

NATIONAL Assessment Centre Services. (ver 1 Jan 00)

MVA 19/19977

Date In:	Job description	Date & Time Completed	Done by
10/09/2019 1246	SAS e-filing		
Ref No: NBS/CIT/901599/4	E-mail (2/John Sims, AIC 2hrs)		
Veh No: PC 574 E	I-Motor Claims Form		
DOA: 27/08/2019 07:20	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OID: TP / Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whsp		

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

TP Particulars: Veh No: **SME 4346X** 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% P: 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: (Installation of 67 Bigger)
- 1) Apply for Transport Allowance () / Courtesy Car ()
 - 2) QC Check / Post Repair Inspection ()
 - 3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

Date/Time	Activity

Claimant's Particulars	Amount	By
Driver/Owner:		
Contact No:		
Damaged Portion:		
QC Checked by (Engr-In-Charge):		
Author's Comments:		
Sal. P:		
2 / 3		

1) AR: Accident Reporting (\$30)		
2) DA: Damage Assessment (\$100)	INC (\$10)	
3) TP: Towing Fee	\$40/\$45	
4) FT: Follow-Through Survey	\$120	
5) FT: Follow-Through Survey (Resurvey)	\$20	
For claiming against INC Only (ver 10 Jan 2003)		
6) TR: Re-inspection	\$75	
7) NI: Idas DA + SMRT Survey	\$160	
8) NTUC Additional Services:		
OD:		
*N5: Courtesy Car / Tpl Allowance	\$5	
*N6: Repair Co-ordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$5	
TP (NI): TP (N-in INC) against INC	\$20	
2) NI2: Idas Mobile	\$0	
Invoice dated	Fee Charged	
Invoice dated	Fee Charged	

WARRANTY

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	10/09/2019 12:46
Date Of Accident	27/08/2019 07:20
Exact Location Of Accident	JUNCTION OF WOODLANDS AVE 2/WOODLANDS AVE 1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PC574E
Insured/Policyholder	
Name Of Registered Owner	A & K COACH SERVICES
Co Reg No	53158641C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84884547
Alternative Phone No	OFFICE-84884547
Vehicle Particulars	
Manufacturer	SUNLONG
Model	SLK6702 3.8M
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	REPORTING ONLY
Vehicle Category	BUS
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMB1SN1500171904
Cover Note Number	
Driver	
Name of Driver	PARMESHA SINGH CHAHAL S/O PRITAM SINGH
NRIC No	S8846138Z
Date Of Birth	22/11/1988
Occupation	OUTDOOR
Date Of Driving Pass	19/07/2011
Driving Experience	8 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-84884547
Fax Number	
Contact Number	OTHERS-84884547
Email Address	NOEMAIL

Address	BLK 116 EDGEFIELD PLAINS #11-340
Postcode	620116
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)	19

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , 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/20190909/2079

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	SME4346X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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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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

A & K COACH SERVICES
Blk 79B #36-27
Toa Payoh Central
Singapore 312059
Tel: 6884 7480 Fax: 6884 7481

Driver's Signature

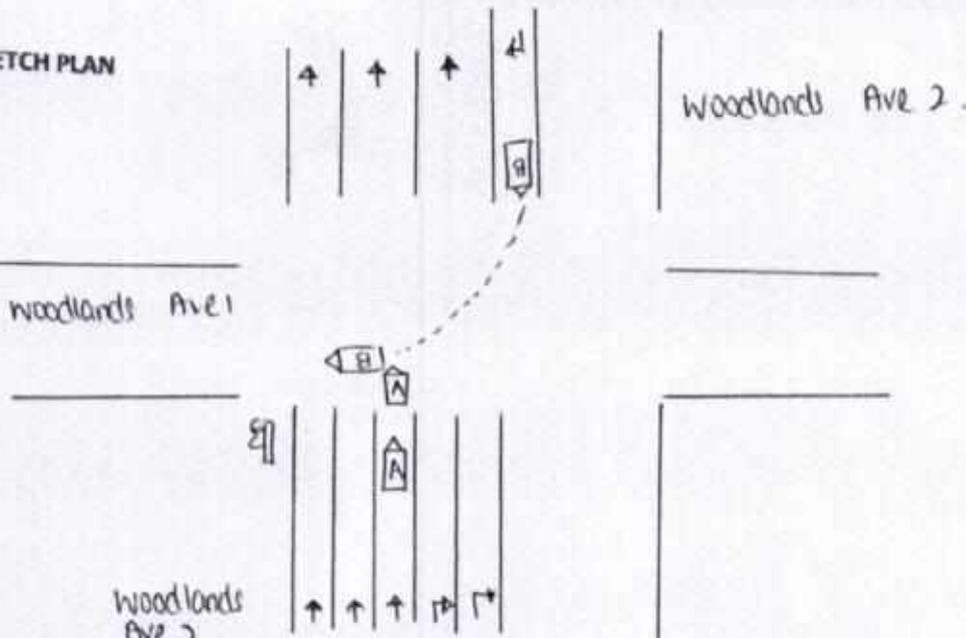
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

10/09/2018
Kohli Woster

SKETCH PLAN



Woodlands Ave 2.

A= PC574E

B= SME4346X

Woodlands Ave 1

Woodlands Ave 2

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

* PIS ref to police report *. 7/20190909/2019

DECLARATION

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

A & K COACH SERVICES

Policy No: BIK 79B #36-27

Date & Time: Tda Payoh Central

Singapore 312059

Tel: 6884 7480 Fax: 6884 7481

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

10/09/2019
Reporting Centre Personnel's Signature
Name: [Signature]
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20190909/2079

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Report No. T/20190909/2079

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No. 1800-6049999

CONTINUATION OF REPORT

Driver			
Name	PARMESHAR SINGH CHAHAL S/O PRITAM SINGH	ID No.	S8846138Z
Related Vehicle	PC574E (Bus/Coach/Minibus)	Contact No.	84884547
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 27/08/2019 at about 0720hrs, I was driving my company (A&K Coach Services) vehicle PC574E Sunlong white bus with blue/red stripes (19 seater) along Woodlands Ave 2 after exiting from SLE. At that time, I had 16 passengers in my vehicle. I was crossing the junction of Woodlands Ave 1 and Woodlands Ave 2 when an unknown black vehicle (hatchback) turn right from Woodlands Ave 2 towards Woodlands Ave 1.

My bus collided onto the rear left side of the other vehicle and I drove to Woodlands Ave 5 to stop and wait. I was there for about 1 hour but no one approached me. The traffic was heavy with buses along the lanes.

On 09/09/2019 morning, I received a call from private number and a male Chinese who claims to be from a car workshop. He informed me that my vehicle is involved in a hit and run case and Traffic police will be looking for me. I informed my insurance company and was advised to lodge a report as I did not hit and run. I was waiting along the road side of Woodlands Ave 5 for an hour and my GPS from my company will be able to verify my trips.



**SINGAPORE
POLICE FORCE**



T/20190909/2079

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Report No. T/20190909/2079

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No. 1800-6049999

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:
F /
Sr Staff Sgt AKBAR KHAN GAFFOOR

Signature Of Informant:

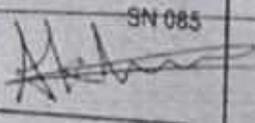
Signature Of Interpreter:
Not applicable

Date/Time:
09/09/2019 14:10

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168

 Signature:  SN 085
Singapore Police Force

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: _____

Driver IC:
Driver Name :
Driver Pass date :
Driver Birth date :

Relationship with insured: Employee a Employer
Witness (if any): yes / no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: SME 4346 X
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: _____

Police report (if any): yes / no
Police report reported at which police station: Punggol NPC.
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 Pax: 19 pax

Connect3 client vehicle no: PC574E
Owner contact no: 8488 4547.
Date of accident: 27/08/19
Location of accident: Junction of Woodlands Ave 2 x 1
Time of accident : 07:30hrs.
Any injury: yes / no (if yes, must have police report)



中国太平保險(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208184E

MZ601
R SN
AN0580A
Cov. Type: T

MOTOR PRIVATE BUS

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1969
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No	DMB15N1500171904	Engine No :ISF385414189020650 Chano:LFZBDAEXBAS00459
1. Index Mark and Registration Number of Vehicle	PC574E	AUTOSAFE
2. Name of Policy Holder	M/S A & K COACH SERVICES	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	01 January 2019	Excess Sect. II S\$750.00
4. Date of Expiry of Insurance	31 December 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.

* 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: DDD.S. & EVEL

Authorised Officer



.....
Authorised Signatory

Text size + -

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company
Cert No. 53158641C
Owner ID Type: Business
Owner Name: A & K COACH SERVICES
Registered Address: APT BLK 79B TOA PAYOH CENTRAL #36-27 SINGAPORE 312079
Mailing Address: -
Birth Date: -

Vehicle Particulars

Vehicle No.: PC574E
Previous Vehicle No.: -
Effective Date of
Ownership: 09 Apr 2013
Original Regn Date: 06 Aug 2011
Registration Date: 06 Aug 2011
Year of Manufacture: 2011
Vehicle Type: Private Hire (Chauffeur) Bus/Coach/Minibus
Vehicle Scheme: Public Service Vehicle (Others)
Vehicle Attachment 1: Air-Conditioned
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: SUNLONG
Vehicle Model: SLK5702 3.8 M
Primary Colour: Multi-Colored
Secondary Colour: -
Passenger Capacity: 19
Chassis No.: LFZBDADEXBAS00459
Engine No.: ISF38S414189020650
Engine Capacity/Power
Rating: 3800 cc / -
Maximum Power Output: -
Propellant: Diesel
Max Unladen Weight: 4560 kg
Maximum Laden Weight: 6500 kg
Open Market Value: \$30,628.00
PARF Eligibility: No
PARF Eligibility Expiry
Date: -
Minimum PARF Benefit: -
No. of Transfers: 1
IU Label No.: 1550230262
COE No.: 2011050105000452D
COE Expiry Date: 05 Aug 2021
COE Category: C - Goods Vehicle & Bus
COE Registration
Category: C - Goods Vehicle & Bus