SA1A21AU0001 / Auto Insure Pte Ltd [739145] ENTRY DATE & TIME: 30/10/2021 14:39 (SGT) SUBMITTED BY: NGIAW JIE LING VERSION: 1 (30/10/2021 14:39 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 30/10/2021 14:39 (SGT) Date of Accident 12/10/2021 13:10 (SGT) Exact Location of Accident Hougang Ave 4, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number PC4047.J

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner MUSICIS TRANSPORT SERVICES Company Reg No 53187683K **Email Address** fareastsucess@outlook.com Mobile Phone No (Phone) +65-87428175 Alternative Phone No +65-87428175

VEHICLE PARTICULARS

Manufacturer

Model Hiace Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only 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 Policy Number DMB1SNW00012082100 Cover Note Number

DRIVER

Name of Driver MUHAMMAD FAIZ BIN KHAMIS NRIC No. S9038503H

Date Of Birth 01/10/1990 Occupation Outdoor Date Of Driving Pass 15/12/2015 Driving experience 5 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-87428175 Alt. Phone Number Email Address fareastsuccess@outlook.com Address BLK 911 HOUGANG ST 91 #15-62 Address complement Postcode 530911 Is the driver the policyholder? Nο 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 No Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Nο Number of Passengers (Including Driver) 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? Yes Police Station Name Hougang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004890999 Alt. Police Station Phone No (Fax) +65-63128989 Police Station Address 60 Hougang Ave 9 Singapore 538775 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT ATTACHMENT(S)

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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.

MUSICIS TRANSPORT SERVICES \$1 LORONG 3 TOA PAYOH #15-04, S (310991)

> Policyholder's Signature Date & Time:

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

Date & Time:

Reporting Of ntre Personnel's Signature

Name: NRIC/FIN No.:

GIARMC SketchPlanForm_V3

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GIARMC SketchPlanForm_V3



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD

MZ601 Motor Bus

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)

AN0740A Cov. Type:F

N. SN

		Engine No.: 1KD2511423
CERTIFICATE NA	DMR15NW00012082100	Cha No KDH223002387

1. Index Mark and Registration

PC4047J

Number of Vehicle

2. Name of Policy Holder

MUSICIS TRANSPORT SERVICES

Effective date of the Commencement of Insurance for the purposes of the Regulations. Ordinance or Enactment.
 (00:00:00)

06/10/2021

Excess Sect. II S\$1,500.00

4. Date of Expiry of Insurance

05/10/2022

Persons or Classes of Persons entitled to drive"

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 this 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.

TATCO ENTERPRISE ssued By: 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

















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Report No. T/20211027/2000

Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

REPORT	OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 27/10/2021 08:34.		Vide Report No.:	Station Diary No.: 17		
Informa	nt's Particu	ulars			
Name of Informant: MUHAMMAD FAIZ BIN KHAMIS		Address: APT BLK 911 HOUGANG STREET 91 #15-62 SINGAPORE 530911			
ID Type / ID No.: NRIC NO / S9038503H		Contact No.: Home/Office: Mobile: 87428175			
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 31 01/10/1990		Type of Informant: Driver			
Race: Boyanese		Language:	Institution / School Name:		
Occupation: Bus driver		Driving Licence Inform Class: 3	pation: Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 12/10/2021 13:10	Type of Location: Straight Road	
Location: HOUGANG A Weather:	VENUE 4	Road Surface;		Road Speed Limit:	
Traffic Flow:		Dry Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collis Unknown	sion:	1		Anyone conveyed by ambulance: No	

Details of V	ehicle Involved					
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4047J	Bus/Coach/Mi nibus				No Damage	0

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





2 of 3

Report No. T/20211027/2000

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

CONTINUATION OF REPORT

Driver Name	MUHAMMAD FAIZ BIN KHAMIS			ID No	. 1	S9038503H
Related Vehicle	PC4047J (Bus/Coach/Minibus)					87428175
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		NIL		
No. of Days granted Medical Leave		NIL	Degree o	f Injury	NIL	

Brief Details.

On 12/10/2021 at about 1310hrs, I recalled travelling along Hougang Avenue 4 in my bus PC4047J heading towards Upper Serangoon Road. I believe that there was no accident involved, as I do not recall colliding onto any vehicles nor anyone. I wish to inform that there are also no damages to my vehicle and I do not have a footage of the incident.

I had also spoken to the Traffic Police Investigation Officer and was advised to lodge a report with regards to TP/IP/ 49779/2021.



T/20211027/2000

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999 CONTINUATION OF REPORT

3 01 3 Report No. T/20211027/2000

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 F / Sgt 3 LOW KAI TAT	Signature Of Informant:			
Signature Of Interpreter: Not applicable	Date/Time: 27/10/2021 08:34			
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:			
Authentication Stamp	5N77			

NP168