

NATIONAL Assessment Centre Services.

(wef 1 Jan'05)

2106P0001

Date In: 21/06/2021 11:44	Job description	Date & Time Completed	Done by
Ref No: N/A/CT/2100702114	SAS e-filing		
Veh No: PC 6331A	E-mail (within 3hrs, AIC 2hrs)		
D.O.A : 15/06/2021 08:00	i-Motor Claim Form		
OD : TP; Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()

Tel: ()

Fax: ()

TP Particulars:

Veh No: XD 3444C

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 ()

General Remarks:

() 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: ()

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Date/Time

Action:

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Anditors' Comments:

Pat. 1:

Pat. 2 / 3:

Invoice Preparation Checklist

Ant (\$)

Ant (\$)

Int Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$30)

3) TF: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) FT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2005)

6) TR: Re-inspection \$75

7) N1: Idao DA + SMRT Survey \$160

8) NTUC Additional Services:-

ON:

*N5: Courtesy Car / Tpl Allowance \$5

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (N'n INC) against INC \$20

9) N12: Idao Mobile \$0

Invoice dated

Fee Charged

Invoice dated

Fee Charged

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	25/06/2021 11:44 (SGT)
Date of Accident	15/06/2021 08:00 (SGT)
Exact Location of Accident	Woodlands Ave 9, Singapore
Additional Location Information	OUTSIDE SPECTRUM 1, 2 WOODLANDS SECTOR 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC6331A
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SINGAPORE COACH SERVICES PTE. LTD
Company Reg No	2XXXXX110H
Email Address	accounts@singaporecoachservices.com
Mobile Phone No	(Phone) +65-96204026
Alternative Phone No	(Office) +65-66945458

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
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	DMB1SNA00006552000
Cover Note Number	-

DRIVER

Name of Driver	TAN MENG WAH, KIEFER
NRIC No	SXXXX210D

Date Of Birth	03/10/1979
Occupation	Outdoor
Date Of Driving Pass	21/11/2007
Driving experience	13 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96204026
Alt. Phone Number	-
Email Address	accounts@singaporecoachservices.com
Address	BLK 889C WOODLANDS DRIVE 50 #03-259
Address complement	-
Postcode	733889
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	Hit and run / Vandalism / Damaged whilst parked
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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	XD3444C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

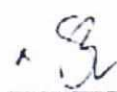
SKETCH PLAN

IMPORTANT NOTICE

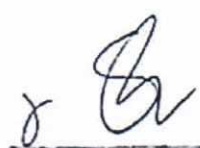
1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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)

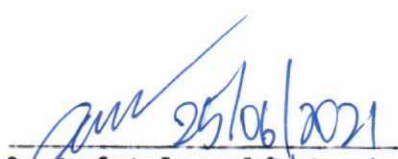
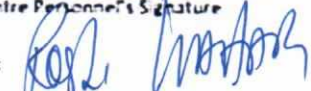
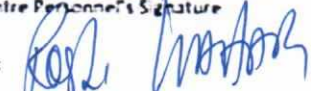
I understand, acknowledge, agree and consent that

- (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


Policyholder's Signature
Date & Time



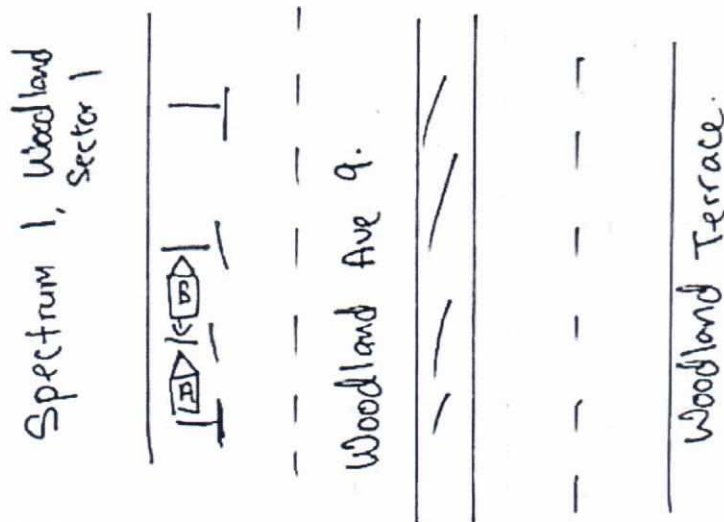

Driver's Signature
(if driver is not the policyholder)
Date & Time


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

SKETCH PLAN

A- PC6331A

B- XD3444C



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 10 June 2021 around 08:00hrs to 09:00hrs. I parked my Bus PC 6331A along Woodland Ave 9 outside Spectrum 1, Woodland Sector 1. When on 24 June 2021 at 06:00hrs I went to the location to pick up my Bus and I saw damages on my front Windscreen and Front left mirror was damage. there was a plastic Bag tie at my Wiper and I open up and saw a small note (attach in the report) with a contact number. I tried to call 88972219 no ppl answer and I called another number 84396331 - Mr Chan pick up and mention that his driver veh B XD3444C hit onto my Bus Front portion.

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.:

Call

24396331 - Mr. Chan.
88972219 - No Answer.

X03444C



[Handwritten signature]

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: Employer ? Employer
Witness (if any): yes/no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: X03444C
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: AXA

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: _____

Male

Female

Connect3 client vehicle no: PC6331A

Owner contact no: 6644 54 58

Email Address: accounts@SingaporeCoachServices.com

Date of accident: 15/6/2021

Location of accident: Woodlands Ave 9 (outside Spectrum 1, 2 Woodland Sector 11).

Time of accident: 8:00am.

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

Parked - 10 June. Sp 8-9am.
Repairs. - 24 June - 6am.

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	PC6331A		
Vehicle Type:	Z20 - Private Hire (Chauffeur) Bus/Coach /Minibus	Vehicle Scheme:	Public Service Vehicle (Others)
Vehicle Attachment 1:	Air-Conditioned		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	YUTONG	Vehicle Model:	ZK6107HE AUTO
Chassis No.:	LZYTBT60H1010173	Engine No.:	ISB67E525022232024
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Diesel	Passenger Capacity:	45
Engine Capacity:	6690 cc	Power Rating:	-
Maximum Power Output:	-		
Unladen Weight:	11100 kg	Maximum Laden Weight:	15500 kg
Primary Colour:	Multi-Colour	Secondary Colour:	-
First Registration Date:	29 Aug 2017	Original Registration Date:	29 Aug 2017
Manufacturing Year:	2017	Open Market Value:	\$114,718.00
PARF Eligibility:	No	Minimum PARF Benefit:	\$0.00
		Additional Registration Fee Rate:	5.00%
No. of Transfers:	0		
Actual ARF Paid:	\$5,736.00		
Owner Particulars			
Owner Name:	SINGAPORE COACH SERVICES PTE. LTD		
Owner ID Type:	Company		
Owner ID:	201227110H		
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes		
Registered Block /House No.:	71		
Registered Street Name:	WOODLANDS AVENUE 10		
Registered Unit No.:	# 01 - 18		
Registered Building Name:	WOODLANDS INDUSTRIAL XCHANGE		
Registered Postal Code:	737743		
COE No. / Expiry	2017080105000665H / 28		

Date: Aug 2027

COE Bid Category: C - Goods Vehicle & Bus

QP Paid: \$40,212.00

Transaction Details

Business

Transaction Ref. 20170829092904936144

No.:

Business

Transaction Date: 29 Aug 2017

Business

Transaction Time: 09:29:04

Message

The above vehicle has been successfully registered.

Please note that \$36,088.00 will be deducted from your GIRO account.



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Bus

MZ601

N SN

BR0057A

Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1969
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.

DMB1SNA00006552000

Engine No.: ISB67E52502232024

Cha. No.: LZYTBTD60H1010173

1. Under Make and Registration
Number of Vehicle

PC6331A

2. Name of Policyholder

SINGAPORE COACH SERVICES PTE. LTD.

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

12/07/2020

Excess Sect. I. S\$2,500.00

Excess Sect. II S\$1,500.00

4. Date of expiry of insurance

11/07/2021

EX ON WINDSCREEN. S\$300.00

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 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.

陳保險經紀私營有限公司
TAN INSURANCE BROKERS PTE LTD
3A/5A Aliwal Street, Chenn Leonn Building
Singapore 199896
www.tib.com.sg
Tel: (65) 6742 6766 Fax: (65) 6742 6669

6. Conditions to be used*

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. : THINK ONE CREDIT PTE LTD AS HP OWNER

* Limitations contained hereinafter by Section 9 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) and Section 96 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 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Tan Jia Hwei
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