ATTONAL Assessment Centre Services:	[wel 1 Jan'08]	SMOFT	XP 1000	1	
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	/Survey Report .				
. 80	t by Fax / Hand to	Owner/Wks	<u>.</u>	101	
		tel:		x:	.)
Preferred Wksp/INC Assign Wksp/QW:	N . INC(1/Non-Ti	10().	,	1
TP Panticulars: Yeh No: Vy 2815/		Tel:	•)	
Owner/Driver:(Paliar No:(') Period:(')	Cover Type	; ().	
Policy 190.	Dates		imu:)	•
Confirmed by: (%) [Note-Est. State	15 (WO): N: 0-2	0%; P: 21-7	9%: ·F; 80-1	00%]	
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General Remarks: () Walk-In Customer: Customer's information strict	y Confidential & S	trictly NO ref	er of repairer.		-:
() Total Loss Case : to e-mail Insurer URGENT	dead do 1			.,	
Drive-In ()/Towed-In (,); Invoice: YES () / NO (·);	Towing Co:	(TOTAL TOTAL
		Date&T.	ne Compatible	A SOURCE AND CO	auticipy .
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1) Apply for Transfort Allowance ()/ Courtesy Car 2) QC Check/Post Repair Inspection .	(,)				3.8
2) QC Check Post Repair Insports 3) Upload Resurvey Photo [Repair Cost > \$3000]::	()			1/1	Trans.
3) Upload Resulvey I how (2007		1			
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TOTAL AND ARREST TRANSPORTATION OF THE PROPERTY OF THE PROPERT	*N7	Post Repair Insp	ection . cess Coordination	35	
aiditors Comments.	TP ([nist] TT: (LIK	NC) against INC	30]	
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	14000				



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 witholding of material facts may allow insurance companies to repudiate

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 22/08/2022 08:46 (SGT) Reported by Driver Date of Accident 17/08/2022 06:45 (SGT) Exact Location of Accident Kaki Bukit Ave 4, Singapore Additional Location Information Country/State of Loss Singapore **DETAILS OF OWN VEHICLE**

Security States and the Control of t	
Vehicle Registration Number	CB8051D
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes RENHURN BUS SERVICE 4XXXX200L alextamp@yahoo.com (Phone) +65-83827366
VEHICLE PARTICULARS	

Manufacturer	Toyota
Model	Coaster
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 as an an annual construction of the constru	4009
INSURANCE COMPANY	

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMB1SNW00002512203

Name of Driver	TAN CHEE SHEE
NRIC No	SXXXX152B
Date Of Birth	01/11/1958
Occupation	Outdoor

DRIVER

Date Of Driving Pass 11/05/1979 Driving experience 43 YEARS AND 3 MONTHS Gender Male Mobile Number (Phone) +65-93398180 Alt. Phone Number **Email Address** alextamp@yahoo.com Address BLK 185 PASIR R S STREET 11 #08-60 Address complement Postcode 510185 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 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) 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? Police Station Name Bedok Division Headquarters Police Station Phone No (Phone) +65-18002440000 Alt. Police Station Phone No. (Fax) +65-64443009 Police Station Address 30 Bedok North Road Singapore 469676 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT G/20220817/7012 ATTACHMENT(S) Are accident photos available for attachment? Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident WITH OWNER DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number GY2815M

Vehicle Manufacturer Vehicle Model

Vehicle Variant	20
Vehicle Colour	
Vehicle Category	Commercial vehicle
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)	-

SKETCH PLAN

IMPORTANT NOTICE

- t. Phase recent correctly the details of the acceled to specify the claim process.
- 2 The Lammatte completed by the Potenholder and'er the Authorised Danet
- 3. Promotion provided must be as fruitful and accounted as a subsection of with a solution of with a solution of the solution צויול של דבו לבן שוני שעשו כן בשיבורים ביות ביות בילה
- 4. Do note and acceptance of the family improve companies in an admission of policy highly on the part of the increase
- har fabe reporting may be referred to the Police for investigation
- The report in the form proved by the contract of the CAN Records Minagement Contract established by the General Insurance Association
- of Singuistics (CAN for architecture) and that copies of this report in 1 for a free termine available upon explication by interested parties
- 7. By the bidgement of this report to the moviers, you besety consent to the archying of this report at the centre and to occess of the report being more available afternat
- 5 Consent under the Personal Data Protection Act (PDPA)

fundamental action today agree and commercial

(a) M. Insurer in y wickshop and the Control historice Association of Singapore ("GIA") may be permitted in collect, use, discharge and or processing personal data personal references set out in the flored and any power personal information provided by the or possesses by my name reduction the "Personal Information") and discuse and transfer such Personal Information to all insurens) who have numed vehicles I medice in this accept (all numeris) who have numed vehicles) involved in this accept shall be colocitisely referred to as the "Insurers" I the Jisurers tax yers fave from the Atmetary Authority of Singapore and any retorant description about amough time at the botter for the bribiness of

(i) processing handing and/or dealing withing claims including the softeniot of the claims and any necessary investigations relating to recting

(ii) mierophing the accident and or my claims,

(iii) carrying out and or dealing with my instructions or temporating to any enquires by the,

(iii) actions for on a claims (including the malloy of correspondence, statements, invoces, reports or notices to mi, which could involve disclarate of certain personal data about me to bring about delivery of the same as well as on the external cover of emislopes mail DESCRIPTION AND LA

(x) complying with applicable bill in appropriate range processing, handling and/or dealing with my clariful

(coloctive) the 'Purposes')

(b) at insurerys) who have insured vehicless) involved in this accident and the Insurery Lawyers. Live Time, may are permitted to collect. use discuse and or processing Personal Information for one or more of the above Purposes, and

(c) my Personal Edermition may can be disclosed by any of the insurers and/or GN to their third parity service or agents (including ther line persidue films), which may be send outside of Singapore, for one or name of the above Purposes

a of Date & Policy nober's Syran D(MM Tr 12/8/22

Sketch Plan

Diver's Equation (I diver a not the policyholder) / Oute A Tim 18 | 8/12 Flams

Witnessed by Reporting Cons

Kori Burit Uss 4

A) CB8051D

B) GY 2815M

1 Plagent	Rough Regions i police Chipse	1 G/2022 0817/70/2
eclaration A occurse on foregoing particular	is are true in every respect.	
18 8 71 9 64-	Divers Street of Other a metric policytopen) / Dise 6 Ten 15/8/22 9 mm.	Wishington Recording Control

CS comment with Ca



POLICE REPORT (NP299)

Police Station Of Origin Bedok Division HQ 30 Bedok North Road SINGAPORE 469676 Tel No:1800-2440000

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7/7012 1 of 2

Report No. G/20220817/7012

Date/Time Report Made 17/08/2022 09:30	Vide Re	port No.			Station Diary No.
Name Of Informant TOH CHER BOON	Address 495E TA 524495		STREE	Г 43 #07-36	6 SINGAPORE
ID Type / ID No. NRIC NO / S8020224E	Contact Home/O			obile: 3398180	
Nationality SINGAPORE CITIZEN	Email A	ddress p@yahoo	.com		
Occupation	Sex	Age	Da	ite of Birth	Race
Transport/Technical operations manager	Male	42	08	/07/1980	Chinese
(except port/shipping)					
Institution/School Name	Languag English	ge			
Date/Time Of Incident 17/08/2022 06:40 - 17/08/2022 06:45	The second second second second	Of Incide			
Briof dotails			Carlotte in the	PERMITTED OF	

Brief details.

My Driver parked the bus (CB8051D) on the left side of the road, he went to the opposite coffee shop for toilet break. When he was in the toilet, the lorry(GY2815M) in front of our bus started to reverse and hit onto the bus front. The lorry driver didn't come down to see the incident, instead he drove off. Nobody is injured in the incident. I need to email the photos and video,

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 17/08/2022 09;30
Officer In-Charge Of Case:	Classification Of Case:





20817/7012

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220817/7012

Person Name	TAN CHEE SHEE		
ID Type	NRIC NO	ID No	S1319152B
Gender	Male	Age	63
Race	Chinese	Language	Chinese
Occupation	Bus driver	Address	185 PASIR RIS ST 11 #08-60 SINGAPORE 510185
Home/Office No	93398180	Mobile No	87821541
Relation To Informant	EMPLOYEE		

t has been authenticated by Singpass. gnature is required.
/Time: 3/2022 09:30
sification Of Case:
-

Road surface. Dry / Wet	Usage of	veh during of accident:
Weather condition. Clear / Raining		
Speed:		
	Driver IC	:
Does driver own a vehicle: yes /no	Driver Na	ame:
if yes, veh number plate:	Driver Pa	ss date :
veh insurance co:	Drver Bir	th date :
Relationship with insured: Employee & Employee	_	
Witness (if any): yes/no		
Witness name:		
Witness hp:		
Witness email (If any):		
Witness add:		
Witness IC no:		
Third party veh number: GY 2815 M		
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: Chirce Taiping.		
Police report (if any) (yes) no		
Police report reported at which police station: Redox D	DH- POISIYA	
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) fox	Male Female	
Connect3 client vehicle no:		
0202-244	Address:	alexan a
Date of accident: 17 08 2022	nuuless.	alextamp a yellow.com
Location of accident: KGY BUY 14 AVE 4		
Time of accident : 06 H5/ks .		
Any Injury, yes /no (if yes, must have police report)		



Motor Bus

MZ601

R SN AN0580A

Cov. Type:F

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 1

Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960

Road Transport Act, 1967 (Maldaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Mallaysia)

CERTIFICATE No.

DMB1SNW00002512203

Engine No.: N04CTQ11722 Cha. No.:JTGFC538403000214

1. Index Mark and Registration

CB80510

Number of Vehicle 2. Name of Policy Holder

RENHURN BUS SERVICE

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

19/02/2022 (00:00:00)

Excess Sect. II

\$\$1,000.00

4. Date of Expiry of Insurance

18/02/2023

Persons or Classes of Persons entitled to drive"

Any persons or classes or rersons enseed to arrive.

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 lews or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Lew or by reason of any enactment or regulation in that behalf from driving the Motor

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.: SIN HENG 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.

Authorised Signatory

Issued By:

Authorised

6222 1033

www.sg.cntaiping.com

China Talping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 3 Anson Road #16-00 Springleaf Tower Singapore 079909

ODDS

@6389 6111