

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	20/10/2022 12:32 (SGT)
Reported by	Driver
Date of Accident	19/10/2022 16:57 (SGT)
Exact Location of Accident	Woodlands Centre Rd, Singapore
Additional Location Information	WOODLANDS CENTRE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PD3399U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AIK SHEN BUS SERVICE
Company Reg No	2XXXX400K
Email Address	AIKSHEN1@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-96534093
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	B8r
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	7698

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5111191019-03-000008

DRIVER

Name of Driver	ANG BOON TENG
NRIC No	SXXXX010A
Date Of Birth	02/11/1957
Occupation	Outdoor

Date Of Driving Pass	03/12/1980
Driving experience	41 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90491195
Alt. Phone Number	-
Email Address	AIKSHEN1@SINGNET.COM.SG
Address	BLK. 624B WOODLANDS DRIVE 52
Address complement	#08-13
Postcode	732624
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 - Change/cross lane
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)	8
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	-
Gender	Female

PASSENGER 2

Name	-
Gender	Female

PASSENGER 3

Name	-
Gender	Female

PASSENGER 4

Name	-
Gender	Female

PASSENGER 5

Name	-
Gender	Female

PASSENGER 6

Name	-
Gender	Female

PASSENGER 7

Name	-
Gender	Female

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

TRAFFIC WAS HEAVY, VEHICLE A WAS ON THE RIGHT LANE. VEHICLE B COME OUT FROM THE SIDE ROAD AND CUT INTO MY LANE AND HIT MY VEHICLE.

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 SHA4079E
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Taxi
 Name of Driver ROLAND SIM HAK YEW
 NRIC No SXXXXX238D
 Contact Number (Phone) +65-97300488
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) 1

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 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.
- (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

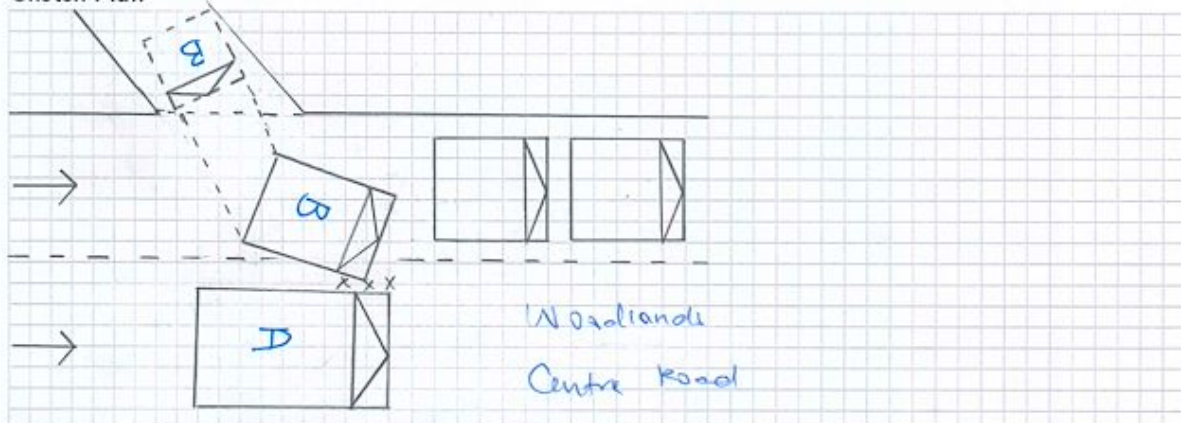



Driver's Signature (if driver is not the policyholder) / Date & Time




Witnessed by Reporting Centre Personnel

Sketch Plan



A - PD3399U

B - SHA4079E

Describe Circumstances of the Accident

Traffic Was Heavy. Vehicle A was on the right lane. vehicle B come out from the side Road and cut in to my lane and hit my vehicle.

* I Drive a Female Passengers *

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















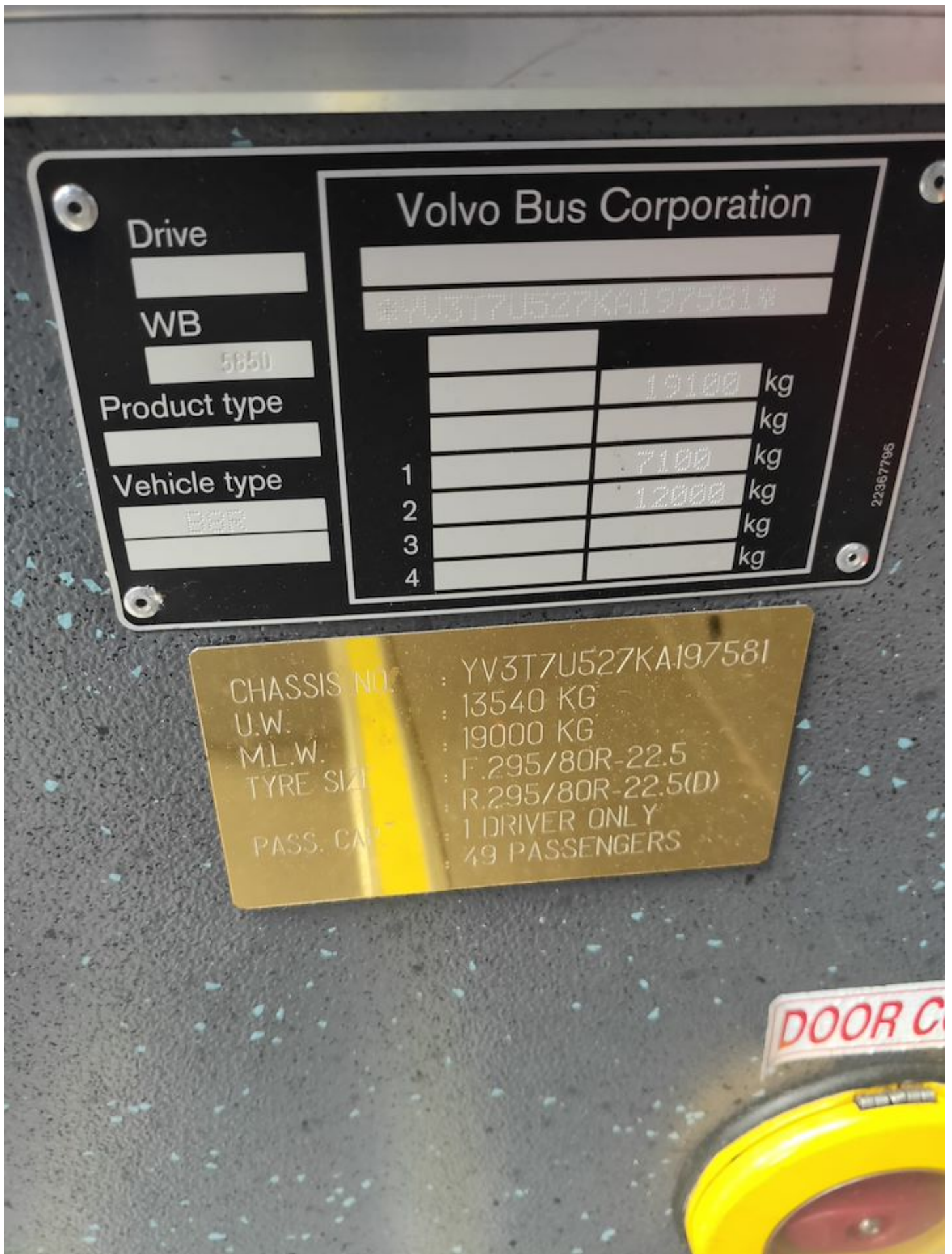














Annex

Transaction ref 20210208085840751325

Please check that the owner and vehicle details are correct:

1. Name	: AIK SHEN BUS SERVICE
2. Identification No. Type	: Business
3. Identification No.	: 29635400K
4. Country/Region	: -
5. Registered Address	: APT BLK 337 WOODLANDS AVENUE 1 #07-531 WOODLANDS VIBES SINGAPORE 730337
6. Mailing Address	: -
7. Vehicle Registration No.	: PD3399U
8. Effective Date of Ownership	: 08 Feb 2021
9. Original Registration Date	: 08 Feb 2021
10. First Registration Date	: 08 Feb 2021
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	: VOLVO
17. Vehicle Model	: B8R AUTO
18. Year of Manufacture	: 2019
19. Primary Colour	: Multicolor
20. Secondary Colour	: -
21. Passenger Capacity	: 49
22. Chassis/Trailer Chassis No.	: YV3T7U527KA197581 / -
23. Propellant/Emission Standard	: Diesel / Euro VI
24. Engine No./Motor No.	: D8492650 / -
25. Engine Capacity(cc)/Power Rating(kW)	: 7698 / -
26. Maximum Power Output(kW/bhp)	: - / -
27. Unladen Weight(kg)	: 13540
28. Maximum Laden Weight(kg)	: 19000
29. Open Market Value	: \$140,000.00
30. PARF Eligibility	: No
31. PARF Eligibility Expiry Date	: -
32. Minimum PARF Benefit	: \$0.00



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)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : S111191019-03-000008

Cover : Comprehensive

- | | |
|--|------------------------|
| 1. Index mark and Registration Number of Vehicle | : PD3399U |
| Chassis Number | : YV3T7U527KA197581 |
| 2. Name of Policyholder | : AIK SHEN BUS SERVICE |
| 3. Effective Date of Insurance | : 23 Jul 2022 |
| 4. Expiry Date of Insurance | : 22 Jul 2023 |
| 5. Persons or Classes of Persons entitled to drive* | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her 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* | |
| (a) Use for the carriage of passengers in connection with the Policyholder's business. | |
| (b) Limited to carry 49 passengers | |

This 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.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$3,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : ODDS & EVEN (00000614917)

Date of Issue : 18 Jul 2022 10:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive