

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 willful 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	01/06/2020 11:43
Date Of Accident	26/05/2020 07:50
Exact Location Of Accident	ALONG CHANGI VILLAGE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PD108M
Insured/Policyholder	
Name Of Registered Owner	AVIVA COACH SERVICES
Co Reg No	5XXXX647D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97659180
Alternative Phone No	OFFICE-85118304
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN3069361900
Cover Note Number	

Driver

Name of Driver	RAVI S/O PALAYSAMY
NRIC No	SXXXX055A
Date Of Birth	03/02/1970
Occupation	OUTDOOR
Date Of Driving Pass	23/08/2011
Driving Experience	8 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97659180
Fax Number	
Contact Number	OTHERS-85118304
Email Address	NOEMAIL

Address	BLK 138 TAMPINES STREET 11 #03-148
Postcode	521138
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	CHAIN COLLISION
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	3
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)	6

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	SLT5557E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	
No. Of Passenger (including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SDQ8378X
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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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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.:

SKETCH PLAN



A = PD108M

B - SLT 5557E

C - SDQ 8378x

Changi village

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/5/2020 around 07:05hrs I was driving my Bus PD108M along Changi village. My bus was behind veh B SLT 5557E, suddenly. Veh C SDQ 8378x collided my rear, & my vehicle more forward collided veh B.

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.:

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: SLT 5557E & SDA 82782
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: NTUC

Police report (if any): yes / no
Police report reported at which police station: _____
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: 6 Pax

Connect3 client vehicle no: PD108M
Owner contact no: 9765 9180
Date of accident: 26/5/2020
Location of accident: Changi village
Time of accident: 07:05 hrs
Any Injury: yes / no (if yes, must have police report)

Vehicle Registration Details

Vehicle No. PD108M	Make/ Model TOYOTA/HIACE COMMUTER GL 2.8 AUTO	Vehicle Scheme Public Service Vehicle (Others)
Current Propellant Diesel	Chassis No. GDH2232002015	Vehicle Type Private Hire (Chauffeur) Bus/Coach /Minibus

Owner's Details

Owner Name:

AVIVA COACH SERVICES

Owner ID Type:

Business

NRIC/Passport/Company Cert No.:

53265647D

Registered Address:

**APT BLK 162 WOODLANDS STREET 13 #04-
615 NULL SINGAPORE 730162**

Mailing Address:

-

Birth Date:

-

Registration Details

Previous Vehicle No.:

-

Effective Date of Ownership:

13 Sep 2019

Original Registration Date:

13 Sep 2019

Registration Date:

13 Sep 2019

No. of Transfers:

0

IU Label No.:

1550320683

Vehicle Specifications

Engine No.:

1GD8436429

Chassis No.:

GDH2232002015

Year of Manufacture:

Primary Colour:

2019

White

Secondary Colour:

Passenger Capacity:

13

Engine Capacity / Power Rating:

Maximum Power Output:

2754 cc / -

-

Max Unladen Weight:

Maximum Laden Weight:

2180 kg

3020 kg

Vehicle Attachment 1:

Vehicle Attachment 2:

No Attachment

-

Vehicle Attachment 3:

-

Additional Registration Fee (ARF) and COE Information

Open Market Value:

Additional Registration Fee Rate:

\$42,878.00

5.00 %

Actual ARF Paid:

Vehicle Lifespan Expiry Date:

\$2,144.00

12 Sep 2039

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

No

\$0.00

COE No.:

COE Expiry Date:

2019091305000727R

12 Sep 2029

COE Category:

COE Registration Category:

C - Goods Vehicle & Bus

C - Goods Vehicle & Bus

Quota Premium (QP) / Prevailing Quota Premium:

PQP Paid

- / \$25,832.00

\$21,393.00

QP (Regn Cat):

--

PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

No

-

Minimum PARF Benefit:

-

Vehicle Emissions Details

CO₂ Emission:

-

CO Emission:

-

HC Emission:

-

NO_x Emission:

-

PM Emission:

-

Message:

The vehicle is registered under Early Turnover Scheme. This is a public service vehicle.

Printed on 26 May 2020 11:33:52

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中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING ASSURANCE (SINGAPORE) PTE. LTD.

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, 1950 (Malaysia)

42603
M-08
A20663A
COMBINED 6199

CERTIFICATE No.

1. Index Mark and Registration
Number of Vehicle

THIRIDW1869381208

Singapore Reg: 1069416420
Chinese Reg: 00R232052015

ED100H

2. Name of Policy Holder

H/S AVIVA COACH SERVICES

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

11 SEPTEMBER 2019

EX SECT. 1 \$51,509.5

4. Date of Expiry of Insurance

EX SECT. 11 \$51,509.5

5. Persons or Classes of Persons entitled to drive *

12 SEPTEMBER 2020 EX. ON WINDSCREEN \$5100.00

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 RESPECT 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, RACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
- (2) USE WHILE CARRYING A TRAILER, EXCEPT THE TOWING (OTHER THAN FOR REWARDS OF ANY ONE DISABLED
MECHANICALLY PROPELLED VEHICLE

HIKE PURCHASE CO. - UNITED OVERSEAS BANK LIMITED AS OF OWNER

*Limitations contained 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 Vehicle
(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. L



Countersigned By:

Authorized Officer

[Signature]

Authorized Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 054308 Tel: 6358 8111 Fax: 6228 3592 Website: www.sg.chinataping.com