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SN08212H0001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 17/02/2021 11:27 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (17/02/2021 11:27 (SGT))



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 witholding of material facts may allow insurance companies to repudiate
- 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 17/02/2021 11:27 (SGT) Date of Accident 11/02/2021 11:55 (SGT) **Exact Location of Accident** Mandai Lake Flyover, Singapore Additional Location Information JUNCTION OF MANDAI ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC8938L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner XIN YI COACH SERVICE Company Reg No 5XXXX223C **Email Address** xinyibus@singnet.com.sg Mobile Phone No (Phone) +65-97503806 Alternative Phone No +65-97503806

VEHICLE PARTICULARS

Manufacturer Model LT434P 7.8 SMT Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to No - Reporting only your vehicle? Vehicle Category

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance Type of Coverage Comprehensive Fleet Policy Policy Number DMB1SNW00007102000 Cover Note Number

DRIVER

Name of Driver KOH CHEW MENG NRIC No SXXXX723C

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	04/05/2010 10 YEARS AND 9 MONTHS Male (Phone) +65-81274997 - xinyibus@singnet.com.sg BLK 770 CHOA CHU KANG STREET 54 #11-01 680770 No Employee No
GENERAL BANK OF THE AGGISETY	
Type of Accident Weather Conditions Road Surface	Collision - Major/Minor Rd Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? PASSENGER 1	No 2 No - Yes 6 No
Name Gender	UNKNOWN Male
PASSENGER 2	
Name Gender	UNKNOWN Male
Name Gender PASSENGER 4	UNKNOWN Female
Name Gender	- UNKNOWN Female
PASSENGER 5	
Name Gender	UNKNOWN Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP9080H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	GOH KAH ANN (WU JIA'AN)
NRIC No	SXXXX975B
Contact Number	-
Address	-
Address complement	-
Postcode	₩ ×
Insurance Company Name	<u>~</u> 1
Nature Of Damage	<u>u</u> -
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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.
- 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:
 - 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 dalms;
 - (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 invoive 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 Parsonal 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

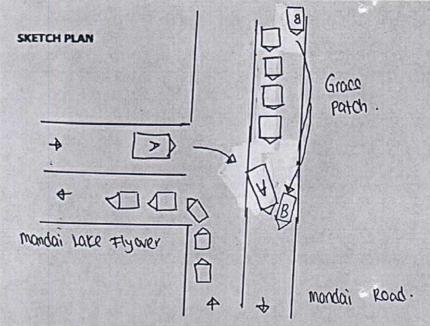
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



A= PC8938 L B= SLP 9080 H.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/02/2021 @ 11:55hrs, I was driving my bus PC8938 L along
Mondai Lake Flyorer Limity right to mandai Road when a ray Sipgosott
attempted to overtake the various ahead of him due to massive traffic
jam by driving names the grass patch a collided with my bus front
LH portion no a regult.

DECLARATION

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

Policyholder's Signature Date & Time:



Oriver'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	Usage of veh during of accident
Speed:	
	Driver IC:
Does driver own a vehicle: yes-/no	Driver Name :
if yes, veh number plate:	Driver Pass date :
veh insurance co:	Drver Birth date :
Relationship with insured: Employee & Employee	over
Witness (if any): yes/no	
Witness name:	
Witness hp:	
Witness email (if any):	
Witness add:	
Witness IC no:	
Third party veh number: SLP 9080 H	
Name of third party driver:	1 KAH AMM (WU JIA/AM)
IC of third party driver:	573219188
HP of third party driver:	11.111.2
Address of third party driver:	2.*
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:	
Any intended prosecution given: yes /no	
if yes, against whom: veh A /veh B driver	
Action taken: claiming third party / claiming own dam	age reporting only
No of Pax: <u>06 pax</u>	
Connect3 client vehicle no: PC 8 938 L	
Owner contact no: 9750 3806	F11 Jdd
	Email address:
Date of accident: 11/02/2021	Number of Pax : 05
Location of accident: Mandai Lake Flyover a	Males: 02 pax
Time of accident: 11:55hrs. Mordai Rd	Females: O3 pox
Any Injury: yes /no (if yes, must have police report)	



Motor Bus

MC2001

SN

AN0580A Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 18

Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990

Road Transport Act, 1907 (Malaysia)

Motor Vehicles (Third-Party Risks) Fules, 1909 (Motorysia)

CERTIFICATE No.

DMB1SNW00007102000

Engine No.: 6HK1684337 Cha. No.:JALLT434PG7000058

1. Index Mark and Perjudication

PC8938L

AUTOSAFE

Number of Vehicle

2. Name of Policy Holder

XIN YI COACH SERVICE

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enschreet

24/07/2020

Fernes Sect 1

\$\$2,000.00

Excess Sect. II

5\$1,000.00

4. Date of Expiry of Insurance

23/07/2021

EX ON WINDSCREEN.

5\$800.00

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 personsistion 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 Schedute.

The Policy does not cover (1) Use for racing, pace-making, reliability trial or speed-testing. (2) Use whilst drawing a trailer, except the lowing (other than for reward) of any one disabled mechanically propelled vehicle.

* Limitations rendered inoparative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Idalaysia), 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

00058

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Authorised Signatory

Issued By:

Authorised Off

Q6389 6111

6222 1033

www.sg.cntaiping.com

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) ↑ 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Please check that the owner and vehicle details are correct:

1.	Name	: XIN YI COACH SERVICE
2.	Identification No. Type	: Business
3.	Identification No.	: 52908223C
4.	Country/Region	:
5.	Vehicle Registration No.	: PC8938L
6.	Previous Vehicle Registration No.	:-
7.	Effective Date of Ownership	: 24 Jul 2020
8.	Original Registration Date	: 02 Sep 2016
9.	First Registration Date	: 02 Sep 2016
	Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
11.	Vehicle Scheme	: Public Service Vehicle (Others
12.	Attachment 1	: Air-Conditioned
13.	Attachment 2	
14	. Attachment 3	:-
15	. Vehicle Make	: ISUZU
16	. Vehicle Model	: LT434P 7.8 SMT
17	. Year of Manufacture	: 2016
18	. Primary Colour	: Multicolor
19	. Secondary Colour	* -
	. Passenger Capacity	: 49
	. Chassis/Trailer Chassis No.	: JALLT434PG7000058 / -
22	. Propellant	: Diesel
23	. Engine No / Motor No.	: 6HK1684337 / -
24	. Engine Capacity(cc)/Power Rating(kW)	: 7790 / -
	. Maximum Power Output(kW/bhp)	:-/-
26	5. Unladen Weight(kg)	: 10780
27	7. Maximum Laden Weight(kg)	: 15200
28	. Open Market Value	: \$100,674.00
29	PARF Eligibility	: No
30). PARF Eligibility Expiry Date	
	I. Minimum PARF Benefit	: \$0.00
	2. No. of Transfers	:1
72 3 5 6		

Transaction ref 20200724095445504332

Please check that the owner and vehicle details are correct:

33. IU Label No.	: 2050105781
34. COE No.	: 2016090105000029N
35. COE Expiry Date	: 01 Sep 2026
36. COE Category	: C - Goods Vehicle & Bus
37. Quota Premium/Prevailing Quota Premium	: \$48,302.00 / -
38. Actual Quota Premium/PQP Paid	: \$48,302.00
39. Actual ARF Paid	: \$5,034.00
40, CO2 Emission(g/km)	
41. CO Emission(g/km)	
42. HC Emission(g/km)	
43. NOx Emission(g/km)	
44. PM Emission(mg/km)	
45. Actual CEVS/VES Rebate Utilised	
46. CEVS/VES Surcharge Paid	
47. Actual Green Vehicle Rebate Utilised	
48. Vehicle Lifespan Expiry Date	: 01 Sep 2036
49. Road Tax Amount	:-
50. Road Tax Start Date	
51. Road Tax End Date	
52. Remarks	: This is a public service vehicle