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SN0822AS0001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 28/10/2022 11:25 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (28/10/2022 11:25 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

28/10/2022 11:25 (SGT) Driver 27/10/2022 10:48 (SGT) Garden Ave, Singapore ROUND ABOUT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

PC1217E

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No

Yes SINGAPORE BUS CHARTER 5XXXX842J book@sgbus.com (Phone) +65-94579785

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission

LV434R

Isuzu

Employment

No - Claiming third party Bus Manual 7790

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd. DMB1SNW00003222200

DRIVER

CC

Name of Driver NRIC No Date Of Birth Occupation

RAMESH KRISHNAN SXXXX070D 25/04/1977 Outdoor

| Date Of Driving Pass | 31/01/2018 |
|--|-----------------------------|
| Driving experience | 4 YEARS AND 9 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-94579785 |
| Alt. Phone Number | (2) |
| Email Address | book@sgbus.com |
| Address | BLK 250 BANGKIT ROAD #02-34 |
| Address complement | • |
| Postcode | 670250 |
| 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) | 43 |
| Has the driver been approached by unknown person(s) | 467 |
| soliciting/offering accident claims assistance? | No |
| Translator's name | |
| Translator's ID | 29 |
| Translator's phone number | 2 |
| Toposlotore email | - |
| Original language used in the statement | * |
| PASSENGER 1 | UNKNOWN |
| Name | |
| Gender | Male |
| PASSENGER 2 | |
| Nemo | UNKNOWN |
| Name | Male |
| Gender | |
| PASSENGER 3 | |
| Name | UNKNOWN |
| Gender | Male |
| PASSENGER 4 | 2222 |
| Name | |
| Gender | Female |
| PASSENGER 5 | |
| Name | UNKNOWN |
| Gender | Female |
| PASSENGER 6 | |
| Name | UNKNOWN |
| Gender | Female |
| PASSENGER 7 | LINKNOWN |
| Name | UNKNOWN |
| Gender | Female |

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

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 | SMR3053D |
|---|--------------|
| Vehicle Manufacturer | |
| Vehicle Model | |
| Vehicle Variant | A |
| Vehicle Colour | |
| Vehicle Category | Private car |
| Name of Driver | 2 5 0 |
| Contact Number | |
| Address | 2 |
| Address complement | |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | 0.40 |
| Details of property damaged in accident | |
| No. Of Passenger (Including Driver) | 3 4 3 |

SKETCHPLAN

IMPORTANT NOTICE

- 1. Pease report correctly the details of the accident to speed up the claims process.
- 2. This Formment be completed by the Policyholder and/or the Authorised Driver.
- bicenution provided must be as <u>truthful</u> and accurate as possible. Any will interpresentation or withholding of material fasts 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 faire reporting may be referred to the Police for investigation
- 6. The report will be forwarded by the insurers of the GN Necords Management Centre established by the General Insurance Associatives of Segapore (GM) for archiving and that copies of this report will for a fee be made available upon epplication by interested parties.
- By the balgement of this report to the insurers, you hereby consent to the archiving of this report at the centre unit to copies of the report being made available aforesaid.
- B. 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") maylare permitted to cofect, use, disclose and/or process my personal data/personal information set exit in this [form) and any other personal information provided by me or possessed by my insurer (cofectively the "Personal Information") and disclose and transfer such Personal information to at insurer(s) who have insured vehicle(s) involved in this necklent (all insurer(s) who have insured vehicle(s) involved in this necklent shall be cofectively referred to as the "Insurers"), the insurers lawyers/aw firms, the Manetary Authority of Singapore and any relevant government agencylauthority (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.

- (i) investigating the accident ancier my claims;
- (ii) corrying out and/or dealing with my instructions or responding to any enquiries by mit;
- (iv) administering my claims (including the mining of correspondence, statements, invoices, reports or notices to mily which could involve disclosure of certain personal data about me to bring about delivery of the samulas wiet as on the external cover of envelopes/irmit packages), and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

- (b) at insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may late permitted to coffect, use, disclose and/or process my Personal information for one or more of the above Purposes; and
- (c) my Paraonal Information may/can be disclosed by any of the Insurers and/or GM to their third party service providers or agents (including their law yers/law firms), which may be seed outside of Singapore, for one or more of the above Purposes.

Bucyhokter's Signature / Date &

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

& Timo

1

Wenessed by Reporting Centre Personnel

-PCISITE

QE208 1MB-

Sketch Plan

CS CamScanner

| Describe Circumstances of the Accident On 27/10/2020 around to Ashvs, I ups drums my Bus PC 1217E along Gerden Ave Roundahout. I ups troubling in the roundahout as the presence is attend an event in RWS Hotel, the PIC can not confirm the Y as such my Bus was troubling at about 25tml h in side the roun Ven B SM-B3053D was behind my Rus. Guddenly ven B tried to over told my Rus and his against my Bus left side. | notel |
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Declaration

We declare the foregoing particulars are true in every respect.

Holeyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

| Road surface: Of Net | Usage of veh during | of accident: |
|--|--|--------------|
| Weather condition: Clear / Raining | | <u></u> |
| 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: Emplayer 3 Emplayer | | |
| Witness (if any): yes/no | ((| |
| Witness name: | | |
| Witness hp: | | |
| Witness email (if any): | | |
| Witness add: | | |
| | 34 | |
| Witness IC no: | | |
| Third party veh number: SMR 3053D | | |
| 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: NTUC | | 000 |
| | = 15 - 11 - 12 - 13 - 13 / 13 / 13 / 13 / 13 / 13 / 13 | 57/18/8/0/00 |
| Police report (if any): yes/no | | 57.00 |
| Police report reported at which police station: | | |
| Any intended prosecution given: yes /no | | |
| if yes, against whom: veh A /veh B driver | | 200101 |
| _ | | 535708422 |
| Action taken :claiming third party/ claiming own damag | ge / reporting only | 21. |
| No of Pax: 43 | Male | |
| A CONTRACTOR OF THE PARTY OF TH | L3 · Female | |
| Connect3 client vehicle no: PCI3176 | | |
| Owner contact no: 94579785 En | mail Address: Book@sa | -MOD-20d |
| Date of accident: 2711012002 | | |
| Location of accident: Gorden Ave rand about. | | |
| Time of accident : 10 48hvs | | |
| Any Injury: yes /no (If yes, must have police report) | | |



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Motor Bus

MZ601

SN

AN0740A

Cov. Type:F

| Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) |
|--|
| Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Maleysia) |
| Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia) |

CERTIFICATE OF INSURANCE

DMB1SNW00003222200 CERTIFICATE No.

Engine No.: 6HK1619455 Cha. No.: JALLV434CC7000010

1. Index Mark and Registration

PG1217E

Number of Vehicle

SINGAPORE BUS CHARTER 2. Name of Policy Holder

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment (00:00:00)

21/02/2022

Excess Sect. II

\$\$1,500.00

4. Date of Expiry of Insurance

22/02/2023

5. Persons or Classes of Persons entitled to drive*

Any 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. 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.: TATCO CREDIT PTE LTD

* 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: Chai Hullin Lynn Authorised Officer

Authorised Signatory

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

C 6389 6111

₱6222 1033

www.sg.cntaiping.com

Enquire Vehicle Transfer Fee

Vehicle Details Vehicle No. PC1217E Make / Model ISUZU / LV434R Vehicle Type: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus Vehicle Attachment 1: Air-Conditioned Vehicle Scheme: Public Service Vehicle (Others) Chassis No.: JALLV434CC7000010 Propellant: Diesel Engine No.: 6HK1619455 Motor No.: Engine Capacity: 7790 cc Power Rating:

Maximum Power Output:

| Maximum Laden Weight : |
|----------------------------------|
| 16800 kg |
| Unladen Weight : |
| 12660 kg |
| Year Of Manufacture : |
| 2011 |
| Original Registration Date : |
| 03 Jul 2012 |
| Lifespan Expiry Date : |
| 02 Jul 2032 |
| COE Category: |
| C - Goods Vehicle & Bus |
| PQP Paid: |
| \$43,284.00 |
| COE Expiry Date : |
| 29 Feb 2032 |
| Road Tax Expiry Date : |
| 22 Feb 2023 |
| PARF Eligibility Expiry Date: |
| 2 |
| Inspection Due Date : |
| 22 Feb 2023 |
| Intended Transfer Date : |
| 05 Sep 2022 |
| CO2 Emission : |
| |
| CEV/VES Rebate Utilised Amount : |
| • |
| CO Emission : |
| ~ |
| HC Emission: |
| 2 0 |
| NO. Farissian |

NOx Emission:

PM Emission:

Fees To Be Paid For Transfer

Transfer Fees \$25.00

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