

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	18/04/2023 17:08 (SGT)
Reported by	Actual Driver
Date of Accident	14/04/2023 13:50 (SGT)
Exact Location of Accident	Boundary Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC4541Z

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KAYE TRANSPORT SERVICE PRIVATE LIMITED
Company Reg No	2XXXXX969W
Email Address	lingweitpt93@yahoo.com.sg
Mobile Phone No	(Phone) +65-86083085
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Rosa
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	2998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMB1SNW00020182200

DRIVER

Name of Driver	RAJINDE KAUR D/O THARAM SINGH
NRIC No	SXXXX372I
Date Of Birth	08/07/1987
Occupation	Outdoor

Date Of Driving Pass	23/01/2009
Driving experience	14 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-86083085
Alt. Phone Number	-
Email Address	lingweitpt93@yahoo.com.sg
Address	BLK 491 ADMIRALTY LINK #06-183
Address complement	-
Postcode	750491
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 - Head to Rear
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)	4
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	Female

PASSENGER 3

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
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Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH2427E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WONG LEE YING
NRIC No	SXXXX656C
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

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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.

(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.

X



Policyholder's Signature / Date & Time

Sketch Plan

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

Boundary Road

Witnessed by Reporting Centre Personnel

[Signature] 18/06/2023

(A) PC4541Z

(B) SLH 2427E



RJ

Send/Fax to: _____

Submitted: _____

SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION			
Date of Accident:	14/04/2023	Time of Accident:	13:50 Hr
Exact Location:	Boundary Road		

DETAILS OF OWN VEHICLE			
Vehicle Registration No.	PC 4541Z	NRIC / FIN / Passport no:	202100969W
Name of Registered Owner:	Kaye Transport Service Private Limited		
Owner's Email:	lingwei@pt93@yahoo.com.sg		
Owner's Address:	187 Bukit Batok West Avenue 6 #12-151 Singapore 650187		
Vehicle Make:	Mitsubishi	Vehicle Model:	Rosa Bus BE641 JRM DEB.
Engine Capacity (cc):	2998 cc	Transmission:	(Auto) Manual
Type of Claim:	Own Damage / <u>Third Party</u> / Reporting Only		
Vehicle Category:	Private / <u>Commercial</u> / Motorcycle / Private Hire		
Name of Insurance Co:	China Taiping Insurance (Singapore) Pte Ltd.		
Type of Policy:	<u>Comprehensive</u> / Third Party / Third Party, Fire & Theft		
Policy Number:	DMB15NW00020182200		

DRIVER			
Name of Driver:	Rajinder Kaur D/O Tharam Singh	<input type="checkbox"/>	same as owner
NRIC / FIN / Passport no:	S8724372I	Date of Birth:	18/07/1987
Occupation:	Indoor / <u>Outdoor</u>	Driving Pass Date:	23/01/2009
Contact Number:	86083085	Gender:	Male / Female
Address:	Blk 491 Admiralty Link #06-193 Singapore 750491		
Relationship with Owner:	Owner / <u>Employee</u> / Spouse / Child / Hirer / Other:		
Translator Name:		Translator NRIC:	
Translator Contact no:		Translator email:	

GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision:	Chain collision / Side Swipe / <u>Front to Rear</u> / Others:		
Weather Condition:	<u>Clear</u> / Raining / Others:	Road Surface:	<u>Dry</u> / Wet
Video available:	Yes / <u>No</u>		
Was anybody injured?	Yes / <u>No</u>	Police Report Made?	Yes / <u>No</u>
No. of passenger onboard (including driver):	04	02 - Female	01 - Male

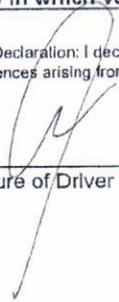
DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	SLH2427E		
Vehicle Make / Model:	-		
Name of Driver:	Wong Lee Ying		
NRIC / FIN / Passport no:	S7920656C		
Contact Number:	-		
Name of Insurance Co:	-		

DETAILS OF WITNESS	
Name:	Contact Info:

DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / in which vehicle?:			

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.

Signature of Driver




Date and time

Motor Bus

MZ601

N SN

AN0580A

Cov. Type:C

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

CERTIFICATE No.	DMB1SNW00020182200	Engine No.: 4P10B82431 Cha. No.:BE641JK30093
1. Index Mark and Registration Number of Vehicle	PC4541Z	AUTOSAFE =====
2. Name of Policy Holder	KAYE TRANSPORT SERVICE PRIVATE LIMITED	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	14/12/2022 (09:35:16)	Excess Sect. I . S\$2,000.00 Excess Sect. II S\$1,000.00 EX ON WINDSCREEN . S\$500.00
4. Date of Expiry of Insurance	13/12/2023	
5. Persons or Classes of Persons entitled to drive*	<p>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.</p>	
6. Limitations as to use:*	<p>Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Schedule.</p> <p>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.</p>	
<p>HIRE PURCHASE CO. : BOARDINGHOUSE 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.</p>		

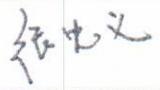
I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: _____

 ODDS & EVEN
 Authorised Officer

_____ 
 Authorised Signatory

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.
PC4541Z

Make / Model
mitsubishi / ROSA BUS BE641JRMDEB

Vehicle Type :	Vehicle Attachment 1 :
Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus	Air-Conditioned
Vehicle Scheme :	Chassis No. :
Public Service Vehicle (Others)	BE641JK30093
Propellant :	Engine No. :
Diesel	4P10B82431
Motor No. :	Engine Capacity :
-	2998 cc
Power Rating :	Maximum Power Output :
-	-
Maximum Laden Weight :	Unladen Weight :
6040 kg	4020 kg
Year Of Manufacture :	Original Registration Date :
2015	15 Jan 2016
Lifespan Expiry Date :	COE Category :
14 Jan 2036	C - Goods Vehicle & Bus
PQP Paid :	COE Expiry Date :
\$13,501.00	14 Jan 2026
Road Tax Expiry Date :	PARF Eligibility Expiry Date :
13 Jun 2023	-
Inspection Due Date :	Intended Transfer Date :
13 Dec 2023	18 Apr 2023
CO2 Emission :	CEV/VES Rebate Utilised Amount :
-	-
CO Emission :	HC Emission :
-	-
NOx Emission :	PM Emission :
-	-