

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	15/09/2022 13:04 (SGT)
Reported by	Driver
Date of Accident	15/09/2022 08:35 (SGT)
Exact Location of Accident	2 Changi Business Park Cres, Singapore 486029
Additional Location Information	DBS ASIA HUB DROP OFF/PICKUP POINT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA1991M
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CHUA AIR-CON BUS SERVICES
Company Reg No	5XXXX088K
Email Address	connect3lau@gmail.com
Mobile Phone No	(Phone) +65-98519829
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	LT134P
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	7790

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMB1SNW00011622202

DRIVER

Name of Driver	CHUA KHOON SENG
NRIC No	SXXXX215B
Date Of Birth	07/03/1951
Occupation	Outdoor

Date Of Driving Pass	27/08/1976
Driving experience	46 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98519829
Alt. Phone Number	-
Email Address	connect3lau@gmail.com
Address	BLK 995C BUANGKOK CRESCENT #11-965
Address complement	-
Postcode	536995
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 - Head to Rear
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

PLEASE REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA5318B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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

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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 making 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.



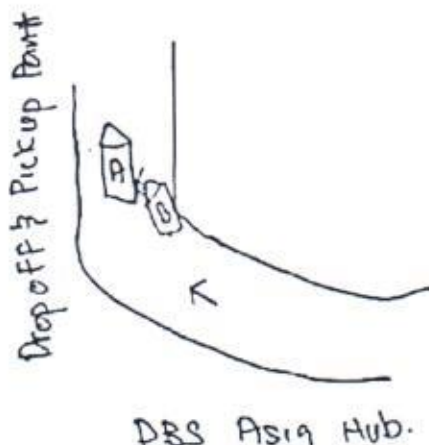
4.

15/09/2022
Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time

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

Sketch Plan



A-PA1991M

B-SHA5318B.

Describe Circumstances of the Accident

On 15/9/2022 around 0835hrs, I was driving my Bus PA1991M along DBS Asia Hub. My Bus turning into the DBS Asia Hub drop off / Pick up Point. Suddenly I felt an impact from the right, Veh B SHA5318B Squeeze through the 1st drop off / Pick up point. as such Veh B Collided onto my Bus right side portion.

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

[Signature] 15/09/2022

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: Employer & Employer

Witness (if any): yes / no

Witness name:

Witness hp:

Witness email (if any):

Witness add:

Witness IC no:

Third party veh number: SHA 5318B

Name of third party driver: Utoy chuan Ko

IC of third party driver: 514193304

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: A24

Police report (if any): yes / no

Police report reported at which police station:

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

 Male

 Female

Connect3 client vehicle no: PA1991M

Owner contact no:

Email Address: Connect3Law@gmail.com

Date of accident: 15/11/2022

Location of accident: DBS Asia Hub

Time of accident: 0835 hrs

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

Motor Bus

MZ601

R SN

ANC58CA

Cov. Type F

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

DMB1SNVDC0011822202

Engine No.: 6HK1460582

Chs. No.: JALLT134P77000299

1 Index Mark and Registration
Number of Vehicle

PA1001M

2 Name of Policy Holder

CHUA AIR-CON BUS SERVICES

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

17/07/2022
(00.00.00)

Excess Sect. II \$31,000.00

4 Date of Expiry of Insurance

16/07/2023

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.: YONG KONG CREDIT PTE LTD AS HP OWNER

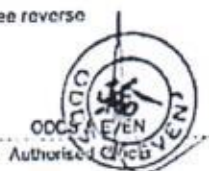
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

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



Authorised Officer

张光义

Authorised Signatory

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

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com

[> Back to OneMotoring](#)

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.
PA1991M

Make / Model
ISUZU / LT134P

Vehicle Type :
Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus

Vehicle Attachment 1 :
Air-Conditioned

Vehicle Scheme :
Public Service Vehicle (Others)

Chassis No. :
JALLT134P77000299

Propellant :
Diesel

Engine No. :
6HK1460562

Motor No. :
-

Engine Capacity :
7790 cc

Power Rating :
-

Maximum Power Output :

Maximum Laden Weight :

15200 kg

Unladen Weight :

10100 kg

Year Of Manufacture :

2007

Original Registration Date :

03 Apr 2008

Lifespan Expiry Date :

02 Apr 2028

COE Category :

C - Goods Vehicle & Bus

PQP Paid :

\$34,070.00

COE Expiry Date :

31 Jul 2027

Road Tax Expiry Date :

16 Jan 2023

PARF Eligibility Expiry Date :

-

Inspection Due Date :

16 Jan 2023

Intended Transfer Date :

15 Sep 2022

CO2 Emission :

-

CEV/VES Rebate Utilised Amount :

-

CO Emission :

-

HC Emission :

-

NOx Emission :

PM Emission :

Fees To Be Paid For Transfer

Transfer Fees

\$25.00

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