

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	02/03/2021 08:50 (SGT)
Date of Accident	01/03/2021 07:20 (SGT)
Exact Location of Accident	Bedok South Ave 3 & Bedok S Rd, Singapore
Additional Location Information	Junction of Slip road of Bedok South Rd & Bedok South Ave 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBS6786C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SBS TRANSIT LTD
Company Reg No	XXXXXXXXXXXXTE01
Email Address	seahhh@sbstransit.com.sg
Mobile Phone No	(Phone) +65-62444534
Alternative Phone No	(Office) +65-62444534

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Citaro
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?	Yes
Vehicle Category	Bus

INSURANCE COMPANY

Name of Insurance Company	First Capital
Type of Coverage	ActLiability
Fleet Policy	No
Policy Number	D-20095429MFBP
Cover Note Number	-

DRIVER

Name of Driver	Yoh Kang Wan
Passport No/FIN	GXXXX657M
Date Of Birth	17/10/1985
Occupation	Outdoor

Date Of Driving Pass	26/04/2008
Driving experience	12 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96178553
Alt. Phone Number	-
Email Address	seahhh@sbstransit.com.sg
Address	12, Bedok North Drive
Address complement	Blk K No 95 Lorong Ciku 2 Rumah Awam 2 Bagan Datoh Postal Code : 36100
Postcode	Singapore 465492
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	Collision - Major/Minor Rd
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)	11
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
Gender	Male

PASSENGER 4

Name	UNKNOWN
Gender	Female

PASSENGER 5

Name	UNKNOWN
Gender	Male

PASSENGER 6

Name	UNKNOWN
Gender	Female

PASSENGER 7

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

When the green arrow for right turn , I then proceeded into Bedok South Ave 3 from Bedok South Road. I saw the private car SMP1801K was inching out from the the slip road, I then swerved more to my RHS. But the said car continually to move out of the slip road. Thus, its RHF collided with my bus front LH bumper. The 3P admitted her fault & expressed wish to do private settlement. OCC was informed. After exchanged details, I then OS RTD back to WS. No injury. That's all.

ATTACHMENT(S)

Are accident photos available for attachment? No
 Was there any video captured by Car Camera? No
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMP1801K
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver Tan Wee Kiat
 Contact Number (Phone) +65-97360234
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage front RH
 Details of property damaged in accident front RH
 No. Of Passenger (Including Driver) -

