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VERSION: 1 (25/11/2022 11:29 (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 25/11/2022 11:29 (SGT) Reported by Driver Date of Accident 24/11/2022 16:01 (SGT) **Exact Location of Accident** Sentosa Cove, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

CB8506J Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? Yes HONG YUN BUS SERVICES PTE. LTD. Name Of Registered Owner Company Reg No 2XXXXX457Z **Email Address** hongyunbus.services@outlook.sg Mobile Phone No (Phone) +65-96216653 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Golden Dragon Model XML6118E1A 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?

Private car Vehicle Category Transmission Auto

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. DMB1SNW00012002200 Policy Number / Cover Note Number

8849

DRIVER

CC

Name of Driver **WU TONG** Passport No/FIN GXXXX928L Date Of Birth 28/11/1979 Occupation Outdoor

Date Of Driving Pass Driving experience Gender	15/04/2017 5 YEARS AND 7 MONTHS Male
Mobile Number Alt. Phone Number	(Phone) +65-80381105
Email Address Address	hongyunbus.services@outlook.sg
Address complement	-
Postcode	
Is the driver the policyholder? If No, Relationship of the Driver with the Insured	No
Does Driver Own Other Vehicles?	Employee No
Vehicle Registration Number of Other Vehicle Owned by Driver	140
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Hit by fallen tree / Other objects
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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)	25
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance? Translator's name	No
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 Gender	UNKNOWN Female
PASSENGER 5	remale
	LINUALOWAL
Name Gender	UNKNOWN Female
PASSENGER 6	
Name	UNKNOWN
Gender	Female
PASSENGER 7	
Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

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?
Reasons for not uploading a video of the accident

Yes Yes

FILE TOO BIG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category NA / Unknown Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident **BARRIER** No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the excellent to spreed up the others process.
- 2 The Formulator sompleted by the Policyholder andler the Authorised Print.
- 3 his mainterpretation as truthful and account at partible. Any wild reserves market or with reserved market as the profit acts may
- 4. The nave and accompanied this Formby insurance contained in recian attractor of today lability on the part of the insurance contands
- S Any Islan taparlina maybe relatived to the Police for investigation
- 6. The resorting Configurational by the insurers of the GN Resorts Unsuperior Configuration by the General Insurance Association of Septimen (CM) for producing and that opens of the region is 1 for a few to emphasization open application by interested parties.
- 1. By the latigemental and report to the inspects, you hereby consent to the archaery of the report at the centre and to copies of the refer to my mote analytic afternast
- & Consent under the Personal Dala Protection Act (POPA)

(a) My insurer, my wienested and the General Esseance Association of Englishing (GIA') maybre permitted to collect use, doclese and the process my personal data personal information action in the figure and any other personal information provided by me or concessed by my neutron deal personal incommon sched in the [lond] and any other personal information provided by nic or possessed by my insurer (collectively a differential Information) and disclose and transfer such Respect Mismotion (pat insurer(s) and disclose an assistant such Respect Mismotion (pat insurer(s) and disclose an assistant such Respectively and the patients of the such assistant and assistant and assistant and assistant such assistant and assistant assistant and assistant assis collectively referred to as the "Insurers") DA Howers that yershire from the New Yactoring of Groppers and any respect designations bear a research (such as the solver). In the entire (2) of

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(v) complying with applicable law in approximationing, processing, handling are or dealing with my claims. בשרבו (מינים בינים

(b) all naturer(s) who have insured vehicle(s) two/yed in this accident and the latituders' towards have force, may are permitted to collect.

use disclose and or process my Personal Information for one or expect the above Purposes, and

(c) my Personal Education may can be doubted by any of the Endieds and it GM to their third party service provides or agents (noticing their the pers law family misch may be seed outside of Singapore, for one or more of the above Purposes.

Dig mer's Syame / Die &

Sketch Plan

Directs Equipme (I direct in not the policytelter) I Date

Partrel

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Sentosa Cove

Describe Circumstances of the Accident
On 24/1/2022 acround 16-01/175, I was driving my my and
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Declaration

IWe decline the foregoing functions are two in every respect.

Pelcynocers Synature / Dato & Time

Direct's Separate (I direct is not the policyholder) / Date & This

Road surface (Dr) / Wet	Usage of veh during	of accident:
Weather condition: (le)r / Raining	**************************************	garcian direction and constitution
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: Employer 36mployer	***	
Witness (if any): yestno		
Witness name:		
Witness hp:		
Witness email (if any):		
Witness add:		
Witness IC no:		
•		
Third party veh number: Borrier		
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:		
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		
4		
Action taken : claiming third party claiming own dar		
No of Pax: 75	Male	
CR OCAL 1	Female	
Connect3 client vehicle no: CB 85061.	- Hannahin	0
Owner contact no: 96 21 6653	Email Address: Hangyun bus	28. 2001 from 18 sources
Date of accident: 24/11/2022		
Location of accident: Seutosa Cove.		
Time of accident: 1601 hrs.		
Any Injury: yes /no (if yes, must have police report)		

Motor Bus

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, 1967 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MZ601

SN

AN0735A

Cov. Type:F

CERTIFICATE No.

DMB1SNW00012002200

Engine No.: ISLE432021836856

Index Mark and Registration

Cha. No.:LFZBHCDK1BA001421

2. Name of Policy Holder

Number of Vehicle

CB8506J

HONG YUN BUS SERVICES PTE LTD

Effective date of the Commencement of insurance for the purposes of the Regulations, Ordinance or Enactment

16/08/2022 (00:00:00)

Excess Sect. II

\$\$1,500.00

4. Date of Expiry of Insurance

15/08/2023

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.

*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: SSTA INSURANCE AGENCY PTE LTD

Authorised Officer

Authorised Signatory

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

Q6389 6111

6222 1033

www.sg.cntaiping.com



Vehicle Registration Details

Vehicle No. CB8506J	Make/ Model GOLDEN DRAGON /XML6118E1A	Vehicle Scheme School Bus with AWC
Current Propellant Diesel	Chassis No. LFZBHCDK1BA001421	Vehicle Type School Transport Bus /Coach/Minibus

Owner's Details

Owner Name:

HONG YUN BUS SERVICES PTE. LTD.

NRIC/Passport/Company Cert No.:

201433457Z

Mailing Address:

Registration Details

Previous Vehicle No.:

Original Registration Date:

16 Aug 2011

No. of Transfers:

1

Vehicle Specifications

Engine No.:

ISLE432021836856

Year of Manufacture:

2011

Owner ID Type:

Company

Registered Address

APT BLK 120C RIVERVALE DRIVE #11-400 RIVERVALE GARDENS SINGAPORE 543120

Birth Date

Effective Date of Ownership:

22 Apr 2015

Registration Date:

16 Aug 2011

IU Label No.:

2050091633

Chassis No.:

LFZBHCDK1BA001421

Primary Colour:

Multicolor

Secondary Colour:	Passenger Capacity:
-	49
Engine Capacity / Power Rating :	Maximum Power Output:
8849 cc / -	-
Max Unladen Weight:	Maximum Laden Weight:
11940 kg	16000 kg
Vehicle Attachment 1:	Vehicle Attachment 2:
Air-Conditioned	-
Vehicle Attachment 3:	
-	
Additional Registration Fee (ARF) and COE Information	on
Open Market Value:	Additional Registration Fee Rate:
\$121,903.00	5.00 %
Actual ARF Paid:	Vehicle Lifespan Expiry Date:
\$6,096.00	15 Aug 2031
OPC Cash Rebate Eligibility:	QP during COE Bidding Exercise:
No	-
COE No.:	
•	
PARF Rebate Details	
PARF Eligibility:	PARF Eligibility Expiry Date:
No	-
Minimum PARF Benefit:	
-	
Vehicle Emissions Details	
CO2 Emission:	
-	
CO Emission:	HC Emission:
NOx Emission:	PM Emission:
_	-

Message:

This is a public service vehicle.

Printed on 15 Aug 2021 14:51:44

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