

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	16/06/2020 16:30
Date Of Accident	16/06/2020 13:05
Exact Location Of Accident	UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8306K
Insured/Policyholder	
Name Of Registered Owner	JOSEPH COACH PTE LTD
Co Reg No	201719851E
Email Address	JOSEPHCOACHSG@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-91781988

Vehicle Particulars

Manufacturer	ISUZU
Model	LT434W
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN19346219000
Cover Note Number	

Driver

Name of Driver	WEN XIUFANG
Passport No/FIN	G2095911N
Date Of Birth	19/01/1974
Occupation	OUTDOOR
Date Of Driving Pass	06/08/2012
Driving Experience	7 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-85900787
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 1 DEFU LANE 10 #01-547
Postcode	539182
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SUBSIDIARY EMPLOYEE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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?	
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)	1

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

WHEN I WAS TRAVELLING ALONG UPPER SERANGOON ROAD, THE FRONT VEHICLE BRAKED, I ALSO BRAKED. DUE TO THE WEATHER CONDITION AND SURFACE WAS WET, MY VEHICLE SLIPPED FORWARD AND HIT ONTO ITS VEHICLE'S REAR PORTION. NO ONE WAS INJURED.

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	SHD5986G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TOH GIN CHENG
NRIC/Passport Number	S1693576Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

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.

JOSEPH COACH PTE LTD

Policyholder's Signature

Date & Time: 16/06/2020
15:50 pm

Driver's Signature

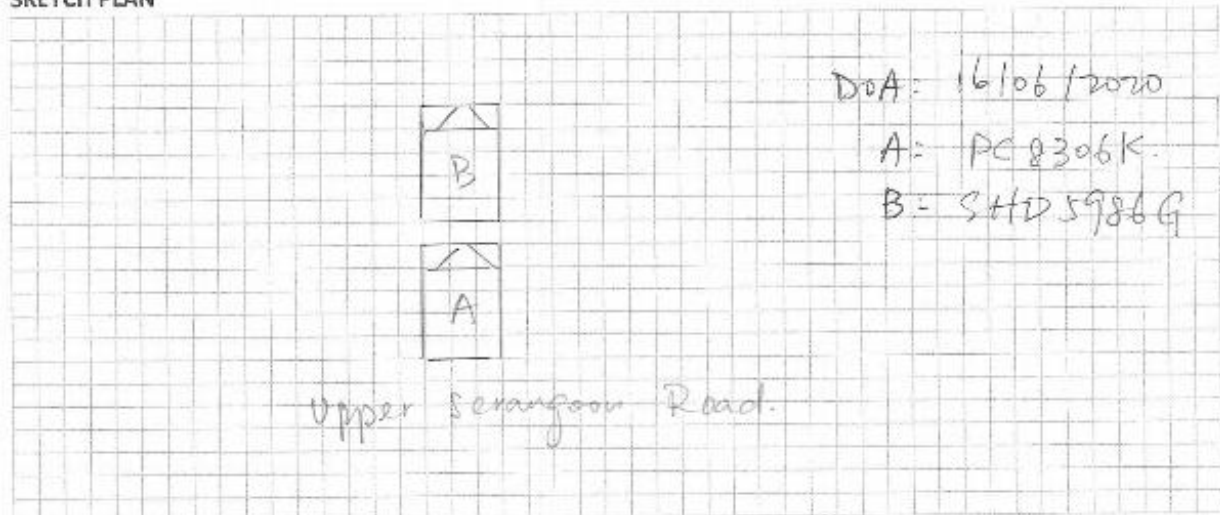
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I was travelling along Upper Serangoon Road, the front vehicle braked, I also braked. Due to the weather condition and surface was wet, my vehicle slipped forward and hit onto its vehicle's rear portion. No one was injured.

DECLARATION

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

JOSEPH COACH PTE LTD

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.:

AUTHORIZATION LETTER

Joseph Coach Pte Ltd

REG NO. 201719851E
BLK 1 DEFU LANE 10 #01-547 SINGAPORE 539182-
TEL : 6858 5311 / 96483814
Email: josephcoachsg@gmail.com

16 June 2020

To whom it may concern

Dear Sir,

We wish to inform you that we permit our driver, Wen XiuFang(G2095911N) of Joseph Coach Services to use our bus PC8306K. Thanks.

Regards



Lee Joo

JOSEPH COACH PTE LTD



Motor Bus

MZ601

E SN

AN0666A

Cov. Type:C

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, 1966 (Malaysia)

CERTIFICATE No. DMB1SN19346219000

Engine No.: 6HK1213649
Cha. No.: JALLT434MJ700057

1. Index Mark and Registration Number of Vehicle PC8306K

AUTOSAFE

2. Name of Policy Holder JOSEPH COACH PTE LTD

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 30/05/2019

Excess Sect. I S\$2,000.00

Excess Sect. II S\$2,000.00

EX ON WINDSCREEN S\$350.00

4. Date of Expiry of Insurance 31/08/2020

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 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.

HIRE PURCHASE CO. : MAYBANK SINGAPORE LIMITED AS HP 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Sust Lay Sally
Authorised Officer


Authorised Signatory

Identification Card

 **S PASS**
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
JOSEPH COACH SERVICES



Name
WEN XIUFANG

S Pass No.
0 7508286-

Sector
SERVICE







K1307206

Identification Card

VISIT PASS
Immigration Regulations

93-04-2019

Name
WEN XIUFANG

FIN
G2095911N

Date of Birth
19-01-1974

Sex
F

Nationality
CHINESE

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass
App to check status



Driving License




Driving License

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


	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	17 Jul 2012
Class 4A Omnibuses	06 Aug 2012

NP 428A

Licence No:G2095911N



Land Transport Authority



VOCATIONAL LICENCE
Licence No : G2095911N
Name : WEN XIU FANG

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

Driving License

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Siling Drive, Singapore 575701.

First Name

Second Name

Issue Date

01/10/2018

01/10/2018

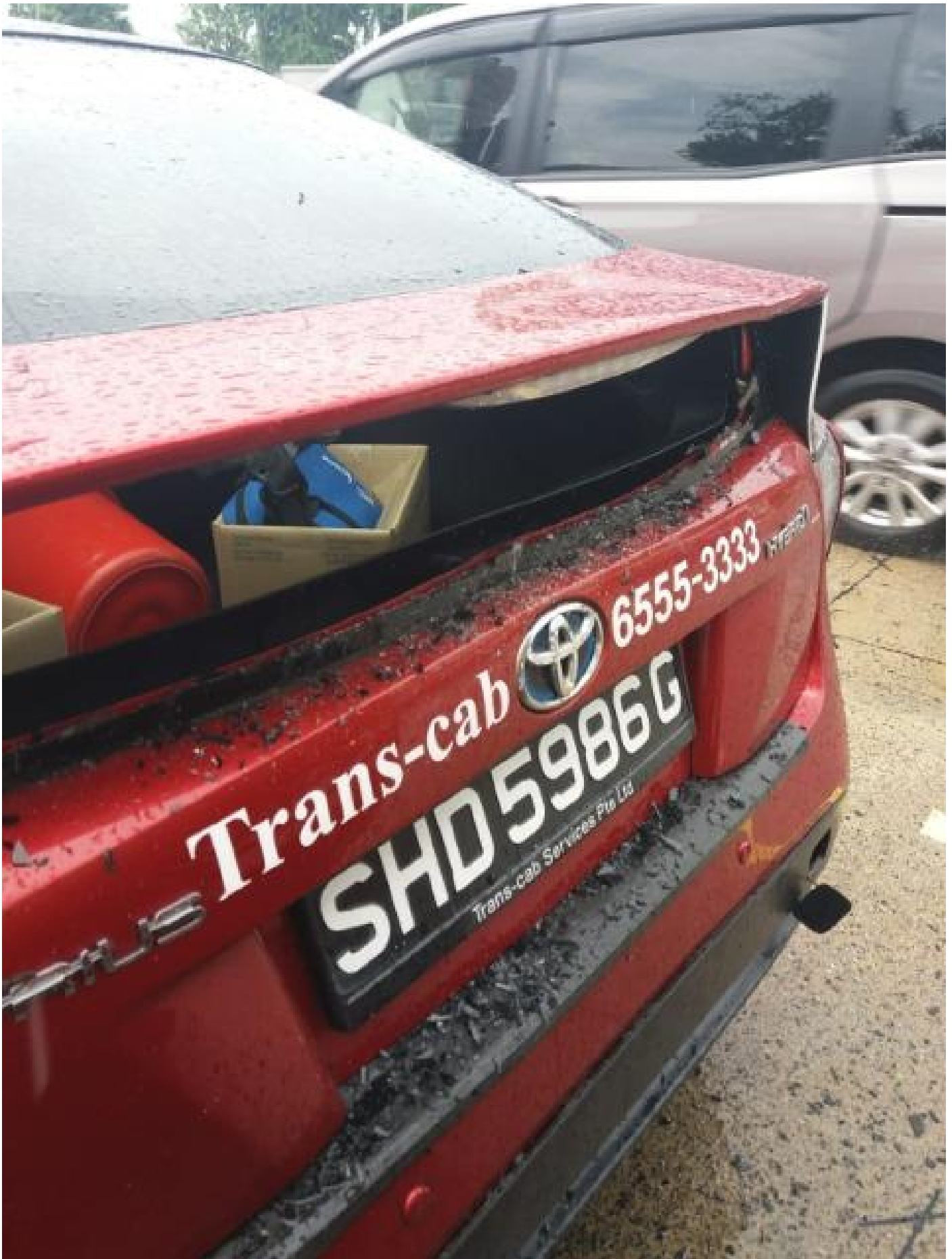
29/10/2018



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1693576Z



Name
TOH GIN CHENG

卓 銀 增

Race
CHINESE

Date of birth
25-09-1965

Sex
M

Country of birth
SINGAPORE

