

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 17/11/2021 12:29 (SGT)
Date of Accident 16/11/2020 10:40 (SGT)
Exact Location of Accident Bukit Batok West Ave 8, Singapore
Additional Location Information HEAVY VEHICLE PARKING LOT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC6553B

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) +65-90607556
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 DMB1SNA00008542101
Cover Note Number -

DRIVER

Name of Driver HABIB BIN HAMID SULTAN
NRIC No SXXXX886D

Date Of Birth	06/09/1972
Occupation	Outdoor
Date Of Driving Pass	28/03/1995
Driving experience	25 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90607556
Alt. Phone Number	-
Email Address	accounts@singaporecoachservices.com
Address	BLK 168 BUKIT BATOK WEAT AVENUE 8 #04-206
Address complement	-
Postcode	650168
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20211117/7004

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	PC2051J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus

Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT NOTICE

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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

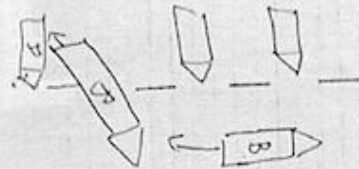
Policyholder's Signature
Date & Time



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

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

SKETCH PLAN



Bukit Batok West Ave 8
Heavy Veh Car Park.

A - PC6553B

B - PC 2051 J

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

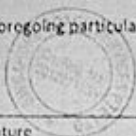
Please refer to Police report - 7/2021/1117/7004

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:



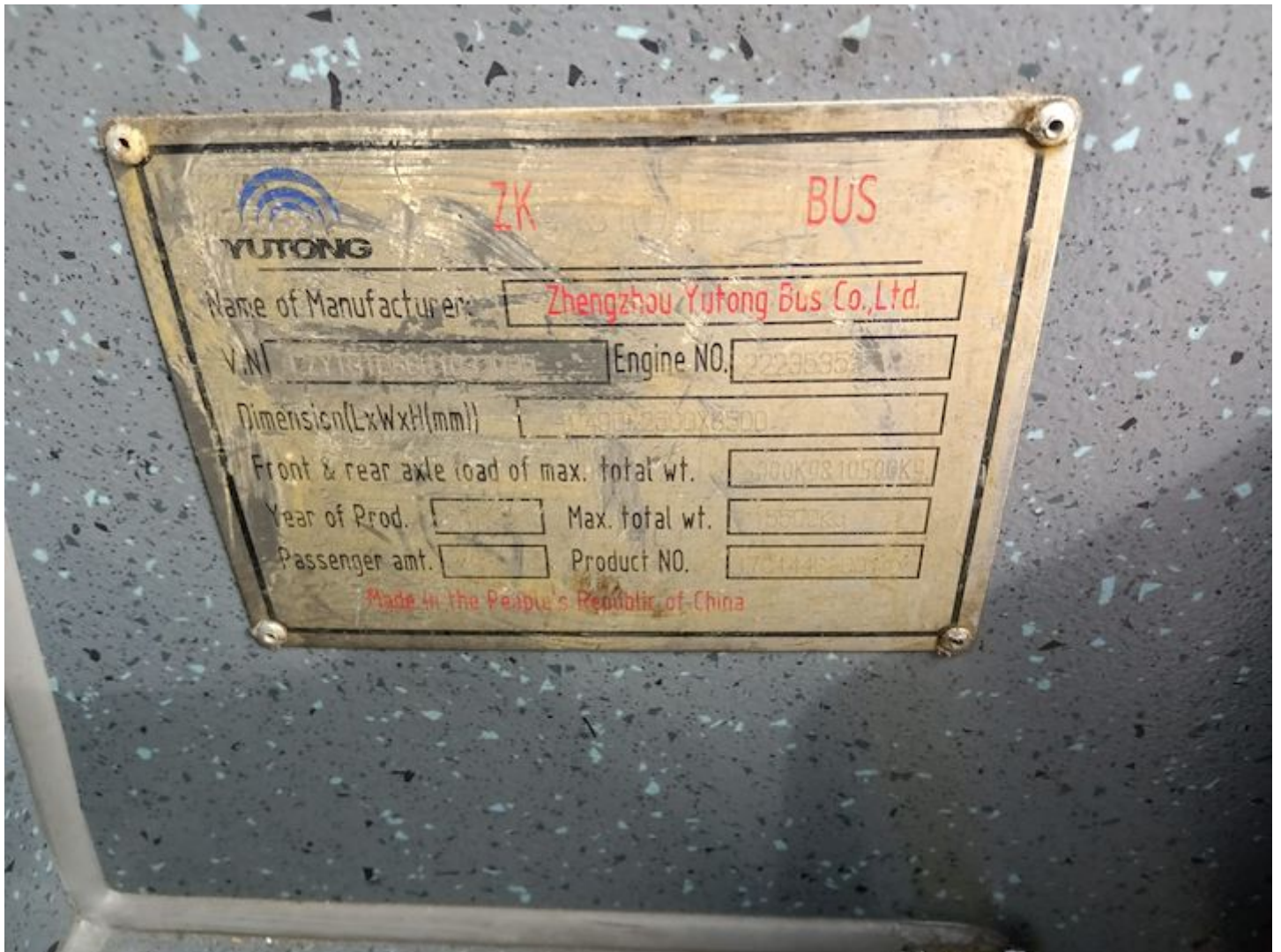
[Signature]

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

[Signature] 17/4/2021

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


































**SINGAPORE
POLICE FORCE**


T/20211117/7004

1 of 3

Report No. T/20211117/7004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/11/2021 10:24		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: HABIB BIN HAMID SULTAN		Address: 168 BUKIT BATOK WEST AVENUE 8 #04-206 SINGAPORE 650168	
ID Type / ID No.: NRIC NO / S7235886D		Contact No.: Home/Office:	Mobile: 90607556
Nationality: SINGAPORE CITIZEN		Email: Habibhamidsultan@gmail.com	
Sex: Male	Age: 49	Date of Birth: 06/09/1972	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: Bus driver		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/11/2021 10:40	Type of Location: Car Park
Location: BUKIT BATOK WEST AVENUE 8				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
PC2051J	Bus/Coach/Mi nibus					0
PC6553B	Van					0

Details of Person Involved

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


**SINGAPORE
POLICE FORCE**


T/20211117/7004

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Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20211117/7004

CONTINUATION OF REPORT

Driver Name	HABIB BIN HAMID SULTAN	ID No.	S7235886D
Related Vehicle	PC6553B (Van)	Contact No.	90607556
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

ON 16/11/2021 AROUND 10:40HRS. MY BUS PC6553B WAS PARKED AT BUKIT BATOK WEST AVE 8 HEAVY VEHICLE CAR PARK AT 10:00HRS. WHEN I WENT BACK TO COLLECT MY BUS PC6553B AT 16:30HRS AND I REALISE THAT MY BUS WAS LEFT PORTION WAS DAMAGES. I INFORMED MY COMPANY ABOUT THE ACCIDENT, THEY RETRIEVAL THE CCTV FROM THE BUS AND SAW THAT AT ABOUT 10:40HRS THERE WAS A BUS PC2051J DOING A REVERSED PARKING AND COLLIDED ONTO MY BUS LEFT PORTION. MY COMPANY ASK ME TO LODGE A POLICE REPORT FOR INSURANCE FOR HIT AND RUN CASE.

**SINGAPORE
POLICE FORCE**

T/20211117/7004

3 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20211117/7004

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
17/11/2021 10:24

Classification Of Case: