ST0X22A30001 / The One Holdings Pte Ltd
ENTRY DATE & TIME: 03/10/2022 10:27 (SGT)
SUBMITTED BY: hilmi
VERSION: 1 (03/10/2022 10:27 (SGT))

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 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	03/10/2022 10:27 (SGT)
Reported by	Driver
Date of Accident	30/09/2022 14:23 (SGT)
Exact Location of Accident	Xilin Ave, Singapore
Additional Location Information	Towards Tanah Merah
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC4833G

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	At
Company Reg No	1XXXXX108G
Email Address	atlantictravel14@gmail.com
Mobile Phone No	(Phone) +65-93381882
Alternative Phone No	(Office) +65-90929568

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	LT434P
Variant	Black
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	7790

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D19MFL0006758_02

DRIVER

Name of Driver	Kwek Yong Lee
NRIC No	SXXXX302B
Date Of Birth	18/05/1961
Occupation	Outdoor

Date Of Driving Pass	07/07/2005
Driving experience	17 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90929568
Alt. Phone Number	(Office) +65-93381882
Email Address	atlantictravel14@gmail.com
Address	Blk 174C
Address complement	Hougang Avenue 1 #08-1559
Postcode	533174
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	Side Swipe
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)	30
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	-

PASSENGER 1

Name	NA
Gender	Male

PASSENGER 2

Name	NA
Gender	Male

PASSENGER 3

Name	NA
Gender	Male

PASSENGER 4

Name	NA
Gender	Male

PASSENGER 5

Name	NA
Gender	Female

PASSENGER 6

Name	NA
Gender	Female

PASSENGER 7

Name	NA
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Telok Blangah Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18002729999
Alt. Police Station Phone No	(Fax) +65-63776526
Police Station Address	Blk 51 Telok Blangah Drive #01-116/ 118 Singapore 100051
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to police report T/20220930/2037

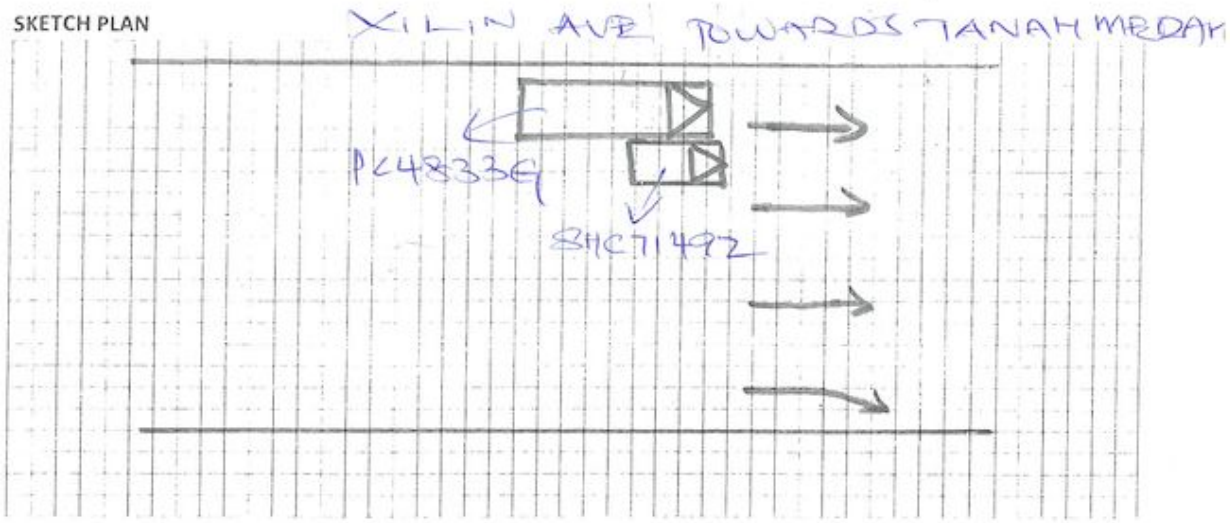
ATTACHMENT(S)

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	Too big,send to III thruy email.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7149Z
Vehicle Manufacturer	Hyundai
Vehicle Model	I40
Vehicle Variant	-
Vehicle Colour	Yellow
Vehicle Category	Taxi
Name of Driver	NA
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	NA
Details of property damaged in accident	NA
No. Of Passenger (Including Driver)	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report: T/20220930/2037

DECLARATION

I/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:	Reporting Centre Personnel's Signature Name: HILMI NRIC/FIN No.: S70...916Z

COMET TRAVEL PTE LTD

IMAGES

IMAGES #2

IMAGES #3

SINGAPORE POLICE FORCE

T/20220930/2037

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

Report No. T/20220930/2037

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
30/09/2022 14:23		10

Informant's Particulars

Name of Informant: KWEK YONG LEE ADDISON			Address: APT BLK 174C HOUGANG AVENUE 1 #08-1559 SINGAPORE 533174	
ID Type / ID No.: NRIC NO / S1511302B			Contact No.: Home/Office:	Mobile: 90929568
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 61	Date of Birth: 18/05/1961	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Bus driver			Driving Licence Information: Class: 2B,3,4,5	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
		No	30/09/2022 08:00	Straight Road

Location:

XILIN AVENUE

Weather: Clear	Road Surface: Dry	Road Speed Limit: 50 Km/h
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear		Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4833G	Bus/Coach/Minibus	ISUZU		Multi-Colored	Slightly Damaged	30
SHC7149Z	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

SINGAPORE POLICE FORCE

T/20220930/2037

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

Report No. T/20220930/2037

CONTINUATION OF REPORT

Driver			
Name	KWEK YONG LEE ADDISON	ID No.	S1511302B
Related Vehicle	PC4833G (Bus/Coach/Minibus)	Contact No.	90929568
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 30/09/2022 at about 0800hrs, I was driving my company bus along Xilin Ave towards Tenah Merah. During that point of time, I was driving along the left most lane with about 30 to 40 passengers on board. I spotted a taxi to the right of me and suddenly, the taxi moved into my lane and I saw him colliding to the front right of my bus. The taxi did not stop and even wave at me and drove off. The taxi was seen exiting to the left towards Changi after Xilin Ave. I then immediately came out of my bus to make a check and discovered scratches to the front left side of my bus and I informed my company about the matter. I had a camera installed in my bus in which the accident could be seen. My passengers nor myself were not injured and I was advised by my company to lodge a police report.

SINGAPORE POLICE FORCE

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

T/20220930/2037

3 of 3

Report No. T/20220930/2037

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report: D / SGT 3 LOW KONG WEE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/09/2022 14:23
Officer In Charge Of Case: TP / GIA / SR STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:

NP168

SINGAPORE ACCIDENT STATEMENT

Accident Date & Time: 30/9/2022 @ 8:00am	
Accident Location: Xilin Avenue	
Vehicle Number: PC4833G	Make/ Model: Isuzu / LT434P 7.8 CMT
Policy Holder Name: Comet Travel Pte Ltd	
NRIC/ ROC: 199409108G	Mobile: 93381882
Email: atlantictravel14@gmail.com	
Insurance Company: India International Insurance Pte Ltd	
Policy Number: D19MFL0006758-02	Policy Period: 01 Nov 2021 – 31 Oct 2022
Policy Coverage: Comprehensive (✓) Third Party ( ) Third Party Fire & Theft (	
State Action Taken: Claim Own Policy ( ) Claim Third Party (✓) Reporting Only (	
Driver Name: Kwek Yong Lee Addison	
NRIC: S1511302B	Mobile: 90929568
Date Of Birth: 18 / 05 / 1961	Driving Pass Date: 07 / 09 / 2005
Gender: Male (✓) Female ( )	Occupation: Indoor ( ) Outdoor (✓)
Address: APT BLK 174C Hougang Avenue 1 #08-1559, S 533174.	
Is driver an employee of the insured's company: Yes (✓) No ( )	
If No, Relationship of the driver with the insured: Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Hirer ( )	
Weather Conditions: Clear (✓) Raining ( ) Others ( )	
Road Surface: Dry (✓) Wet ( ) Others ( )	
Was any foreign vehicle involved in this accident? Yes ( ) No (✓)	
Was anybody injured in the Accident? Yes ( ) No (✓)	
Was there any video captured by Car Camera? Yes (✓) No ( )	
Number of Passenger (Including Driver): 35	
1) 2) 3) 4)	
Was the accident reported to the police? Yes (✓) No ( ) "attach Police Report, if any"	
3rd Party Name:	
Vehicle Number: SHC7149Z	**Make & Model:**
NRIC:	**Mobile No:**
Witness Details (if any):	

NAME:	NRIC :	Mobile No:
Other remark: if any		

SKETCH PLAN

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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. The 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 lodgment 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.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:	Driver's Signature (if driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: HILMI NRIC/FIN No : S70 29716E

COMET TRAVEL PTE LTD