

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	13/07/2022 14:20 (SGT)
Reported by	Driver
Date of Accident	12/07/2022 12:42 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TO KJE (BKE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC494C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SUN-GEE TRAVEL PTE LTD
Company Reg No	1XXXXX038Z
Email Address	ALVIN.LEXBUILDAUTO@GMAIL.COM
Mobile Phone No	(Phone) +65-82420552
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	King Long
Model	XMQ6117K
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	Manual
CC	6693

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5114665481-02-000039

DRIVER

Name of Driver	MIAH AYAN
Passport No/FIN	GXXXX791Q
Date Of Birth	01/03/1989
Occupation	Outdoor

Date Of Driving Pass	24/02/2022
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84686764
Alt. Phone Number	-
Email Address	ALVIN.LEXBUILDAUTO@GMAIL.COM
Address	74 SUNGEI KADUT ST 1
Address complement	-
Postcode	729374
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 - Change/cross lane
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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

REFER TO SKETCH PLAN 2.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC6282Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	PICHAIAN KARUPPUIAH
Passport No/FIN	GXXXX470X

Contact Number	(Phone) +65-98993110
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.


SUN-SEE TRAVEL PTE LTD

Policyholder's Signature / Date & Time

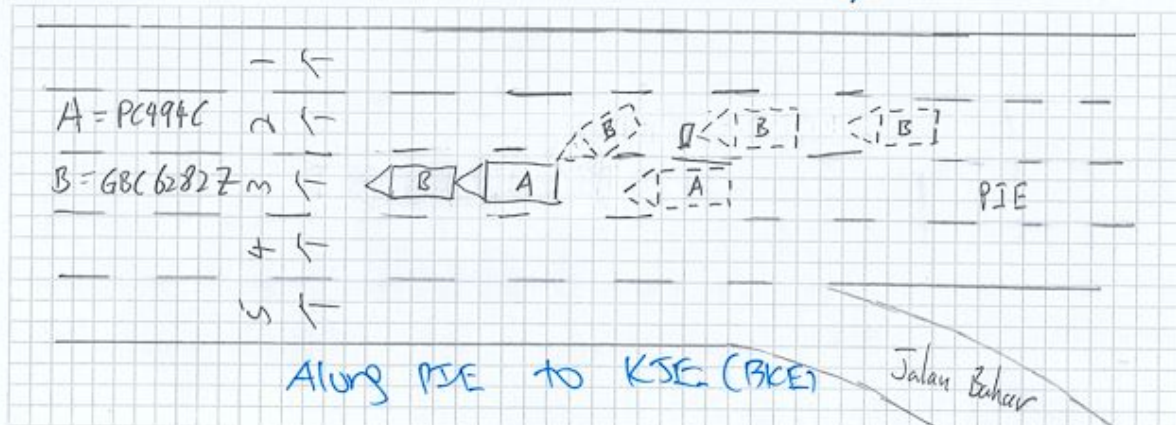

SUN-SEE TRAVEL PTE LTD

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


CYS Automobile Services Pte Ltd
35 Woodlands Industrial Park East 1
#07-17 Admiralty Industrial Park
Singapore 757700
Tel: 6219 2034 (Line 1) Fax: 6219 2035

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On

On the above mention date & time I was driving vehicle PL494C along PIE to KJE (BKE) at lane 3. All of a sudden, a lorry GBC62822 at lane 2 hit the metal on the road and lose control come into my lane 3. I immediately applied brakes however, it did not stop in time as a result, my vehicle front collided into the rear of the lorry.

Declaration

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


 進友成汽車服務私人有限公司
 CYS Automobile Services Pte Ltd
 38 Woodlands Industrial Park East 1
 #07-17 Admiralty Industrial Park
 Singapore 757700
 Tel: 6219 2096 (Linec) Fax: 6219 2096
 Witnessed by Reporting Centre Personnel





















陳保險經紀私營有限公司
TAN INSURANCE BROKERS PTE LTD
 34/5A Alhwal Street, Chenn Leonn Building
 Singapore 199896
 www.tib.com.sg
 Tel: (65) 6742 6766 Fax: (65) 6742 6669

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)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5114665481-02-000039	Cover : Third Party
1. Index mark and Registration Number of Vehicle	: PC494C
Chassis Number	: LA6R1FSH4AB302297
2. Name of Policyholder	: SUN-GEE TRAVEL PTE LTD
3. Effective Date of Insurance	: 01 Feb 2022
4. Expiry Date of Insurance	: 31 Jan 2023
5. Persons or Classes of Persons entitled to drive*	
(a) The Policyholder.	
(b) Any other person who is driving on the Policyholder's order or with his/her 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*	
(a) Use for the carriage of passengers in connection with the Policyholder's business.	
(b) Limited to carry 45 passengers	
This Policy does not cover	
(a) Use for racing, pace-making, reliability trial or speed-testing.	
(b) 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 Vehicle (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.	
This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.	

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: N/A
EXCESS (SECTION II)	: S\$1,500
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : TAN INSURANCE BROKERS PTE LTD (00000690287)
 Date of Issue : 31 Jan 2022 05:05 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive