

ADDITIONAL APPRAISERS: Carrie Sampson 12/1/2021 210821240001

Date In: 12/1/2021 12:29  
Ref No: NBA/CT72017194  
Veh No: PC 6583B  
C.O.A: 16/11/2021 10:40

(1) TP Reporting Only

|   |                       |         |
|---|-----------------------|---------|
| Job Description                             | Date & Time Completed | Done by |
| SAS e-tiling                                |                       |         |
| Crash (by vehicle, date, time)              |                       |         |
| Motor Claim Form                            |                       |         |
| Motor W/O (witnesses, date, time)           |                       |         |
| Police Uploaded                             |                       |         |
| Assessment Survey Report                    |                       |         |
| Accident Report by Box/Hand to Owner/Driver |                       |         |

TP Insurer

Preferred Wksp/NO Avail Wksp/OW: PC 20517 Tel: INOC / Non-INO: INOC Fax: INOC

Owner/Driver: INOC Tel: INOC

Policy No: INOC Period: INOC Cover Type: INOC

Confirmed by: INOC Date: INOC Time: INOC

Insured/Driver Liability: INOC % (Note: Use 50% (WO) N: 0-20%, P: 21-79%, P: 80-100%)

Year of Registration: INOC Warranty: YES INOC / NO INOC

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

☐ Write-in Comments: Customer's information strictly confidential & strictly NO for or of repetition.

☐ Total Loss Case: to email Insurer URGENTLY.

Drive-in: INOC / Towed-in: INOC / Involves VRS: INOC / NO: INOC / Towing Cost: INOC

- 1) Apply for Transport Allowance INOC / Courtesy Car INOC
- 2) QQ Check/Post Repair Inspection INOC
- 3) Upload Recovery Photo (Repair Costs \$3,000) INOC

Injury:

210821240001

|                                |                                     |  |
|--------------------------------|-------------------------------------|--|
| Driver/Owner                   | 1) All Accident Information (300)   |  |
| Continual No                   | 2) All Damage Information (300)     |  |
| Continual Portion              | 3) All Towing (100)                 |  |
| QC Checked by (Engineer-Chief) | 4) All Follow-up with Survey (100)  |  |
|                                | 5) All Follow-up with Survey (100)  |  |
|                                | 6) All Follow-up with Survey (100)  |  |
|                                | 7) All Follow-up with Survey (100)  |  |
|                                | 8) All Follow-up with Survey (100)  |  |
|                                | 9) All Follow-up with Survey (100)  |  |
|                                | 10) All Follow-up with Survey (100) |  |
|                                | 11) All Follow-up with Survey (100) |  |
|                                | 12) All Follow-up with Survey (100) |  |
|                                | 13) All Follow-up with Survey (100) |  |
|                                | 14) All Follow-up with Survey (100) |  |
|                                | 15) All Follow-up with Survey (100) |  |
|                                | 16) All Follow-up with Survey (100) |  |
|                                | 17) All Follow-up with Survey (100) |  |
|                                | 18) All Follow-up with Survey (100) |  |
|                                | 19) All Follow-up with Survey (100) |  |
|                                | 20) All Follow-up with Survey (100) |  |
|                                | 21) All Follow-up with Survey (100) |  |
|                                | 22) All Follow-up with Survey (100) |  |
|                                | 23) All Follow-up with Survey (100) |  |
|                                | 24) All Follow-up with Survey (100) |  |
|                                | 25) All Follow-up with Survey (100) |  |
|                                | 26) All Follow-up with Survey (100) |  |
|                                | 27) All Follow-up with Survey (100) |  |
|                                | 28) All Follow-up with Survey (100) |  |
|                                | 29) All Follow-up with Survey (100) |  |
|                                | 30) All Follow-up with Survey (100) |  |



# 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                | 16/11/2021 10:40 (SGT)            |
| Exact Location of Accident      | Bukit Batok West Ave 8, Singapore |
| Additional Location Information | HEAVY VEHICLE CARPARK             |
| 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   | 26 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     |





## 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

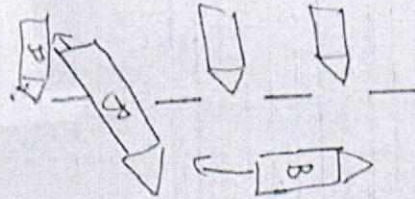
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SKETCH PLAN

A - PC 6553 B

B - PC 2051 J




Bukit Batok West Ave 8  
Heavy VEM Car Park.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

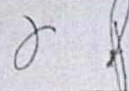
Please refer to Police report - 7/2021/1117/7004

DECLARATION

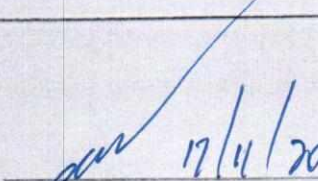
I/We declare the foregoing particulars are true in every respect.

x   
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.:



Road surface: Dry / Wet  
Weather condition: 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: PC 2051 J  
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: China Taiping

Police report (if any): yes / no  
Police report reported at which police station: Ubi Au 3  
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: 1

1 Male  
1 Female

Connect3 client vehicle no: PC 6553B

Owner contact no: 6694 5458

Date of accident: 16/11/2021

Location of accident: Bukit Batok West Ave 8 Heavy Vehicle C.P.

Time of accident: 10:40hrs

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

Usage of veh during of accident:  
\_\_\_\_\_

Driver IC:

Driver Name :

Driver Pass date :

Driver Birth date :

Email Address: accounts@SingaporeCoachServices.com





**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:<br>HABIB BIN HAMID SULTAN |            |                              | Address:<br>168 BUKIT BATOK WEST AVENUE 8 #04-206 SINGAPORE 650168 |                            |
| ID Type / ID No.:<br>NRIC NO / S7235886D     |            |                              | Contact No.:<br>Home/Office:                                       | Mobile: 90607556           |
| Nationality:<br>SINGAPORE CITIZEN            |            |                              | Email:<br>Habibhamidsultan@gmail.com                               |                            |
| Sex:<br>Male                                 | Age:<br>49 | Date of Birth:<br>06/09/1972 | Type of Informant:<br>Driver                                       |                            |
| Race:<br>Indian                              |            |                              | Language:<br>English   | Institution / School Name: |
| Occupation:<br>Bus driver                    |            |                              | Driving Licence Information:<br>Class:                             | Date of Expiry:            |

**General Information of the Accident**

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

**Details of Vehicle Involved**

| Vehicle No. | Type                  | Make | Model | Color | Conditio | No of |
|-------------|-----------------------|------|-------|-------|----------|-------|
| PC2051J     | Bus/Coach/Mi<br>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

2 of 3

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<br>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 REPORT**

Sketch 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:



## Enquire Vehicle Registration Details

### Owner Particulars

|  |  |
|--|--|
| NRIC/Passport<br>/Company Cert<br>No.: | 201227110H   |
| Owner ID Type:                         | Company  |
| Owner Name:                            | SINGAPORE COACH SERVICES PTE. LTD  |
| Registered<br>Address:                 | 71 WOODLANDS AVENUE 10 #01-18 WOODLANDS INDUSTRIAL XCHANGE<br>SINGAPORE 737743 |
| Mailing Address:                       | -  |
| Birth Date:                            | -  |

### Vehicle Particulars

|                                   |  |
|-----------------------------------|--|
| Vehicle No.:                      | PC6553B                                    |
| Previous Vehicle<br>No.:          | -  |
| Effective Date of<br>Ownership:   | 07 Dec 2017                                |
| Original Regn Date:               | 07 Dec 2017                                |
| Registration Date:                | 07 Dec 2017                                |
| Year of<br>Manufacture:           | 2017                                       |
| Vehicle Type:                     | Private Hire (Chauffeur) Bus/Coach/Minibus |
| Vehicle Scheme:                   | Public Service Vehicle (Others)            |
| Vehicle<br>Attachment 1:          | Air-Conditioned                            |
| Vehicle<br>Attachment 2:          | -  |
| Vehicle<br>Attachment 3:          | -  |
| Vehicle Make:                     | YUTONG                                     |
| Vehicle Model:                    | ZK6107HE AUTO                              |
| Primary Colour:                   | Multi-Colour                               |
| Secondary Colour:                 | -  |
| Passenger<br>Capacity:            | 45   |
| Chassis No.:                      | LZYTBD66H1032095                           |
| Engine No.:                       | ISB67E525022235352                         |
| Engine Capacity<br>/Power Rating: | 6690 cc / -                                |
| Maximum Power<br>Output:          | -  |
| Propellant:                       | Diesel                                     |



|  |  |
|--|--|
| Max Unladen Weight:                            | 11160 kg   |
| Maximum Laden Weight:                          | 15500 kg   |
| Open Market Value:                             | \$115,520.00   |
| PARF Eligibility:                              | No   |
| PARF Eligibility Expiry Date:                  | -  |
| Minimum PARF Benefit:                          | -  |
| No. of Transfers:                              | 0  |
| IU Label No.:                                  | 2050111184   |
| COE No.:                                       | 2017110105000926Z  |
| COE Expiry Date:                               | 06 Dec 2027  |
| COE Category:                                  | C - Goods Vehicle & Bus  |
| COE Registration Category:                     | C - Goods Vehicle & Bus  |
| Quota Premium (QP) / Prevailing Quota Premium: | \$51,890.00 / -  |
| Actual QP Paid:                                | \$51,890.00  |
| QP (Regn Cat):                                 | \$51,890.00  |
| OPC Cash Rebate Eligibility:                   | No   |
| QP during COE Bidding Exercise:                | \$51,890.00  |
| Additional Registration Fee Rate:              | 5.00 %   |
| Actual ARF Paid:                               | \$5,776.00   |
| Vehicle Lifespan Expiry Date:                  | 06 Dec 2037  |
| CO2 Emission:                                  | -  |
| Message:                                       | To renew the COE, the Prevailing Quota Premium payable is that of Category C.<br>This is a public service vehicle. |



Motor Bus

MZ601

R SN

BR0057A

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.

DMB1SNA00008542101

Engine No.: ISB67E525022235352

Cha. No.:LZYTBD66H1032095

1. Index Mark and Registration  
Number of Vehicle

PC6553B

2. Name of Policy Holder

SINGAPORE COACH SERVICES PTE. LTD.

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment12/07/2021  
(00:00:00)

Excess Sect. I. S\$2,500.00

Excess Sect. II S\$1,500.00

EX ON WINDSCREEN. S\$300.00

4. Date of Expiry of Insurance

11/07/2022

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. : THINK ONE CREDIT PTE 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: Tan Jia Hwei  
Authorised Officer

Authorised Signatory



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

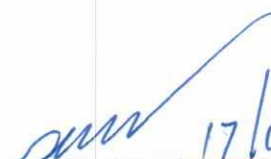
Original Report No: SV082184/0001 Vehicle Registration No: PC 6553B  
Name (as shown in NRIC): HABIB BIN HAMID SUDAN NRIC/FIN/Passport No: \_\_\_\_\_  
(\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
Address: \_\_\_\_\_ Singapore ( )  
Contact (Tel): \_\_\_\_\_ Mobile No.: 9060 7556  
Email Address: \_\_\_\_\_  
Date of Accident: 16/4/2021 Time of Accident: 10:40  
Place of Accident: BUKIT BAKUL WEST AVENUE & HEAVY VEHICLE CAR PARK  
Insurance Company: CHINA TOWERS

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Accident note to 16/4/2021

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

 17/4/2021  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: