

ASS. REC. BY:

REF: CS/U017015768/Rlg622

Special Instruction:

Surveyor

Resul.

ASSIGNMENT (Office)

From (Person): lets of U01 Date/Time: 15/8/17

Estimated Cost: _____ Bill to: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: FBA 8773X Insured: SFB 66884at Workshop m/s SG 98 motor Tel: 6452 4892 ROSEof ANNAPolicy No: DHOM110113761106 Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 11/8/17
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 15082017 1.32pm Person Contacted: ROSE Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	FBA 8773X - NJAI / INC 0804991 / W1
	SFB 6633U - X

DIA: 690508

Rasul

REF:

UOL

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured

Policy No:

Claims No:

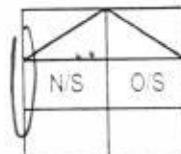
Sum Insured: _____ Excess

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
 repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt. Consistent? : Yes or No

GIA / PR Seen. Consistent? : Yes or No

Est. Repairs: 3 days Res. Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: **FBA 8773X** Yr Regn: **20 sept 2006**Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **YAMAHA T135** c.c. **135**Colour: **BLUE** A/C Insured / Std / NI / NASp. Reading: **77409** T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: **5YP 206703**Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **70/90-17**R: **80/90-17**BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

Rear

R/Bal. **3** mm R/Bal. **3** mm

L/Bal. mm L/Bal. mm

D.O.A. **11/08/17** D.O.I. **15/08/17**Survey held at **SA MOTUL**Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

45 \$ 800 (Red: 1261.60, 6/17).

Date/Time File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time File Return to?

2)

Days Of Repair: **3**

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Weekend (\$)

Survey Fee:

Transportation:

) S + RS: \$

) Photos

) Others

TOTAL

Report Format: **TP**Lump Sum / I.B.I: (\$ **800**)**110****50****51****211**



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

UNITED OVERSEAS INSURANCE LTD

Ref : CS/UOI17015768/R1gb

3 ANSON ROAD #28-01
SPRINGLEAF TOWER SINGAPORE 079909

Date : 15-08-2017



Code : UOI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SFB 6688U	Veh. Inspected	FBA 8773X
Policy No.	DHOM110113761106	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	FELIS	Assign Date	15/08/2017

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

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5. General Information

Accident Date	11/08/2017	Inspection Date	15/08/2017
Survey held at	SG 98 MOTOR PTE LTD BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21 SINGAPORE 569622		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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Text size + -

Enquire PARF/COE Rebate for Registered Vehicle**Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 1887Z

Vehicle Details

Vehicle No.: FBA8773X
Vehicle to be Exported: No
Intended De-registration Date: 18 Aug 2017
Vehicle Make: YAMAHA
Vehicle Model: T135
Primary Colour: Black
Manufacturing Year: 2006
Engine No.: 5YP206703
Chassis No.: 5YP206703
Maximum Power Output: -
Open Market Value: \$1,827.00
Original Registration Date: 20 Sep 2006
First Registration Date: 20 Sep 2006
Transfer Count: 1
Actual ARF Paid: \$275.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 19 Sep 2021
COE Category: D - Motorcycle
COE Period(Years): 5
PQP Paid: \$3,124.00
COE Rebate Amount: \$2,611.00

Total Rebate Amount: \$2,611.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 18 Aug 2017



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Last updated on 13 Aug 2017 at 12:41 AM

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 Authorised 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 ability.
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 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 Report	16/08/2017 10:16
Date Of Accident	11/08/2017 18:05
Exact Location Of Accident	ENG NEO AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA8773X
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD FARIS BIN FAISAL
NRIC No	S8851887Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84432027
Alternative Phone No	OFFICE-84432027

Vehicle Particulars

Manufacturer	YAMAHA
Model	LC 135 SPARK
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	D-16085777MYCE
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FARIS BIN FAISAL
NRIC No	S8851887Z
Date Of Birth	25/12/1988
Occupation	INDOOR
Date Of Driving Pass	02/06/2011
Driving Experience	6 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84432027
Fax Number	
Contact Number	OFFICE-84432027
Email Address	NOEMAIL

Address	BLK 459 SEGAR ROAD #03-181
Postcode	670459
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
Weather Conditions	AFTER RAIN
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFB6688U
Vehicle Make/Model/Colour	NA
Details Of Properties	RIGHT SIDE
Name of Driver	ONG CHEW HOCK
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	MUHAMMAD FARIS BIN FAISAL
Approximate Age	

Sketch Plan

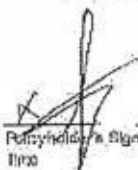
Describe Circumstances of the Accident

On 11/8/2017 at about 6:30pm. I was riding my bike no: PBA 87732 along the Neo Avenue at a normal speed and heading straight towards Bukit Timah Rd. I was riding in the right lane. Suddenly, a motor vehicle no: 8FB 6689U changing lane from left to right and cut into my lane. As a result 8FB 6689U right side hit the left of my bike and caused me to fall off to my left side and sustained injuries to my left leg & shin area. No police and ambulance was called.

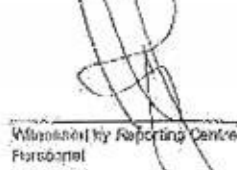
We shall exchange particulars at the scene. Mr. Ong Chew Hock then offered to compensate me for the damages to my bike repair which I disagree as the offer was too little (\$100). I then arrange my damaged bike to be towed to my repairer's shop and left the scene. On 14/8/17 I went to my Family Clinic (Seng) for treatment to my injuries sustained in the said accident & was given 2 days MC. I'm lodging this accident report for insurance claim purpose - against 8FB 6689U insurer's. That's all.

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

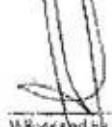

Witnessed by Reporting Officer / Date & Time

Accident Sketch Plan

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 or for the Authorized 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 insured 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 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 be 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 claim including the settlement of the claim and any necessary investigations relating to the claim;
(ii) investigating the accident and/or my claim;
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
(iv) administering my claim (including the filing of correspondence, statements, witness, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the sums 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 claim.
(collectively the "Purposes")
(b) all Insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may be 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 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 situated outside of Singapore, for one or more of the above Purposes.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
---	---	--

Sketch Plan



ENG NEO AVENUE

fax on 15/11 @ 1700

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

Date: 16 August 2017

To : LKK

Attn : Rasul (HP 90010068)

By Fax: 6256-4315

VEHICLE NO : FBA 8773X

Yamaha Spark 135

ACCIDENT DATE: 11 August 2017 / 2006

Description	Qty	Quotation \$
1 Handle Bar	1	185.00 X SVC
2 Gear Pedal	1	50 95.00 PA
3 Footrest	1	75.00 cost PA
4 Footrest Rubber	1	56.00 cut
5 Mudguard	1	155.00 R (Local repair - 100) labor
6 Mirror LH	1	65.00 sub
7 Brake Lever	1	40 68.00 PA
8 Front Cowling	1	195.00 X SVC
9 Fork Tube	1 set	480.00 R (Local repair - 100) labor
10 Front Panel Guard	1	100 150.00 sub
Sub-Total		1,524.00 386
Less 10%		152.40 10%
Sub-Total		1,371.60 347.40
Nett items		
1 Rear box		280.00 150 SVC
2 Towing fee		40.00
3 Remove & replace parts, align & etc		250.00 180
4 Remove & replace fork tube, bracket & top up fork oil		120.00 60
Sub-Total		690.00
Nett Total		2,061.60 347.40

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair commences, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion, thank you

SG 98 MOTOR PTE LTD

Rasul
HP 90010068

3 days

45

15/08/17 @ 1700

280.00 150 SVC
40.00
250.00 180
120.00 60
430
+ 200 = 630
347.40
630.00
977.40
2061.60
781.92
45-800

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4888

Email: sg_motor_enterprise@yahoo.com.sg

Date: 16 August 2017

To : LKK

Attn: Rasul (HP 90010068)

By Fax: 6266-4315

VEHICLE NO : FBA 8773X

Yamaha Spark 135

ACCIDENT DATE: 11 August 2017 *from*

Description	Qty	Quotation \$
1 Handle Bar	1	185.00 X
2 Gear Pedal	1	50 95.00 PA
3 Footrest	1	75.00 cut PA
4 Footrest Rubber	1	56.00 cut
5 Mudguard	1	166.00 R
6 Mirror LH	1	65.00 sub
7 Brake Lever	1	40 68.00 PA
8 Front Cowling	1	195.00 X
9 Fork Tube	1 set	480.00 R
10 Front Panel Guard	1	100 150.00, sub
Sub-Total		1,524.00 386
Less 10%		152.40 102
Sub-Total		1,371.60 347.40

Nett Items	
1 Rear box	280.00 150
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Nett Total	2,061.60 347.40

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair continues, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion, thank you

SG 98 MOTOR PTE LTD

Attn: Mr. Rasul

OK - Acceptance 8850
as agreed on 16/4/2017

15-NOV-2017 16:48



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
UNITED OVERSEAS INSURANCE LTD			Ref : CS/IOI17015768/R1gbe2	
3 ANSON ROAD #28-01 SPRINGLEAF TOWER SINGAPORE 079909			Date : 01-09-2017	
			Code : UOI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SFB 6688U	Veh. Inspected	FBA 8773X	
Policy No.	DHOM110113761106	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From	FELIS	Assign Date	15/08/2017	
2. Vehicle Particulars & Condition				
Make & Model	YAMAHA T135	c.c	135	
Engine No.	HIDDEN	Year of Reg.	2006	
Chassis No.	5YP206703	Colour	BLUE	
Odometer	77409	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	70/90-17	DUNLOP	3 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	80/90-17	DUNLOP	3 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	11/08/2017	Inspection Date	15/08/2017	
Survey held at	SG 98 MOTOR PTE LTD BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21 SINGAPORE 569622			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBA 8773X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	HANDLE BAR	SERVICEABLE	185.00	-
1	GEAR PEDAL	BENT	95.00	50.00
1	FOOTREST	BENT	75.00	75.00
1	FOOTREST RUBBER	CUT	56.00	56.00
1	MIRROR LH	SCRATCHED	65.00	65.00
1	BRAKE LEVER	BENT	68.00	40.00
1	FRONT COWLING	SERVICEABLE	195.00	-
1	FRONT PANEL GUARD	SCRATCHED	150.00	100.00
	LESS 10% DISCOUNT		-88.90	-38.60
			800.10	347.40
1	MUDGUARD (LOCAL REPAIR) (SN)	SCRATCHED	155.00	100.00
1	SET FORK TUBE (LOCAL REPAIR) (SN)	SCRATCHED	480.00	100.00
	LESS 10% DISCOUNT		-63.50	-
			571.50	200.00
SPECIAL NETT ITEMS				
1	REAR BOX (SN)	SCRATCHED	280.00	150.00
			280.00	150.00
LABOUR				
	TOWING FEE.		40.00	40.00
	REMOVE & REPLACE NECESSARY PARTS, ALIGN & ETC.		250.00	180.00
	REMOVE & REPLACE FORK TUBE, BRACKET & TOP UP FORK OIL.		120.00	60.00
			410.00	280.00
GRAND TOTAL			2,061.60	977.40
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				800.00

Report Ref No. CS/UOI17015768/R1gbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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