

NATIONAL Assessment Centre Services. [ver 1 Jan 05]

81022110003

Date In:	Job description	Date & Time Completed	Done by
15/01/2021 14:36	SAS e-illing		
Ref No: NBA/1519210007421	E-mail (by date 2hrs, A/C 2hrs)		
Veh No: PC 6956 Y	I-Motor Claims Form		
D.O.A: 15/01/2021 08:48	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
OD TP Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/VKSR		

Preferred Wkcp / INC Assign Wkcp / QW: () Toll: () Fax: ()

TP Particulars: Vch No: SH59157 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 ()

() 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: ()

- 1) Apply for Transport Allowance () / Courtesy Car ()
- 2) QC Check / Post Repair Inspection ()
- 3) Upload Resurvey Photo [Repair Cost > \$9000] ()

Injury: _____

Item	Amount	Notes
1) All Accident Reporting (\$30)		
2) DA: Damage Assessment (\$100)	INC (\$10)	
3) TP: Towing Fee	\$120	
4) PT: Follow-Through Survey	\$30	
5) FT: Follow-Through Survey (Resurvey)	\$75	For claim against INC Only (ver 10 Jan 2005)
6) TR: Re-inspection	\$160	
7) NI: Idas DA + SMRT Survey		
8) NTUC Additional Services		
OD:		
* NI: Courtesy Car / TP Allowance	\$5	
* NI: Repair Coordination	\$10	
* NI: Post Repair Inspection	\$25	
* NI: DV / Collect Excess Coordination	\$5	
* NI: DV / Collect Excess Coordination	\$20	
TP (NI) / TP (Non INC) against INC	\$0	
9) NI: Idas Mobile		

Invoice dated _____ Fee Charged _____
 Invoice dated _____ Fee Charged _____

NIA2100623

Driver/Owner: _____

Contact No: _____

Damaged Portion: _____

QC Checked by (Engr-In-Charge): _____

Anchor's Comments: _____

Ref: 1: _____

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 Submission	15/01/2021 14:36 (SGT)
Date of Accident	15/01/2021 08:45 (SGT)
Exact Location of Accident	18 Jurong Pier Rd, Singapore 619168
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC6956Y
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AEDGE HOLDINGS PTR. LTD.
Company Reg No	2XXXXX323E
Email Address	william@aedge.com.sg
Mobile Phone No	(Phone) +65-91460806
Alternative Phone No	+65-94871338

VEHICLE PARTICULARS

Manufacturer	Yutong
Model	Zk6107he
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMB1SNA00004592001
Cover Note Number	-

DRIVER

Name of Driver	JUMA'AT BIN IBRAHIM
NRIC No	SXXXX781H

Date Of Driving Pass	27/12/1990
Driving experience	30 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-94871338
Alt. Phone Number	-
Email Address	william@aedge.com.sg
Address	BLK 129 BUKIT BATOK WEST AVENUE 5
Address complement	#02-378
Postcode	650129
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
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	SLH5915T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Address	-
Address complement	-
Postcode	-
Insurance Company Name	MSIG
Nature Of Damage	-
Details of property damaged in accident	-
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)

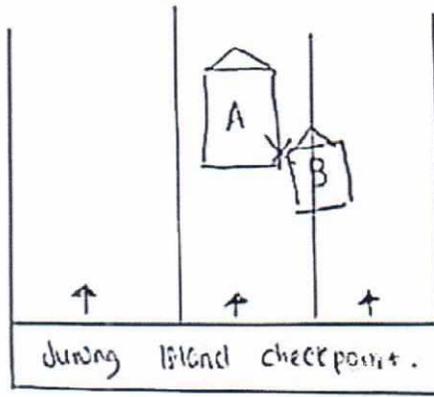
I understand, acknowledge, agree and consent that:

- (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
Date & Time:


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


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



Jukung Island

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/01/2021 @ 08 HRS, I was driving my bus PC6956Y exiting out from Jukung Island checkpoint travelling straight within my own lane when a car SLH5915T swerved into my lane from the right lane & hit onto my bus rear chassis area as a result

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/TIN 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: _____

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

Relationship with Insured: Employee & Employer

Witness (if any): yes/no

Witness name: _____

Witness hp: _____

Witness email (if any): _____

Witness add: _____

Witness IC no: _____

Witness Name: Norman bn Yusoff
HP: 919 00070

Third party veh number: SLH 59157

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: MSIG

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: 01 pax

01 Male
- Female

Connect3 client vehicle no: PC 69 567

Owner contact no: 9146 0806

Email Address: william @ardga .com sg.

Date of accident: 15/01/2021

Location of accident: Jung Island Checkpoint

Time of accident : 08.45hrs

Any Injury: yes /no (if yes, must have police report)

Motor Bus

MZ601

R SN

BR0120A

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, 1959 (Malaysia)

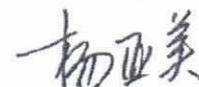
CERTIFICATE No.	DMB1SNA00004592001	Engine No. : ISB67E525022232027	
		Cha. No.:LZYTBD63G1073847	
1. Index Mark and Registration Number of Vehicle	PC6956Y	AUTOSAFE	=====
2. Name of Policy Holder	AEDGE HOLDINGS PTE LTD		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	01/06/2020	Excess Sect I .	\$S\$3,000.00
		Excess Sect. II	\$S\$3,000.00
		EX ON WINDSCREEN .	\$S\$500.00
4. Date of Expiry of Insurance	31/05/2021		
5. Persons or Classes of Persons entitled to drive*	<p>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.</p>		
6. Limitations as to use:*	<p>Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Schedule.</p> <p>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.</p>		
<p>HIRE PURCHASE CO. : DBS BANK LTD 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.</p>			

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: Gan Li Jia Jesca
Authorised Officer



Authorised Signatory

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

Our ref 2912170101N027101434

29 Dec 2017

AEDGE HOLDINGS PTE. LTD.
4009 ANG MO KIO AVENUE 10
#04-33
TECHPLACE 1
SINGAPORE 569738

000207



Dear Sir/Madam

NOTIFICATION ON REGISTRATION OF VEHICLE AND ROAD TAX

We wish to inform you that you have successfully registered vehicle PC6956Y on 29 Dec 2017. The Business Transaction Reference No. is 20171229144710169834.

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

- | | | |
|-----|-------------------------|--|
| 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
TECHPLACE 1
SINGAPORE 569738 |
| 6. | Mailing Address | : - |
| 7. | Vehicle No. | : PC6956Y |
| 8. | Vehicle Type | : Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus |
| 9. | Vehicle Scheme | : Public Service Vehicle (Others) |
| 10. | Vehicle Make | : YUTONG |
| 11. | Vehicle Model | : ZK6107HE AUTO |
| 12. | Remarks | : This is a public service vehicle.
To renew the COE, the Prevailing Quota Premium payable is that of Category C. |

3. You can login to LTA's e-Services@ONE.MOTORING (<http://www.onemotoring.com.sg>) to access a wide range of vehicle-related services using your SingPass 2FA or CorpPass 2FA. For firm and organisation, you can also login using your LTA-issued User ID & Password (up till 30 Sep 2017) or EASY (up till 31 Dec 2017). A separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Please apply for your Transaction PIN before performing any of these transactions. Visit <http://www.onemotoring.com.sg> > **LTA Information & Guidelines > Transaction PIN & User Account** for more information about obtaining Transaction PIN and the documents needed (e.g. Board Resolution for company).

- Vehicle PIN - Transfer of Ownership and De-registration of Vehicle
- TCOE PIN - Transfer of TCOE (For Category C and E COE bid under individual)
- Rebate PIN - Transfer and Splitting of PARF/COE Rebate

4. All new In-vehicle Units (IUs) are covered by a 5-year warranty against manufacturer's defect.
5. Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any question.

Yours sincerely

NG LAY CHOO (MS)
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS
VEHICLE SERVICES GROUP
LAND TRANSPORT AUTHORITY

(This is a computer-generated notice that requires no signature.)

From 15 February 2017, you do not need to display road tax disc on the windscreen of your vehicle. LTA has stopped issuing physical road tax discs as part of our efforts to streamline our processes. Please ensure that your original motor insurance certificate is readily available in your vehicle at all times. If you are driving into Malaysia, you are advised to carry printed proof of the validity of your road tax in your vehicle.

Transaction ref 20171229144710169834

The owner and vehicle particulars for Vehicle No. PC6956Y as at 29 Dec 2017 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 TECHPLACE 1 SINGAPORE 569738
6.	Mailing Address	: -
7.	Vehicle No.	: PC6956Y
8.	Effective Date of Ownership	: 29 Dec 2017
9.	Original Registration Date	: 29 Dec 2017
10.	First Registration Date	: 29 Dec 2017
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	: ZK6107HE AUTO
18.	Year of Manufacture	: 2016
19.	Primary Colour	: Multi-Colour
20.	Secondary Colour	: -
21.	Passenger Capacity	: 45
22.	Chassis/Trailer Chassis No.	: LZYTBT63G1073847 / -
23.	Propellant/Emission Standard	: Diesel / Euro V
24.	Engine No./Motor No.	: ISB67E525022232027 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 6690 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 11200
28.	Maximum Laden Weight(kg)	: 15500
29.	Open Market Value	: \$113,355.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: -
34.	COE No.	: 2017120105000376M
35.	COE Expiry Date	: 28 Dec 2027
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: \$57,701.00
38.	Actual Quota Premium/PQP Paid	: \$57,701.00
39.	Actual ARF Paid	: \$5,668.00
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	: 28 Dec 2037
45.	Road Tax Amount	: \$0.00
46.	Road Tax Start Date	: 29 Dec 2017
47.	Road Tax End Date	: 28 Jun 2018
48.	Remarks	: This is a public service vehicle. To renew the COE, the Prevailing Quota Premium payable is that of Category C.