

NATIONAL Assessment Centre Services. [sent 1 Jan/08]

Date In: 23/03/2021 16:54		Job description	Date & Time Completed	Done by
Ref No: NBA/CTI20/3755/Y		SAS e-milling		
Vehicle: PC5547B		E-mill (1/2 mile drive, 1/20 hrs)		
D.O.A. 23/03/2021 15:00		1-Motor Claims Form		
		1-Motor W/O (winder OD drive, TP 4 hrs)		
		1-Photo Uploaded		
		Assessment/Survey Report		
		Ass't Report by Fax / Hand to Owner / Wagon		

Preferred Wksp / INC Assign Wksp / OW: (Tel: (Fax: (
TP Rating/Class: (Veh No: SJY 2565Z	INC () / Non-INC ()			
Owner / Driver: (Tel: (
Policy No: (Period: (Cover Type: (
				Time: (

Policy No: () Date: Time: ()

Confirmed by: ()

Insured/Driver Liability: () % [Note- Est Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]

Year of Registration: () Warranty: Y/N () / NO ()

Excess: (\$) () Loading: \$1,000 () / \$2,000 ()

() Walk-In Customer : Customer's Information strictly Confidential & Strictly NO refer of raparor.
() Total Loss Case : to e-mail Insurer URGENTLY,
Drive-In () / Towed-In () ; Invoice# VRS () / NO () ; Towing Co: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo (Repair Cost > \$3000) ()		

[illegible][illegible]

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	23/03/2021 16:54 (SGT)
Date of Accident	23/03/2021 15:00 (SGT)
Exact Location of Accident	Ang Mo Kio Ave 3, Singapore
Additional Location Information	TOWARDS HOUGANG AVENUE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5547B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AEDGE HOLDINGS PTE LTD
Company Reg No	2XXXXX323E
Email Address	william@aedge.com.sg
Mobile Phone No	(Phone) +65-91460806
Alternative Phone No	+65-91087147

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 - Reporting only
Vehicle Category	Bus
Transmission	Auto
CC	6690

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMB1SNA000045922001
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD ZAMRI BIN JA'AL
NRIC No	SXXXX093B

Date Of Birth	18/08/1975
Occupation	Outdoor
Date Of Driving Pass	21/03/2001
Driving experience	20 YEARS
Gender	Male
Mobile Number	(Phone) +65-91087147
Alt. Phone Number	-
Email Address	william@aedge.com.sg
Address	BLK 535 HOUGANG STREET 52 #04-12
Address complement	-
Postcode	530535
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	Raining
Road Surface	Wet

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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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	SJY2565Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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

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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.

Policyholder's Signature
Date & Time:



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

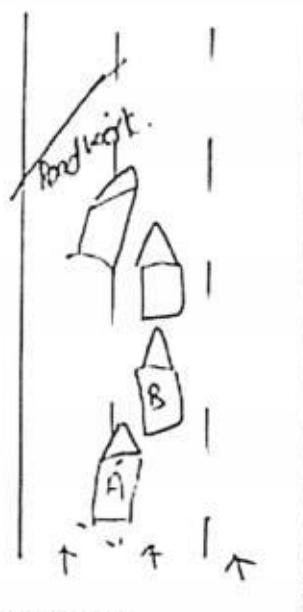
Reporting Centre Personnel's Signature
Name:
NIC/TIN No.:

SKETCH PLAN

A-PC5547B

B-SJY25652

Ang Mo Kio Ave 3



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23/3/2021 around 15:00hrs, I was driving my Bus PC 5547B along Ang Mo Kio Ave 3 Towards Hougang Ave 2. I saw there was a Road Work in front, I start to filter to the right. Suddenly Veh B SJY25652 Jam brake and I cannot stop in time and try to avoid hit veh B, I swerved my bus back to the left lane as the result my bus still hit onto veh B left rear portion. There is a car suddenly swerved out and causes veh B and the front of veh B to Jam brake.

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 con: Clear / Raining
Speed: _____

Does driver own a vehicle: yes/no
if yes, veh number plate: _____
veh insurance co: _____

Relationship with insured: Employee & Employer
Witness (if any): yes/no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: SJY 25652
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: _____
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: 1pax

Male
Female

Connect3 client vehicle no: PC55 47B
Owner contact no: 914 60806
Date of accident: 28/31/2021
Location of accident: Ang Mo Kio Ave 3 Twoc Housing Ave 2
Time of accident: 15:00hrs
Any Injury: yes/no (if yes, must have police report)

Email Address: William Daedje.com.sg

Usage of veh during of accident:

Driver IC:

Driver Name :

Driver Pass date :

Driver Birth date :

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)

BR0120A

Cov. Type: C

CERTIFICATE No.

DMB1SNA00004592001

Engine No.: ISB67E52502226083

Cha. No.: LZYTBTD65G1051820

1. Index Mark and Registration
 Number of Vehicle

PC5547B

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*

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.: 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.

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).

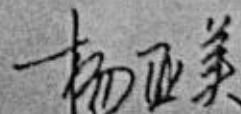
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Gan Li Jia Jessica

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

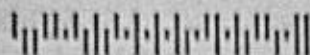
🌐 www.sg.cntaiping.com

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

Our ref: 2212160101N020280704

22 Dec 2016

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



Dear Sir/Madam

**NOTIFICATION ON REGISTRATION OF VEHICLE AND ROAD TAX
(PLEASE DISPLAY THE ENCLOSED ROAD TAX DISC ON YOUR VEHICLE
WINDSCREEN)**

We wish to inform you that you have successfully registered vehicle PC5547B on 22 Dec 2016. The Business Transaction Reference No. is 20161222152746130521. Enclosed is a validated road tax disc for the vehicle. Please display the said disc on your vehicle windscreen.

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. | : PC5547B |
| 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 NRIC number/FIN and SingPass. Firm and organisation can login to LTA's e-Services using User ID and Password or EASY. You can apply for your EASY account at <http://www.iras.gov.sg>. 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>.

owner and vehicle particulars for Vehicle No. PC5547B as at 22 Dec 2016 are as follows:

Name	: AEDGE HOLDINGS PTE. LTD.
Identification No. Type	: Company
Identification No.	: 200509323E
Place Of Passport Issue	: -
Registered Address	: 4009 ANG MO KIO AVENUE 10 #04-33 TECHPLACE 1 SINGAPORE 569738
Mailing Address	: -
Vehicle No.	: PC5547B
Effective Date of Ownership	: 22 Dec 2016
Original Registration Date	: 22 Dec 2016
First Registration Date	: 22 Dec 2016
Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
Vehicle Scheme	: Public Service Vehicle (Others)
Attachment 1	: Air-Conditioned
Attachment 2	: -
Attachment 3	: -
Vehicle Make	: YUTONG
Vehicle Model	: ZK6107HE AUTO
Year of Manufacture	: 2016
Primary Colour	: Multi-Colour
Secondary Colour	: -
Passenger Capacity	: 45
Chassis/Trailer Chassis No.	: LZYTBT65G1051820 / -
Propellant/Emission Standard	: Diesel / Euro V
Engine No./Motor No.	: ISB67E525022226083 / -
Engine Capacity(cc)/Power Rating(kW)	: 6690 / -
Maximum Power Output(kW/bhp)	: - / -
Unladen Weight(kg)	: 11140
Maximum Laden Weight(kg)	: 15500
Open Market Value	: \$113,498.00
PARF Eligibility	: No
PARF Eligibility Expiry Date	: -
Minimum PARF Benefit	: \$0.00
IU Label No.	: -
COE No.	: 2017010105000131W
COE Expiry Date	: 21 Dec 2026
COE Category	: C - Goods Vehicle & Bus
Quota Premium/Prevailing Quota Premium	: \$51,209.00
Actual Quota Premium/PQP Paid	: \$51,209.00
Actual ARF Paid	: \$5,675.00
CO2 Emission(g/km)	: -
Actual CEVS Rebate Utilised	: -
CEVS Surcharge Paid	: -
Actual Green Vehicle Rebate Utilised	: -
Vehicle Lifespan Expiry Date	: 21 Dec 2036
Road Tax Amount	: \$595.00
Road Tax Start Date	: 22 Dec 2016
Road Tax End Date	: 21 Jun 2017
Remarks	: This is a public service vehicle. To renew the COE, the...