

NATIONAL Assessment Centre Services

(with 1 Jan 2001)

SALE 21810001

Date In: 18/03/2001 10:27	Job description	Date & Time Completed	Done by
Ref No: N6816721003526/4	SAS e-Milling		
Veh No: PC 888 H	E-mail (by date time, A/C time)		
D.O.A: 17/03/2001 06:40	1-Motor Claim Form		
(ID) : TP / Reporting Only	1-Motor W/O (with 00 time, TP time)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / OW: (	Tel: (	Fax: (
TP Printout/Type: (	Veh No: UNKNOWN TAX, 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 (
Access: (\$	Landing: \$1,000 (	\$2,000 (

(	Walk-In Customer: Customer's Information strictly Confidential & Strictly NO Refor of repair.
(	Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In (	Towed-In (
Invoice: VRS (	NO (
1) Apply for Transport Allowance (	Courtesy Car (
2) QC Check / Post Repair Inspection	
3) Upload Resurvey Photo (Repair Cost > \$5000)	

Injury: (

Driver/Owner:	1) All Accident Support (30)	INC (10)
Contact No:	2) DA: Denial Assessment (\$100)	\$100
Damaged Portion:	3) TP: Towing Fee	\$120
QC Checked by (Engi-In-Charge):	4) PT: Follow-Through Survey	\$30
	5) PT: Follow-Through Survey (Resurvey)	\$30
	6) TR: Re-inspection	\$160
	7) NI: Use DA + SMRT Survey	
	8) NTUC Additional Services	
	9) NS: Courtesy Car / Tpl Allowance	\$3
	10) NG: Repair Coordination	\$23
	11) NT: Post Repair Inspection	\$33
	12) ND: DV / Collect License Coordination	\$25
	13) TP (HLL) TP (NHL) TP (INC) TP (LSS) DTS	\$30
	14) NI: 1 Day Mobile	
	Invoice dated	
	Invoice dated	
	Fee Charged	
	Fee Charged	

2/2

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	18/03/2021 10:27 (SGT)
Date of Accident	17/03/2021 06:40 (SGT)
Exact Location of Accident	KPE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC7878H
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ST LEE TRANSPORT PTE LTD
Company Reg No	2XXXXX388Z
Email Address	stlee.transport@gmail.com
Mobile Phone No	(Phone) +65-96868028
Alternative Phone No	+65-91362644

VEHICLE PARTICULARS

Manufacturer	King Long
Model	HIGER KLQ6109Q 6.7L MT ABS TUBOR
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 - Reporting only
Vehicle Category	Bus

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMB1SNW00011862001
Cover Note Number	-

DRIVER

Name of Driver	BHULLAR JASWINDER SINGH
Passport No/FIN	GXXXX154K
Date Of Birth	26/06/1987
Occupation	Outdoor

Date Of Driving Pass	22/11/2016
Driving experience	4 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91362644
Alt. Phone Number	-
Email Address	stlee.transport@gmail.com
Address	BLK 20 LORONG 7 TOA PAYOH #01-728
Address complement	KIM KEAT PALM
Postcode	310020
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)	31
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	Male

PASSENGER 3

Name	UNKNOWN
Gender	Male

PASSENGER 4

Name	UNKNOWN
Gender	Male

PASSENGER 5

Name	UNKNOWN
Gender	Male

PASSENGER 6

Name	UNKNOWN
Gender	Male

PASSENGER 7

Name	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
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Police Station Name	Kim Keat Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18002529999
Alt. Police Station Phone No	(Fax) +65-63554311
Police Station Address	Blk 231 Lorong 8 Toa Payoh #01-186 Singapore 310231
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210317/2053

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
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.
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. 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.
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.

ST LEE

TRANSPORT PTE LTD

Box 1002 Toa Payoh Industrial Park #07-1447
Singapore 319074

Police Tel: 6258 6141 FAX: 6258 1677

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

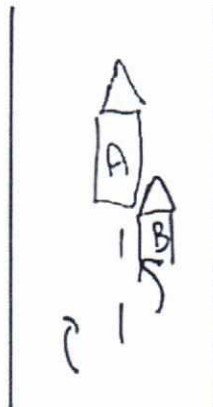
Name:

NRIC/FIN No.:

SKETCH PLAN

A - PC 7878H

B - unknown
Red Taxi.



Kallong Paya Lebar
Express way.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report 7/20210317/2053

DECLARATION

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

ST LEE

TRANSPORT PTE LTD

Bt 1002, Paya Lebar Road, Singapore 319074

TEL: 6258 0188 FAX: 6258 1677

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: _____

Does driver own a vehicle: yes / no

if yes, veh number plate: _____

veh insurance co: _____

Relationship with insured: Employer / Employer

Witness (if any): yes / no

Witness name: _____

Witness hp: _____

Witness email (if any): _____

Witness add: _____

Witness IC no: _____

Third party veh number: Unknown Red Taxi

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: _____

Police report (if any): yes / no

Police report reported at which police station: Kim Keat NPP

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: 31

30 Male

- Female

Connect3 client vehicle no: PC 7878H

Owner contact no: 96868028

Email Address: stee.transport@gmail.com

Date of accident: 17/3/2021

Location of accident: Kallang Paya Lebar Expressway

Time of accident: 06:40hrs

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



SINGAPORE POLICE FORCE



T/20210317/2053

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

1 of 3

Report No. T/20210317/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/03/2021 13:19		Vide Report No.:		Station Diary No.: 7
Informant's Particulars				
Name of Informant: BHULLAR JASWINDER SINGH		Address: APT BLK 20 LORONG 7 TOA PAYOH #01-728 KIM KEAT PALM SINGAPORE 310020		
ID Type / ID No.: FIN NO / G8361154K		Contact No.: Home/Office: Mobile: 91362644		
Nationality: INDIAN		Email:		
Sex: Male	Age: 33	Date of Birth: 26/06/1987	Type of Informant: Driver	
Race: Indian		Language:	Institution / School Name:	
Occupation: BUS DRIVER		Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 17/03/2021 06:40	Type of Location: Straight Road
Location: KALLANG PAYA LEBAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC7878H	Bus/Coach/Minibus (School Children)				Slightly Damaged	30

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210317/2053

2 of 3

Report No. T/20210317/2053

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

CONTINUATION OF REPORT

Driver			
Name	BHULLAR JASWINDER SINGH	ID No.	G8361154K
Related Vehicle	PC7878H (Bus/Coach/Minibus (School Children))	Contact No.	91362644
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date, time and location, a red colour taxi with unknown plate number side swipe on my right side of my bus. When the incident happened, I did not hear any collusion sound and continue my journey toward CTE city. I only discovered that there are some scratches on the right rear of my bus when I parked the bus at Lorong 8 Toa Payoh, heavy vehicle car park. I immediately went to my company office to view the bus CCTV. After viewing the CCTV, then I got to know that while traveling along Sims Way, a merging lane, a red taxi side swipe my bus. I was advised by my company to lodge a traffic report for record purposes.



**SINGAPORE
POLICE FORCE**



T/20210317/2053

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

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Report No. T/20210317/2053

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sr Staff Sgt BOH TECK BOON, KENARD

Signature Of Informant:

[Handwritten Signature]

Signature Of Interpreter:

Not applicable

Date/Time:

17/03/2021 13:19

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476145

Classification Of Case:

SN 64

Authentication Stamp

NP168



SIGNATURE

ST LEE

TRANSPORT PTE LTD

Block 1002 Toa Payoh Industrial Park #07-1447 Singapore 319074 (T) 62586183 (F) 62581677

Website: www.stleetransport.com.sg Email: stlee.transport@gmail.com

17 March 2021

TO WHOM IT MAY CONCERN

Dear Sir

REF : PC7878H

I hereby confirmed aware of this incident and authorised Mr Bhullar Jaswinder Singh, G8361154K to lodge a report to your kind department . Our vehicle are insured under China Taiping Insurance

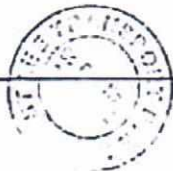
I thank you in advance for your kind consideration and understanding and hope to hear from your kind department as soon as possible.

Regards,



Lee Sin Tiong

Director



Motor Bus

142601

R SH

AN0081A

Cov. Type:F

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, 1972 (Malaysia)

CERTIFICATE No.	DMB1SNW00011862001	Engine No.	ISBE430021850612
		Chassis No.	LKLR1FSJ93SF70004
1. Index Mark and Registration Number of Vehicle	PC787EH		
2. Name of Policy Holder	ST LEE TRANSPORT PTE LTD.		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	17/12/2020 (00.00.00)	Excess Sect. II	\$S1,500.00
4. Date of Expiry of Insurance	16/12/2021		

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.

* 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: MULTISYS AGENCIES & SERVICES
Authorised Officer


Authorised Signatory

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

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com

Annex A

Transaction ref 20150217112417688338

The owner and vehicle particulars for Vehicle No. PC7878H as at 17 Feb 2015 are as follows:

1. Name	: ST LEE TRANSPORT PTE LTD
2. Identification No. Type	: Company
3. Identification No.	: 20143738SZ
4. Place Of Passport Issue	: -
5. Vehicle No.	: PC7878H
6. Previous Vehicle No.	: -
7. Effective Date of Ownership	: 17 Feb 2015
8. Original Registration Date	: 17 Dec 2008
9. First Registration Date	: 17 Dec 2008
10. Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
11. Vehicle Scheme	: Bus Carrying School Children
12. Attachment 1	: Air-Conditioned
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: KING LONG
16. Vehicle Model	: HIGER KLQ6109Q 6.7L MT ABS TURBO
17. Year of Manufacture	: 2008
18. Primary Colour	: White
19. Secondary Colour	: -
20. Passenger Capacity	: 45
21. Chassis/Trailer Chassis No.	: LKLR1FSJ98SF70004 / -
22. Propellant	: Diesel
23. Engine No./Motor No.	: ISBE430021850612 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 6692 / -
25. Maximum Power Output(kW/bhp)	: - / -
26. Unladen Weight(kg)	: 11500

Annex A

Transaction ref 20150217112417688338

The owner and vehicle particulars for Vehicle No. PC7878H as at 17 Feb 2015 are as follows:

27. Maximum Laden Weight(kg)	: 16000
28. Open Market Value	: \$104,533.00
29. PARF Eligibility	: No
30. PARF Eligibility Expiry Date	: -
31. Minimum PARF Benefit	: \$0.00
32. No. of Transfers	: 1
33. IU Label No.	: 205006S468
34. COE No.	: 200S110105000153E
35. COE Expiry Date	: 16 Dec 2018
36. COE Category	: C - Goods Vehicle & Bus
37. Quota Premium/Prevailing Quota Premium	: \$15,899.00 / -
38. Actual Quota Premium/PQP Paid	: \$15,899.00
39. Actual ARF Paid	: \$5,227.00
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	: 16 Dec 2028
45. Road Tax Amount	: -
46. Road Tax Start Date	: -
47. Road Tax End Date	: -
48. Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category C. This is a public service vehicle.