

NATIONAL Assessment Centre Services (011 721 1111) **SMR 822A 80001**

Date Recd: **28/10/2022** 11:28
 Ref No: **NBA/C1722010679/Y**
 Vch No: **PC 1217E**
 D.O.A: **27/10/2022** 10:48
 CC: **(7)** Reporting Only

Job Description: **SAS e-filing**
 E-mail (within 2hrs. A.C. Serv)
 I-Motor Claim Form
 I-Motor W/O (within 22 hrs. A.C. Serv)
 I-Photo Uploaded
 Assessment/Survey Report
 Ass't Report by Fax / Hand to Owner/Whse

Preferred Wksp / INC Assgn Wksp / CW: ()
 Tel: () Fax: ()

TP Particulars: Vch No: **SMR 3053D** INC: () / Non-INC: ()
 Owner / Driver: ()
 Policy No: () Period: () Cover Type: ()
 Confirmed by: () Date: () Time: ()
 Insured Driver's License: () (Note: Not Status (W/O) N 0-2011 P 21-722 P 30-11014)
 Year of Registration: () Warranty: YES () / NO ()
 Excess: \$ () Loading: \$1,000 () / \$2,000 ()

General Remarks: ()
 () With-In Customer: Customer's Information strictly Confidential & Strictly NO refer of reporter.
 () Total Loss Case: to e-mail Insurer URGENTLY.
 Draw-In: () Tow-In: () Invoice: YES () / NO () Towing Cost: ()
 Remarks: () (INC Hotline: 6783 6618)
 1) Apply for Transport Allowance () / Courtesy Car ()
 2) QO Check / Post Repair Inspection ()
 3) Upload Recovery Photo (Repair Cost > \$3000) ()

Injury: ()
 Date Time: ()
 Location: ()

X/A2203021

Invoice Preparation Checklist

1) AR - Accident Report (135)	INC (155)
2) DA - Damage Assessment (110)	INC (155)
3) TP - Towing Fee	\$10.00
4) PT - Follow Through (110)	\$10.00
5) PT - Follow Through - Courtesy (110)	\$10.00
6) TR - Recovery (110)	\$10.00
7) TR - Recovery - Courtesy (110)	\$10.00
8) TR - Recovery - Courtesy (110)	\$10.00
9) TR - Recovery - Courtesy (110)	\$10.00
10) TR - Recovery - Courtesy (110)	\$10.00
11) TR - Recovery - Courtesy (110)	\$10.00
12) TR - Recovery - Courtesy (110)	\$10.00
13) TR - Recovery - Courtesy (110)	\$10.00
14) TR - Recovery - Courtesy (110)	\$10.00
15) TR - Recovery - Courtesy (110)	\$10.00
16) TR - Recovery - Courtesy (110)	\$10.00
17) TR - Recovery - Courtesy (110)	\$10.00
18) TR - Recovery - Courtesy (110)	\$10.00
19) TR - Recovery - Courtesy (110)	\$10.00
20) TR - Recovery - Courtesy (110)	\$10.00

Checked by (Engr-In-Charge): ()
 Date: ()

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	28/10/2022 11:25 (SGT)
Reported by	Driver
Date of Accident	27/10/2022 10:48 (SGT)
Exact Location of Accident	Garden Ave, Singapore
Additional Location Information	ROUND ABOUT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC1217E

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SINGAPORE BUS CHARTER
Company Reg No	5XXXX842J
Email Address	book@sgbus.com
Mobile Phone No	(Phone) +65-94579785
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	LV434R
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	DMB1SNW00003222200

DRIVER

Name of Driver	RAMESH KRISHNAN
NRIC No	SXXXX070D
Date Of Birth	25/04/1977
Occupation	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	-
Email Address	book@sgbus.com
Address	BLK 250 BANGKIT ROAD #02-346
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) 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	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Male

PASSENGER 3

Name	UNKNOWN
Gender	Male

PASSENGER 4

Name	UNKNOWN
Gender	Female

PASSENGER 5

Name	UNKNOWN
Gender	Female

PASSENGER 6

Name	UNKNOWN
Gender	Female

PASSENGER 7

Name	UNKNOWN
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

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 -
 Vehicle Colour -
 Vehicle Category Private car
 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

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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. 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 lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of this 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 Ministry 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 filing 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

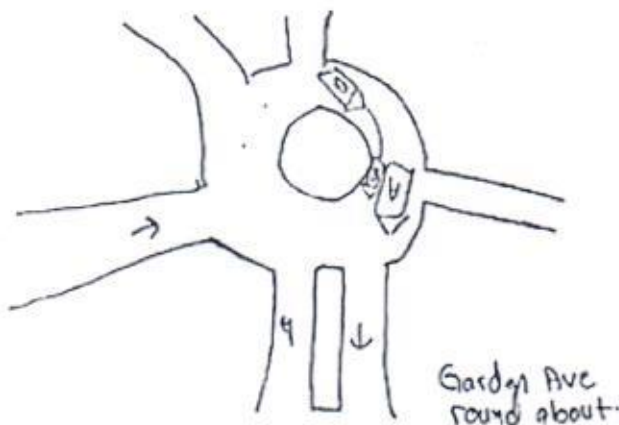
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time

Sketch Plan


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


Witnessed by Reporting Centre Personnel



A-PC1017E

B-SMR 3053D


Describe Circumstances of the Accident


ON 27/10/2022 around 10 AM hrs, I was driving my BUS PC1217E along Garden Ave Roundabout. I was traveling in the roundabout as the passenger is attend an event in RWS Hotel, the PIC can not confirm the hotel as such my bus was travelling at about 25km/h inside the roundabout. VEH B SM-B3053D was behind my bus. Suddenly VEH B tried to over take my bus and hit against my bus left side.

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

Road surface: Dry / Wet
Weather condition: Clear / Raining
Speed: _____

Usage of veh during of accident:

Does driver own a vehicle: yes/no
if yes, veh number plate: _____
veh insurance co: _____

Driver IC:
Driver Name :
Driver Pass date :
Driver Birth date :

Relationship with insured: Employee Employed
Witness (if any): yes/no
Witness name: _____
Witness hp: _____
Witness email (if any): _____
Witness add: _____
Witness IC no: _____

Third party veh number: SMB 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: NRUC

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: 43

20 Male
13 Female

Connect3 client vehicle no: PC1217E
Owner contact no: 94579785
Date of accident: 27/10/2022
Location of accident: Gordon Ave roundabout
Time of accident: 10 48hrs
Any Injury: yes/no (If yes, must have police report)

Email Address: Boot@sgbus.com

572880700

533798425

Motor Bus

MZ601

E SN

AN0740A

Cov. Type:F

CERTIFICATE OF INSURANCEMotor 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)

Engine No.: 6HK1619455

Cha. No.: JALLV434CC7000010

CERTIFICATE No.

DMB1SNW00003222200

1. Index Mark and Registration
Number of Vehicle

PG1217E

2. Name of Policy Holder

SINGAPORE BUS CHARTER

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment21/02/2022
(00:00:00)

Excess Sect. II S\$1,500.00

4. Date of Expiry of Insurance

22/02/2023

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.: 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 Hui Lin Lynn
Authorised Officer
Authorised Signatory

[> Back to OneMotoring](#)

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 :

-

Inspection Due Date :

22 Feb 2023

Intended Transfer Date :

05 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

Print

OK →

Save as PDF

Copy as Text