

## 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             | 23/01/2020 09:59                                  |
| Date Of Accident           | 21/01/2020 09:20                                  |
| Exact Location Of Accident | JALAN ANAK BUKIT AFTER ( BS:42089-OPP BUKIT TIMAH |
| Country/State of Loss      | SINGAPORE   |

### DETAILS OF OWN VEHICLE

|                             |                 |
|-----------------------------|-----------------|
| Vehicle Registration Number | SMB1590S        |
| <b>Insured/Policyholder</b> |                 |
| Name Of Registered Owner    | SMRT BUSES LTD  |
| Co Reg No                   | 1XXXXX292D      |
| Email Address               | NOEMAIL         |
| Mobile Phone No             |                 |
| Alternative Phone No        | OFFICE-80000000 |

### Vehicle Particulars

|  |                    |
|--|--------------------|
| Manufacturer   | MAN                |
| Model  | MAN NL320F ( A22 ) |
| Exact Purpose for which vehicle was being used at time of accident           |                    |
| 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                |

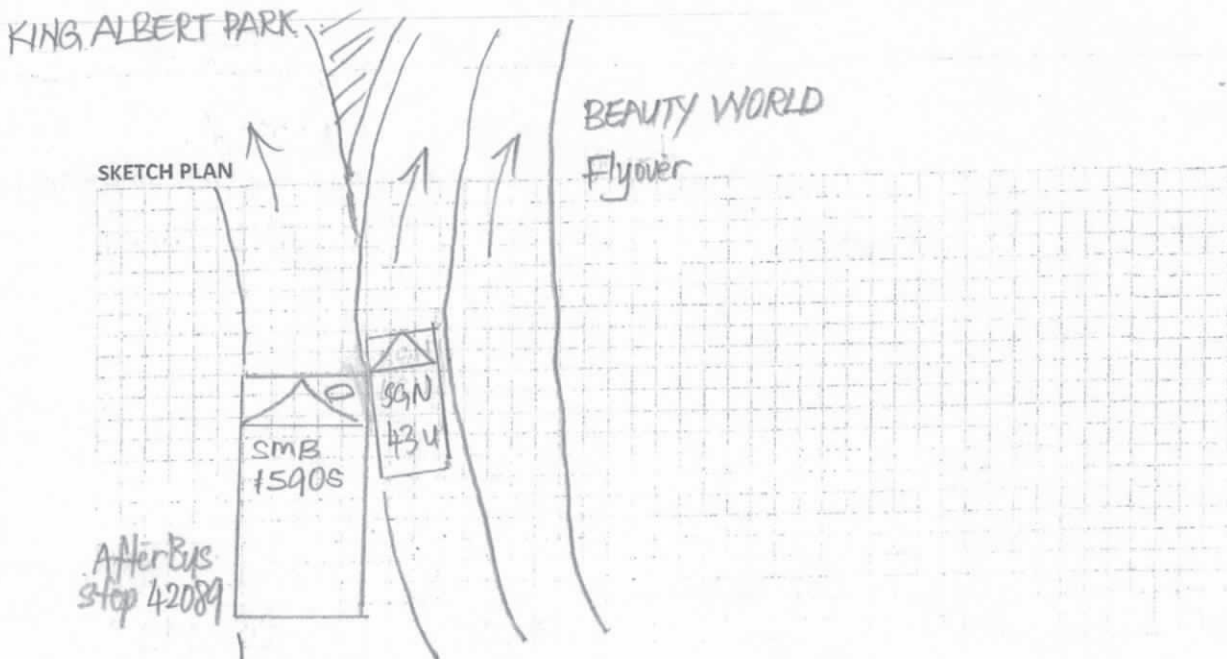
### Insurance Company

|                           |                                |
|---------------------------|--------------------------------|
| Name of Insurance Company | MS FIRST CAPITAL INSURANCE LTD |
| Type Of Coverage          | THIRD PARTY                    |
| Fleet Policy              | YES                            |
| Policy Number             | D-19093203MFBP                 |
| Cover Note Number         |                                |

### Driver

|                      |                        |
|----------------------|------------------------|
| Name of Driver       | KHOO YAN TIK           |
| NRIC No              | SXXXXX094G             |
| Date Of Birth        | 23/05/1959             |
| Occupation           | OUTDOOR                |
| Date Of Driving Pass | 09/03/1998             |
| Driving Experience   | 21 YEARS AND 10 MONTHS |
| Gender               | MALE                   |
| Mobile Number        | (LOCAL) +65-80000000   |
| Fax Number           |                        |
| Contact Number       |                        |
| Email Address        | NOEMAIL                |

No. Of Passenger (Including Driver)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

After Bus-stop (42089) Beauty World, suddenly private car -  
Mazda SAN 43U cut into bus-lane (SMB 1590S). Bus front  
right bumper slightly dented, car left mud-guard dented, on the  
top of the front wheel.

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.: