

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	13/09/2021 15:00 (SGT)
Date of Accident	13/09/2021 10:05 (SGT)
Exact Location of Accident	421 Serangoon Central, Block 421, Singapore 550421
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PD8808Z
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	YZ TRANSPORT SERVICE
Company Reg No	5XXXX806J
Email Address	yztransportservice@gmail.com
Mobile Phone No	(Phone) +65-90884418
Alternative Phone No	+65-94322668

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	2982

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMB1SNA00009772100
Cover Note Number	-

DRIVER

Name of Driver	ANG SOI NGOH
NRIC No	SXXXX822J

Date Of Birth	27/12/1955
Occupation	Outdoor
Date Of Driving Pass	23/02/1977
Driving experience	44 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94322668
Alt. Phone Number	-
Email Address	yztransportservice@gmail.com
Address	BLK 8 LORONG LIEW #03-150
Address complement	-
Postcode	531008
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	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 vehicle 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	SLC5010E
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)	-

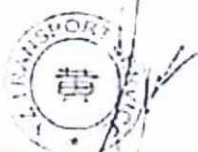
SKETCH PLAN

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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

X
By

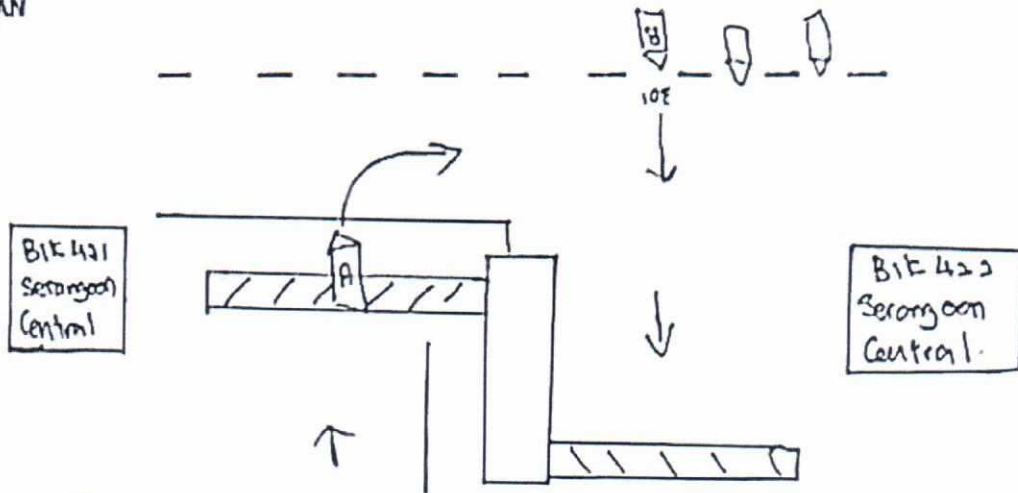
Driver's Signature
(If driver is not the policyholder)
Date & Time

13/09/2021
Signature

Reporting Centre Personnel's Signature
Name
NRIC/FIN No

SKETCH PLAN

A) PD8808Z
B- SLC 5010E



Bik 421 Serangoon Central. Car Park.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/9/2021 around 10:05hrs I was driving my Bus PD8808Z entering Bik 421 Serangoon Central car park. I stop at the stop line to check on any incoming vehicle. Traffic was clear, I make a right turn suddenly veh B SLC 5010E exiting out from Parking lot (301) Brush against my Bus right 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:

13/09/2021

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: SLC 50106
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: Etiga

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: 01 pax.

____ Male
____ Female

Connect3 client vehicle no: PD 88082

Owner contact no: 90884418

Email Address: y77rampaservice@gmail.com

Date of accident: 13/9/2021

Location of accident: 10:05 hrs.

Time of accident: BLK 421 Serangoon Central Car Park

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



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

E SN

AN0144A

Cov. Type: C

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)

CERTIFICATE No.

DMB1SNA00009772100

Engine No.: 1KD1845083

Cha. No.: KDH2230004488

1. Index Mark and Registration
Number of Vehicle

PD8808Z

AUTOSAFE

=====

2. Name of Policy Holder

YZ TRANSPORT SERVICE

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

05/08/2021
(00:00:00)

Excess Sect I . S\$2,000.00

Excess Sect. II S\$1,500.00

EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

04/08/2022

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.: LIAN HONG PTE LTD

* 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: Zhong YueQiang
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

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.
PD8808Z

Make / Model
TOYOTA / HIACE COMMUTER 3.0GL A

53187806J

Vehicle Type :
Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus

Vehicle Attachment 1 :
No Attachment

Vehicle Scheme :
Public Service Vehicle (Others)

Chassis No. :
KDH2230004488

Propellant :
Diesel

Engine No. :
1KD1845083

Motor No. :
-

Engine Capacity :
2982 cc

Power Rating :
-

Maximum Power Output :
-

Maximum Laden Weight :

3025 kg

Unladen Weight :

2160 kg

Year Of Manufacture :

2008

Original Registration Date :

10 Sep 2008

Lifespan Expiry Date :

09 Sep 2028

COE Category :

C - Goods Vehicle & Bus

PQP Paid :

\$30,696.00

COE Expiry Date :

09 Sep 2028

Road Tax Expiry Date :

09 Sep 2021

PARF Eligibility Expiry Date :

-

Inspection Due Date :

09 Mar 2022

Intended Transfer Date :

13 Sep 2021

CO2 Emission :

-

CEV/VES Rebate Utilised Amount :

-

CO Emission :

-

HC Emission :

-

NOx Emission :

-

PM Emission :

Fees To Be Paid For Transfer

Transfer Fees	\$25.00
Road Tax Renewal - 12 months (10 Sep 2021 to 09 Mar 2022)	\$0.00

Message

The fees above do not include any late road tax fees, which apply if road tax or lay-up has expired. You can use the digital service Enquire Road Tax Payable to check if there are any late road tax fees. Any road tax that has been paid for the vehicle will be transferred to the next owner.

This vehicle has a road tax Over Payment of \$418.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively, where applicable.

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