

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 Actual 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	02/08/2022 14:19 (SGT)
Reported by	Driver
Date of Accident	01/08/2022 14:20 (SGT)
Exact Location of Accident	Boon Lay, Singapore
Additional Location Information	BOON LAY WAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC6489D
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KIM BUS CO PTE LTD
Company Reg No	201110478Z
Email Address	JOHNKTANG@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-94517007
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Golden Dragon
Model	XML6772J18
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	3759

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D19MCV0004983_02

DRIVER

Name of Driver	LEK PENG LENG
NRIC No	S1608182E
Date Of Birth	30/05/1963
Occupation	Outdoor

Date Of Driving Pass	10/09/1993
Driving experience	28 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90271008
Alt. Phone Number	-
Email Address	JOHNKTANG@YAHOO.COM.SG
Address	BLK. 265 TOH GUAN ROAD
Address complement	#18-19
Postcode	600265
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	Chain 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	3
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

ON THE ABOVE MENTION DATE & TIME, I WAS TRAVELLING ALONG BOON LAY WAY. VEHICLE IN FRONT OF ME BRAKE, I FOLLOW SUIT. BUT VEHICLE B, BEHIND OF ME COULDN'T BRAKE IN TIME AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. THE IMPACT WAS HUGE, IT PUSHES ME FORWARD AND COLLIDED ONTO VEHICLE C, IN FRONT OF MT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	KEEP BY OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC7667A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Bus
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)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SDN8663M
Vehicle Manufacturer	Toyota
Vehicle Model	Sienta
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)	2

SKETCH PLAN

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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.

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")

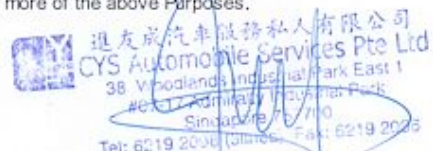
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.



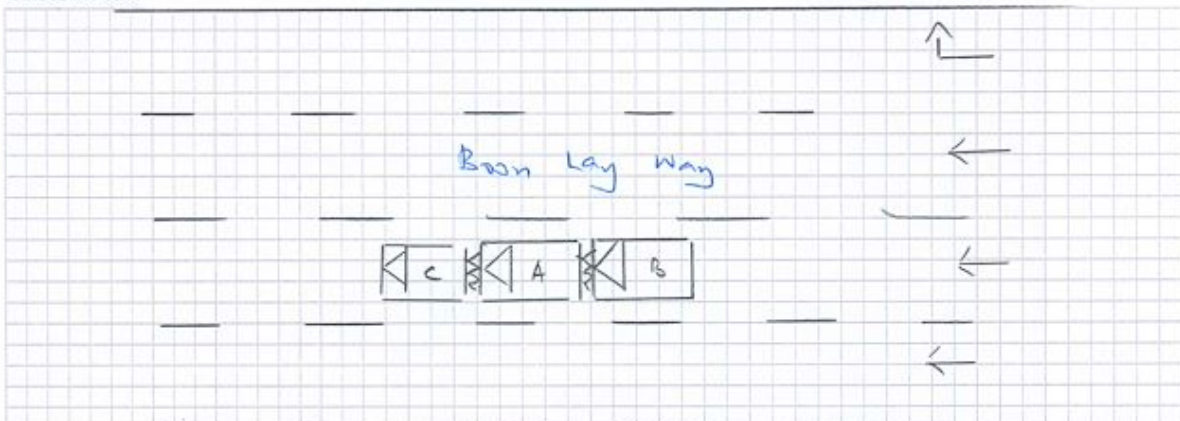
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan



A - PC6489D C - DN8663M
B - PC7667A

Describe Circumstances of the Accident

ON THE ABOVE MENTION DATE & TIME, I
 WAS TRAVELLING ALONG BUN LAY WAY.
 VEHICLE IN FRONT OF ME BRAKE, I
 FOLLOWED SUIT. BUT VEHICLE B, BEHIND OF
 ME COULDN'T BRAKE IN TIME AND COLLIDED
 INTO THE REAR PORTION OF MY VEHICLE.
 THE IMPACT WAS HUGE, IT PUSHES ME
 FORWARD AND COLLIDED INTO VEHICLE C IN
 FRONT OF ME

Note: Please note that your insurer may have 14 days Time Frame for you to submit an Own Damage claim
 under your own comprehensive policy. please check with your policy for more information.

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

✓

Witnessed by Reporting Centre
 Personnel

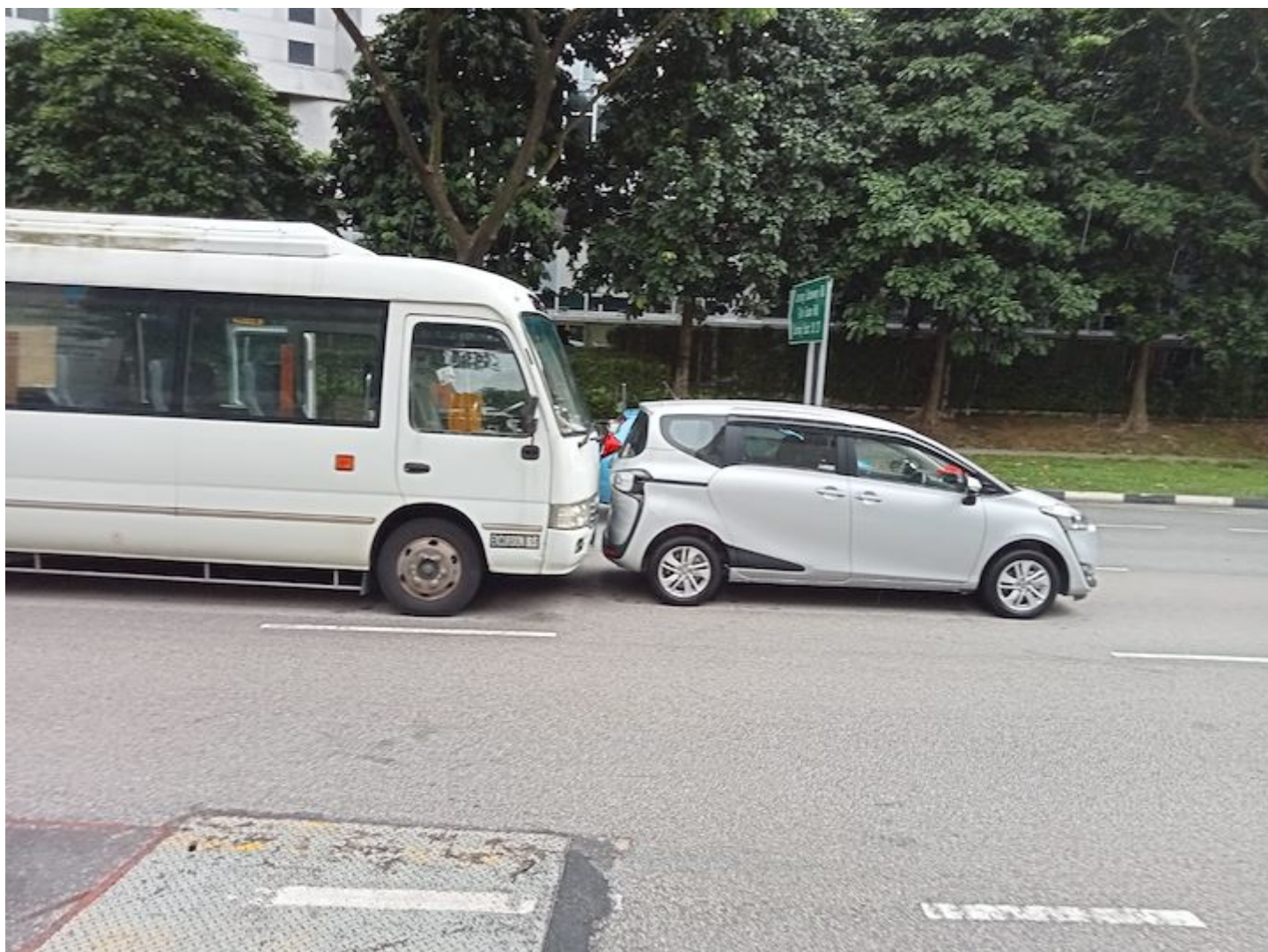


進友成汽車服務私人有限公司
 CYS Automobile Services Pte Ltd
 /38 Woodlands Industrial Park East 1
 #01-17 Admiralty Industrial Park
 Singapore 758977
 Tel: 65922095 (Direct) Fax: 6219 2099









































Annex A

Transaction ref 20171012104904562715

The owner and vehicle particulars for Vehicle No. PC6489D as at 12 Oct 2017 are as follows:

1.	Name	: KIM BUS CO PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 201110478Z
4.	Place Of Passport Issue	: -
5.	Registered Address	: 679 WOODLANDS AVENUE 6 #07-700 ADMIRALTY PLACE SINGAPORE 730679
6.	Mailing Address	: -
7.	Vehicle No.	: PC6489D
8.	Effective Date of Ownership	: 12 Oct 2017
9.	Original Registration Date	: 12 Oct 2017
10.	First Registration Date	: 12 Oct 2017
11.	Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
12.	Vehicle Scheme	: Public Service Vehicle (Others)
13.	Attachment 1	: Air-Conditioned
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: GOLDEN DRAGON
17.	Vehicle Model	: XML6772J18 AUTO
18.	Year of Manufacture	: 2016
19.	Primary Colour	: Multi-Colour
20.	Secondary Colour	: -
21.	Passenger Capacity	: 29
22.	Chassis/Trailer Chassis No.	: LL3BDADE2GA002242 / -
23.	Propellant/Emission Standard	: Diesel / Euro V
24.	Engine No./Motor No.	: ISF38S516889844829 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 3759 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 5800
28.	Maximum Laden Weight(kg)	: 8500
29.	Open Market Value	: \$74,656.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: -
34.	COE No.	: 2017080105001442C
35.	COE Expiry Date	: 11 Oct 2027
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: \$42,809.00
38.	Actual Quota Premium/PQP Paid	: \$42,809.00
39.	Actual ARF Paid	: \$3,733.00
40.	CO2 Emission(g/km)	: -
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: 11 Oct 2037
45.	Road Tax Amount	: \$0.00
46.	Road Tax Start Date	: 12 Oct 2017
47.	Road Tax End Date	: 11 Apr 2018
48.	Remarks	: This is a public service vehicle. To renew the COE, the Prevailing Quota Premium payable is that of Category C.




INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 190703792k | GST. Reg. No. M2-0078806-X
 64 | Cecil Street | #04 | #05 | #06-02 | 108 Building | Singapore 069711
 Office (65) 63476100 Email: insure@iil.com.sg
 Fax (65) 62244174 Website: www.iil.com.sg

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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D19MCV0004983_02		COVER: Comprehensive
1. Index Mark and Registration Number of Vehicle	: PC6489D	
Chassis No	: LL3BDADE2GA002242	
2. Name of Policyholder	: KIM BUS CO PTE. LTD.	
3. Effective date of Insurance	: 12 Oct 2021	
4. Expiry date of Insurance	: 11 Oct 2022	
5. Persons or Classes of Persons entitled to drive*	<p>Any person who is driving on the Policyholder's order or with their 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.</p>	
6. Limitations as to use*	<p>Use only for the carriage of passengers or goods in connection with the Policyholder's business. The 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.</p> <p>*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.</p>	
<p>Excess Sect I & II SEPARATELY : SGD1,500.00 Windscreen Excess : SGD200.00 TERRITORIAL LIMIT : WITHIN THE REPUBLIC OF SINGAPORE ONLY Hire Purchase Company : Maybank</p> <p>FOR DRIVERS BELOW 21 YEARS OR ABOVE 70 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$2500/- ON SECTION I & II SEPARATELY WILL BE APPLICABLE.</p>		
<p>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).</p>		
<p>Agent/Broker : A000047/SINCL PTE LTD Date of Issue : 20/09/2021 10:32:12 M.Z. 600C - OMNIBUS (ORGANIZATION)</p>		<p>For India International Insurance Pte Ltd</p>  _____ Authorised Signatory

