

Engine No : ISB67E525022171428

Chassis: LKTTBTD67F1044396

1. Index Mark and Registration
Number of Vehicle

PC4642X

2. Name of Policy Holder

M/S AEGEE HOLDINGS PTE LTD

AutoSafe

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations, Ordinance or Enactment

01 June 2019

Excess Sect. I S\$3,000.00

Excess Sect. II S\$3,000.00

4. Date of Expiry of Insurance

31 May 2020

EX ON WINDSCREEN S\$500.00

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.

KIRE PURCHASE CO. : DBS BANK LTD AS HF 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).

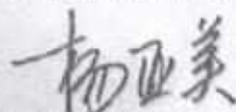
Please see reverse

Issued By:



Authorized Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorized Signatory

Transaction ref 20160603170436562940

The owner and vehicle particulars for Vehicle No. PC4842E as at 03 Jun 2016 are as follows:

1.	Name	: AEDGE HOLDINGS PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 200509323E
4.	Place Of Passport Issue	: -
5.	Registered Address	: 4009 ANG MO KIO AVENUE 10 #04-33 SINGAPORE 569738
6.	Mailing Address	: -
7.	Vehicle No.	: PC4842E
8.	Effective Date of Ownership	: 03 Jun 2016
9.	Original Registration Date	: 03 Jun 2016
10.	First Registration Date	: 03 Jun 2016
11.	Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
12.	Vehicle Scheme	: Public Service Vehicle (Others)
13.	Attachment 1	: Air-Conditioned
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: YUTONG
17.	Vehicle Model	: ZK6107H
18.	Year of Manufacture	: 2015
19.	Primary Colour	: Multi-Colour
20.	Secondary Colour	: -
21.	Passenger Capacity	: 45
22.	Chassis/Trailer Chassis No.	: LZYTBT67F1044396 / -
23.	Propellant/Emission Standard	: Diesel / Euro V
24.	Engine No./Motor No.	: ISB67E525022171428 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 6690 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 11000
28.	Maximum Laden Weight(kg)	: 16500
29.	Open Market Value	: \$126,948.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: - <i>205 010 6854</i>
34.	COE No.	: 2016050105000147H
35.	COE Expiry Date	: 02 Jun 2026
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: \$44,213.00
38.	Actual Quota Premium/PQP Paid	: \$44,213.00
39.	Actual ARF Paid	: \$6,348.00
40.	CO2 Emission(g/km)	: -
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: 02 Jun 2036
45.	Road Tax Amount	: \$850.00
46.	Road Tax Start Date	: 03 Jun 2016
47.	Road Tax End Date	: 02 Dec 2016
48.	Remarks	: This is a public service vehicle. To renew the COE, the Prevailing Quota Premium payable is that of Category C.