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SN08229F0002 / National Assessment Centre Services [159721]

ENTRY DATE & TIME: 15/09/2022 13:04 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (15/09/2022 13:04 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
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 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) 2 Changi Business Park Cres, Singapore 486029 Exact Location of Accident DBS ASIA HUB DROP OFF/PICKUP POINT Additional Location Information Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number PA1991M

# INSURED/POLICYHOLDER

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

## VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Isuzu LT134P Model Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Bus Transmission Manual

### INSURANCE COMPANY

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

7790

#### DRIVER

CC

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

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

connect3lau@gmail.com BLK 995C BUANGKOK CRESCENT #11-965 -536995 No

46 YEARS AND 1 MONTH

(Phone) +65-98519829

Employee No

27/08/1976

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface Collision - Head to Rear Clear 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) No soliciting/offering accident claims assistance? 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? Was there any video captured by Car Camera? Yes Yes

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

SHA5318B

CHA5318B

Taxi

SHA5318B

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

- Pease report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 GM Records Management Centre established by the General Insurance Association of Singapore (GM) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 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 imide available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 my 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 law yers/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 haurers' 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

OH BUS SER NO SE

Policyholder's Signature / Date &

CON BUS Reg No \$3181088K

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Propofe & Pickup But

DRS Asia Hub.

A-PA1991M B-SHA5318B.

escribe Circumstances of the Accident	
OD 15/9/2022 Around 0835 hrs, I was driving My DBS Asia Hub. My Bus turning into the DBS Asia Point. Suddayly I felt an impact from the right Squeeze through the I but drop off I Pick up p Collided on to my Bus right side portion	Rus PA 1991 M along
Day Hera Floor ing bus wirning into the DBS Hay	in Hub drop of 1 Pickup
Consolidation of the transfer transfer the thir rigil	M, VER B 3HA 5318B
Squeeze through the I Eve arop off I Pick up p	out, as such theh B
collided on to my this right side portion	
Entitle Control of the Control of th	
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claration	
No. 12 To 12	
declare the foregoing particulars are true in every respect.	
N BUS	
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81088K) 2 (53181088K) 2	////
- Sy	11/2 9/ ha
	15/0/190
cyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre

Road surface: PA / Wet	Usage of veh during of accident:
Weather condition: Clear / Raining	
Speed:	
	Driver IC:
Does driver own a vehicle: yes /no	Driver Name :
if yes, veh number plate:	Driver Pass date :
veh insurance co:	Drver Birth date :
Relationship with Insured: Emplaya 3 Emplayer	
Witness (If any): yes/no	_
Witness name:	
Witness hp:	
Witness email (if any):	
Witness add:	
Witness IC no:	
Third party veh number: SHA 5318B	83
Name of third party driver: LAOY	Chine Ko
IC of third party driver:	514192304
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): yea/no	
Police report reported at which police station:	<u> </u>
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:	- Male
Connect3 client vehicle no: PA 199 1 m	Female
Owner contact no: Em.	ail Address: [contect 3 Lau @amail cont
Date of accident: 15/6/ 3050	2
Location of accident: DBS Asia Hub.	
Time of accident: 0835 NVS	
tou lower yes (not) if yes must have police report)	

Motor Bus

MZ601

R SN

ANOSEGA

Excess Sect. II \$\$1,000.00

Cov. Type F

CERTIFICATE OF INSURANCE Motor Vehicles (Tred Party Raiss and Compensation) Act Chapter 15:01 Motor Vehicles (Thred-Party Raiss and Compensation) Hunes, 1965 How Transcort Act, 1967 (Malaysia) Bolor Vehicles (Tred-Party Raiss) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMB15MWC0011822202

Engine No.: 6HK1460562 Che. No. JALLT134P77000299

Index Mark and Registration

Number of Vehicle

PA1991M

2. Name of Pulicy Holder

CHUA AIR-CON BUS SERVICES

Effective cale of the Commencement of IT/07/2022 Insurance for the purposes of the Regulations. (00,00:00) Ordinance of Enactment

17/07/2022

4 Date of Expery of Insurance

16/07/2023

5. Pursons or Classes of Persons entitled to drive!

Any person provided he is in the Policyholdor's employ and is driving on their order or with their permission or any person driving with policyholdor's permission.

Provided that the person driving is permitted in accordance with the Ecensing 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 Lentators as house

Use only for the certage of passengers or goods in connection with the Policyholder's business as specified in the Schedule.

The Policy does not cover

(1) Use for rading, pace-making, refability 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 KHONG CREDIT PTE LTD AS HP OWNER

\* Limitations residered 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 (Malaysla), 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

Issued By

Authorised Chick

FOR CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

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

Q6389 6111

**€**6222 1033

⊕ www.sq.cntaiping.com

Power Rating:

Maximum Power Output:

# **Enquire Vehicle Transfer Fee**

ehicle Details		
Vehicle PA199		
Make / I	Model J / LT134P	
Vehicle	Type:	
Z20 -	Private Hire (Chauffeur) Bus/Coach/Minibus	
Vehicle	Attachment 1:	
Air-C	onditioned	
Vehicle	Scheme :	
Public	Service Vehicle (Others)	
Chassi	s No.:	
JALLT	134P77000299	
Propel	lant:	
Diese	d .	
Engine	e No.∶	
6HK1	1460562	
Motor	No.:	
-2		
Engine	e Capacity :	
7790	сс	

85 B
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 :
NOv Emission

NOx Emission:

PM Emission :
10

# Fees To Be Paid For Transfer

Transfer Fees \$25.00

Print

Save as PDF

Copy as Text

181000000000

OK →