



BAN HOCK HIN
Co., Pte Ltd

Co.Reg.No: 197000288K
MOTORCYCLE ACCESSORIES | SERVICE CENTRE
MODIFICATION | SPRAY PAINTING AND BODY WORK | METAL
WORKS | LEASING & RENTALS | FLEET SALES | INSURANCE SALES

QUOTATION

*mech 159
Narfan*

Customer :

NO. : 48507

CHINA TAIPING INSURANCE (S) PTE LTD

105 CECIL STREET

#18-00 / 19-00

THE OCTAGON

S'PORE 069534

ATTN: CHINA TAIPING INSURANCE (S) PTE LTD

DATE : 10/12/2024

CLAIM NO. : 12677

POLICY NO. :

FROM : MIGNON

VEHICLE NO. : FBL6652S

MAKE/MODEL : YAM / MTM850A(XSR900)

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	Alignment front fork n Handlebar - (REPORTED BY MECHANIC) <i>Local Rpr 187</i>	Repair	1.00	\$186.00	186.00 ✓
2	BEARING REAR WHEEL (6204) <i>✓ PC</i> P/N: 38880 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$48.00	48.00
3	COVER ENGINE (GB RACING) SET <i>✓ CVT</i> P/N: 80376 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$1,008.00	1,008.00
4	LABOUR P/N: 06766 - LABOUR QUOTED FOR DISMANTLING AND INSTALLATION OF PARTS	Supply/Install	6.00	\$85.00 <i>55</i>	510.00
5	MID BEARING (B6004Z) <i>(Rim bang) ✓ MC</i> P/N: 22614 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$40.00	40.00
6	RIM REAR ASSY <i>(Rim bang) ✓ MC</i> - (REPORTED BY MECHANIC)	REPLACE	1.00	\$1,138.00	1,138.00
7	RUBBERPE PEDAL GEAR - (REPORTED BY MECHANIC) <i>✓ CVT</i>	REPLACE	1.00	\$124.00	124.00
8	SEAL OIL <i>✓ MC</i> P/N: 65151 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$12.00	12.00
9	SHOCK ABSORBER REAR (OHLINS) <i>✓ BT</i> - (REPORTED BY MECHANIC)	REPLACE	1.00	\$3,410.00	3,410.00



bizSAFE



Blk 8 Defu South Street 1, #04-28, JTC Defu Industrial City, Singapore 533758 | Tel: +65 6281 6520 | www.bhh.com.sg
Fax: (Main) + 65 6281 2830, (Spare Parts) + 65 6285 7530, (Insurance/Project) + 65 6284 2969, (Accounts) + 65 6281 6759

CERT NO.: 2002 1 0383
ISO 9001:2015

S/N	Description	Action	Qty	Unit Price	Amount
10	SLIDER FORK FRONT P/N: 35324 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$217.00	217.00
11	SLIDER REAR AXLE - (REPORTED BY MECHANIC)	REPLACE	1.00	\$217.00	217.00
12	STAND SIDE P/N: 53749 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$107.00	107.00
13	VALVE TYRE 11.3MM BLUE (RACING VALVE) P/N: 41896 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$40.00	40.00

SUB TOTAL

\$7,057.00

GST @ 9 %

\$635.13

GRAND TOTAL (SGD)

\$7,692.13

50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD



MIGNON

Acknowledge & Accepted By

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

Steve (LKK)
11/12/24, 12.00am
m l
P/P
L BLSM
2 days



LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

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CERT NO.: 2002 10383
ISO 9001:2015

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 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. 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	09/12/2024 13:39 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/09/2024 18:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Twin Waterfalls Condo, 110 Punggol Walk Foyer
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL6652S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHIA ZHEN MING
NRIC No	SXXXX245F
Email Address	JAMESZCHIA@GMAIL.COM
Mobile Phone No	(Phone) +65-92277622
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	MTM850A (XSR900)
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	Manual
CC	847
Vehicle Fuel	Petrol
First Registration Date	02/02/2017
Chassis no	JYARN431000007738
Effective Date/Time of Ownership	03/02/2017 10:02 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MC00893999/03

DRIVER

Name of Driver	CHIA ZHEN MING
NRIC No	SXXXX245F
Date Of Birth	31/12/1985
Occupation	Indoor
Driving Pass Date	30/12/2016
Driving License Pass Class	2
Driving License Validity	Valid
Driving experience	7 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92277622
Alt. Phone Number	-
Email Address	JAMESZCHIA@GMAIL.COM
Address	BLK 553 PASIR RIS STREET 51 12-111 SINGAPORE 510553
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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)	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	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to sketch Plan

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	GBL1535E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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)	-

Describe Circumstance of the Accident

Refer to Police Report No. F/20240927/7111 &
F/20241205/7067.

Declaration

We declare the foregoing particulars are true in every respect.

JP 09/12/24 1:16 PM
Police Officer's Signature / Date & Time

Policyholder's Signature / Date & Time

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


Gan Lay Peng
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

2

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 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 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.

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.

[Signature] 9/12/24 1:16PM

Policyholder's Signature / Date & Time

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

[Signature]
Gan Lay Peng

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

