



## QUOTATION

Customer :

NO. : 46928

INDIA INTERNATIONAL INSURANCE P.L.  
64 CECIL STREET  
#04-00 & #06-00  
IOB BUILDING  
SINGAPORE 049711

DATE : 27/06/2024  
CLAIM NO. : 12526  
POLICY NO. :  
FROM : RAYMOND

VEHICLE NO. : FBH3806G  
MAKE/MODEL : HON / PCX150 A

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	COVER FOOTREST LH P/N: 49600 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$85.00	85.00
2	COVER FRONT UPPER - (REPORTED BY MECHANIC)	REPLACE	1.00	\$85.00	85.00
3	COVER SIDE LOWER LH - (REPORTED BY MECHANIC)	REPLACE	1.00	\$85.00	85.00
4	COWLING FRONT LH - (REPORTED BY MECHANIC)	REPLACE	1.00	\$162.00	162.00
5	HEADLAMP ASSY - (REPORTED BY MECHANIC)	REPLACE	1.00	\$778.00	778.00
6	LABOUR P/N: 06766 - LABOUR QUOTED FOR DISMANTLING AND INSTALLATION OF PARTS.	Supply/Install	6.00	\$85.00	510.00
7	MIRROR LH - (REPORTED BY MECHANIC)	REPLACE	1.00	\$40.00	40.00
8	MUDGUARD FRONT (WHITE) P/N: 49588 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$91.00	91.00
9	SPRAY PAINT COVER SETS AND REAR BOX - (REPORTED BY MECHANIC)	Spray	1.00	\$1,067.00	1,067.00

\*46928 \*



<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
10	STAND MAIN - (REPORTED BY MECHANIC)	REPLACE	1.00	\$78.00	78.00
11	STAND SIDE - (REPORTED BY MECHANIC)	REPLACE	1.00	\$38.00	38.00
12	STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT P/N: 32921 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$30.00	30.00
13	WINDSHIELD (GIVI) - (REPORTED BY MECHANIC)	REPLACE	1.00	\$404.00	404.00

SUB TOTAL

\$3,453.00

GST @ 9 %

\$310.77

GRAND TOTAL (SGD)

\$3,763.77

**50% deposit required before ordering of parts.**

Validity: 30 days

For &amp; on Behalf of

Acknowledge &amp; Accepted By

BAN HOCK HIN CO PTE LTD



RAYMOND

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.

\*46928 \*

bizSAFE<sub>3</sub>

## Vehicle Details

Vehicle No.	Make / Model
<b>FBH3806G</b>	<b>HONDA / WW150</b>
Vehicle Type :	Vehicle Attachment 1 :
<b>P01 - Passenger Scooter</b>	<b>No Attachment</b>
Vehicle Scheme :	Chassis No. :
<b>Normal</b>	<b>MLHKF12A9C5002854</b>
Propellant :	Engine No. :
<b>Petrol</b>	<b>KF12E2013040</b>
Motor No. :	Engine Capacity :
<b>-</b>	<b>153 cc</b>
Power Rating :	Maximum Power Output :
<b>-</b>	<b>-</b>
Maximum Laden Weight :	Unladen Weight :
<b>309 kg</b>	<b>129 kg</b>
Year Of Manufacture :	Original Registration Date :
<b>2013</b>	<b>05 Jun 2013</b>
Lifespan Expiry Date :	COE Category :
<b>-</b>	<b>D - Motorcycle</b>
PQP Paid :	COE Expiry Date :
<b>\$11,596.00</b>	<b>31 Mar 2033</b>
Road Tax Expiry Date :	PARF Eligibility Expiry Date :
<b>04 Jun 2025</b>	<b>-</b>
Inspection Due Date :	Intended Transfer Date :
<b>04 Jun 2025</b>	<b>29 Jun 2024</b>
CO2 Emission :	CEV/VES Rebate Utilised Amount :
<b>-</b>	<b>-</b>

# 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 First Submission	25/06/2024 17:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	25/06/2024 12:50 (SGT)
Exact Location of Accident	209 Hougang St 21, Singapore 530209
Additional Location Information	209 HOUGANG ST 21 - CAR PARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH3806G
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG KIAN HO
NRIC No	SXXXX539C
Email Address	kentng777@yahoo.com
Mobile Phone No	(Phone) +65-81213299
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Pcx150a
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	150

### INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	-

### DRIVER

Name of Driver	NG KIAN HO
NRIC No	SXXXX539C
Date Of Birth	03/01/1965
Occupation	Indoor

Driving Pass Date .....	14/07/1992
Driving experience .....	31 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81213299
Alt. Phone Number .....	-
Email Address .....	kentng777@yahoo.com
Address .....	11 YIO CHU KANG ROAD
Address complement .....	#02-12 SPACE @ KOVAN
Postcode .....	545679
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
Does Driver Own Other Vehicles? .....	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver .....	FBW3156D
Insurance Company of Other Vehicle Owned by Driver .....	Liberty Insurance Pte Ltd

#### 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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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 .....	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO TRAFFIC ACCIDENT REPORT NO. T/20240625/7058 ATTACHED

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	YR1029X
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	White
Vehicle Category .....	Goods vehicle
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) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	NG KIAN HO
Gender .....	Male
Phone No .....	(Phone) +65-81213299
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	FBH3806G
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

**3. 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;

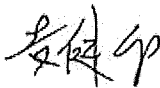
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or


(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

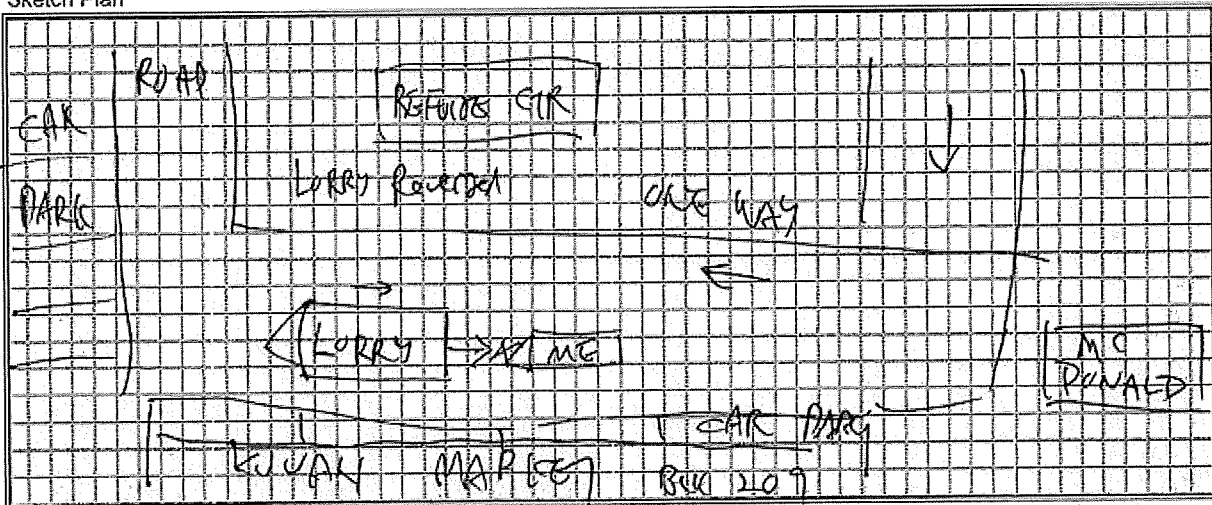
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card) *Tan Chon Kiat/252*

**Sketch Plan**



WJun2022

1

Describe Circumstance of the Accident

Refer to Traffic Accident Report NO. T/20240625/7058 attached

I/We declare the foregoing particulars are true in every respect.

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Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card) Tan Chor Lee 7352





**SINGAPORE  
POLICE FORCE**



T/20240625/7058

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20240625/7058

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/06/2024 15:20	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: Ng Kian ho			Address: 11 YIO CHU KANG ROAD #02-12 SPACE @ KOVAN SINGAPORE 545679		
ID Type / ID No.: NRIC NO / S2590539C			Contact No.: Home/Office: Mobile: 81213299		
Nationality: SINGAPORE CITIZEN			Email: kentng7a@yahoo.com		
Sex: Male	Age: 59	Date of Birth: 03/01/1965	Type of Informant: Rider		
Race: Chinese			Language: English		
Occupation: station manager			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/06/2024 12:50	Type of Location: Car Park
Location:  HOUGANG STREET 21				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH3806G	Motorcycle	HONDA		Grey	Slightly Damaged	0
YR1029X	Lorry	TOYOTA			No Damage	2

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBH3806G	Budget direct			

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 28 Jun 2024 / 16:38:18  
Receipt Date/Time : 28 Jun 2024 / 16:38:18

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-240628-003592

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - YR1029X As at 25 Jun 2024/12:50:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - YR1029X Enquiry Fee 20240628163636695086	25.00	2.25	27.25
Sub-Total		25.00	2.25	27.25
Total Before Rounding		25.00	2.25	27.25
Rounding Difference				0.00
Total Amount Payable				27.25
Paid By				
20240628163645257		Direct Debit: eNETS Debit (Internet Banking)		27.25
Total				27.25
Cash Change				0.00
Tendered Amount				27.25
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.