

7/10/2007

ASS. REC. BY:

REF: CS/CTI7017033/Tigber

Special Instruction:

Surveilor:

Taufik

ASSIGNMENT (Office)

From (Person):

Angie Foo

of

CTL

Date/Time: 12/09/2017 4:24pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBK 5013Z

Insured:

G8B 310X

at Workshop m/s

Southern Motor

Tel:

6273 0369

of

Bk 1006 Bukit Merah Lane

2 # 01-10

Policy No:

DMCVSN3017591701

Claim No:

9NM17D 05222102

Sum Insured:

Excess:

Make of Veh:

D.O.A.

05092017

(Client's Record)

CA / REV / REP. / REV 24 HRS (wpi)

13092017

H.O.D. Endorsement:

Date/Time:

12/09/2017 5:13pm

Person Contacted:

Ah Huat /

mv Lim

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate	
	FBK 5013Z - NBA / INC1701748/3	DOA: 030917
	G8B 310X - NA / CTI 16018553/B	DOA: 031016

Surveys

Maimun

ASSIGNMENT

From: _____ Date: 13092017
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FBK 50132
 at Workshop m/s Southern Motor
 of Bk 1006 Bukit Merah Lane 2 # 01-10
 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: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS WP

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: FBK 50132 Yr Regn: 2015 / Sep
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Honda CB400 c.c. 399
 Colour Black / Red A/C: Insured / Std / NI / NA
 Sp. Reading 64097 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: 342NC4796EK 000421
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 120/70 R17
 R: 160/60 R17
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front _____ Rear _____
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. _____ mm L/Bal. _____ mm
 D.O.A. _____ D.O.I. 13/9/17
 Survey held at Southern Motor Bukit Merah
 Des. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
<u>11/2/17</u>	<u>Mr Lim said pending for liability, veh not send in for repair.</u>
<u>11/2/17</u>	<u>submit preliminary report.</u>

Date/Time, File Pass to?

☒ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS: _____ SI

Photos

Others

TOTAL

Report Format : _____

Lump Sum / I.B.I: (\$ _____)

130

130



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				
CHINA TAIPING INSURANCE (S) PTE LTD			Ref : CS/CTI17017633/T1gb	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909			Date : 12-09-2017	
			Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBB 310X		Veh. Inspected	FBK 5013Z
Policy No.	DMCVSN3017591701		Coverage (\$)	0.00
Claim No.	SNM17D05222C02		Excess (\$)	0.00
Assign From	MERIMEN (ANGIE FOO)		Assign Date	12/09/2017
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				
5. General Information				
Accident Date	05/09/2017		Inspection Date	13/09/2017
Survey held at	SOUTHERN MOTOR BLOCK 1006 BUKIT MERAH LANE 2 #01-10 SINGAPORE 159762			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	12 Sep 2017		12 Sep 2017 16:24 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	GEORON		
Main Claimant:	MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN, ID: S9005908D		
Vehicle Reg. No.:	FBK5013Z	Date of Loss:	05/09/2017 23:00 - :59
Claim Type:	TP / SNM17D05222C02	Policy/Cover Note No.:	DMCVSN3017591701
Vehicle Reg. No. (Insured):	GBB310X	Policy No. (Claimant):	5084104731
		Excess:	S\$0.00
Repairer:	Southern Motor (HQ) BLK 1006 BUKIT MERAH LANE 2, #01-10, 159762 Bukit Merah - Tel: 62730369		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Angie Foo - 6389 6186]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 21/09/2017]		
Adj Asg. Remarks:	PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE.		

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS [View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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 willful 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	08/09/2017 11:30
Date Of Accident	05/09/2017 23:00
Exact Location Of Accident	ALONG RD 1 LOYANG AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK5013Z
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN
NRIC No	S9005908D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82010913
Alternative Phone No	OFFICE-82010913

Vehicle Particulars

Manufacturer	HONDA
Model	CB400X
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5084104731
Cover Note Number	

Driver

Name of Driver	MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN
NRIC No	S9005908D
Date Of Birth	16/02/1990
Occupation	INDOOR
Date Of Driving Pass	17/09/2015
Driving Experience	1 YEAR AND 11 MONTHS
Gender	MALE
Mobile Number	+65-82010913
Fax Number	
Contact Number	OFFICE-82010913
Email Address	NOEMAIL

Address	APT BLK 51 MARINE TERRACE #15-167
Postcode	440051
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	COLLISION - U-TURN
Weather Conditions	RAINING
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)	2

Details of Police Action

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

Circumstances of Accident

PLEASE REFER TO POLICE REPORT, REPORT NUMBER: T/20170906/2085

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	GBB310X
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
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 HENDRI DZULKARNAEN BIN SULAIMAN
Approximate Age	

Injuries Sustain

LEFT ARM SWELLING AND BRUISING

Injured person in which vehicle?

FBK5013Z

Were seat belts worn?

Was injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

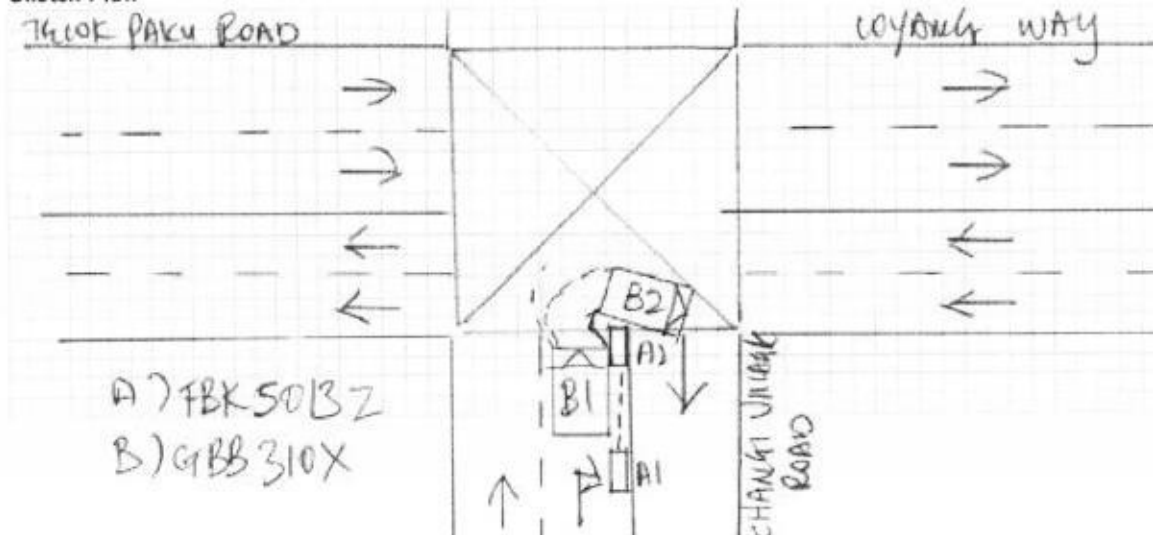
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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. 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/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
07/09/2007


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


Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstances of the Accident

*PLS REFER TO POLICE REPORT
X/20170906/2085*

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time
27/01/2017

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


Witnessed by Reporting Centre Personnel

Police Report



SINGAPORE
POLICE FORCE



1201700092585

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No. 1800-4428999

Report No. 1201700092585

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/09/2017 14:08
Vide Report No.
Station Diary No. 37

Informant's Particulars

Name of Informant: MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN			Address: APT BLK 51 MARINE TERRACE #15-167 SINGAPORE 440061		
ID Type / ID No.: NRIC NO / S90059080			Contact No.: Home/Office: Mobile: 82040913		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 27	Date of Birth: 16/02/1990	Type of Informant: Rider		
Race: Javanese			Language:		Institution / School Name:
Occupation: SECURITY GUARD			Driving Licence Information: Class: 2B, 2A, 2 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others:	Drink Drive: No	Date/Time of Accident: 05/09/2017 23:00	Type of Location: T-Junction
Location: Along Road 1 LOYANG AVENUE				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBK5013Z	Motorcycle	HONDA	CB400X	Black	Slightly Damaged	1
GBB310X	Van				Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK5013Z	NTUC Income Insurance Co-Operative Limited	5084104731	28/09/2016	27/09/2017

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin
Marine Parade N.P.C.
300 Marine Parade Road SINGAPORE
449286
Tel No: 1800-4428888



T/20170809/2085

2 of 4

Report No: T/20170809/2085

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Rider		Use of Pedestrian Crossing: NA	
Name	MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN	ID No.	S9005908D
Related Vehicle	FBK5013Z (Motorcycle)	Contact No.	82040913
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	06/09/2017	Date Discharge	06/09/2017
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	MUHAMAD YUSSOF BIN ISMAIL	ID No.	S8712567Z
Related Vehicle	NIL	Contact No.	85693957
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/09/2017 at about 2300hrs, I was riding my motorcycle (FBK5013Z, Black and Red Honda CB400X) along Changi Village Road towards Loyang Ave. I then stopped on the right lane at the junction of Changi Village Road and Loyang Ave as the traffic light was red. There was a white van (GBB310X) in front of me which was the first vehicle on the right lane and signalling right. At that point of time, I had a pillion with me.

When the traffic light turned green, the van started moving forward however he steered more to the left as though he was making a wide turn straight onto the left lane of Loyang Ave. Therefore, I proceed forward and wanted to make the right turn following my lane towards Loyang Ave. Suddenly, as I moved forward, the van made an illegal U-Turn causing the right side of the van to hit onto the left side of my motorcycle and my left arms. I managed to regain my balance of my motorcycle however my pillion fell off the motorcycle. The driver of the van step out and approached and he questioned me why I squeeze into his lane. We exchange particular and left after which.

I suffered some swelling and bruising on my left arm. There is a camera at the junction that might have captured the accident. There is no traffic police and ambulance attending my accident.

On 06/09/2017 at 02.22hrs I went to Changi General Hospital and I was given 5 days MC.

Police Report



SINGAPORE POLICE FORCE

Police Station DT Origin
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
445298
Tel No: 1800-4428999



T20170906/2065

3 of 4

Report No: T20170906/2065

CONTINUATION OF REPORT

Police Report



POLICE FORCE



1/20170906/2085

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428599

4 of 4

Report No: 1/20170906/2085

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Staff Sgt SALINA BINTE ISMAIL	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 06/09/2017 14.08
Officer In Charge Of Case: TP / AEIT / Staff Sgt ABDUL RAHIM BIN SALIM Contact No: 65476227	Classification Of Case:

Authentication Stamp
SP161





南方摩哆 SOUTHERN MOTOR

Block 1006, Bukit Merah Lane 2, #01-10
Singapore 159762 Tel:62730369 Fax:62746614

Repair & Dealing in New & Second-hand Motor-cycles, Scooters & Insurance Agent

Date: 12th September 2017

Motor Claims Department
China Taiping Insurance (Singapore) Pte Ltd
3 Anson Rd #16-00
Springleaf Tower
Singapore 079908

Dear Sirs

Re: Rest of repair to Honda CB400X - FBK50132

1 pc of Mirror	RM	25.00	cut ✓
" Handle bar		140.00	?
" Tool box		75.00	cm ✓
" Engine guard		120.00	bt ✓
" Spoke light		25.00	cm ✓
" Hand guard		160.00	cut ✓
" Front mudguard		165.00	cm ✓
" Exhaust pipe		760.00	dd ✓
" Givi Box		480.00	dd ✓
" Front brake disc		260.00	?
" Side stand		110.00	bt ✓
		<u>2610.00</u>	
		261.00	
		<u>2349.00</u>	

Less 10%

Nett

Transport	40.00	✓
Alignment fork complete	85.00	60.
Alignment rim	65.00	60.
Labour	280.00	200.
	<u>RM 2819.00</u>	

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:

Yours faithfully,
SOUTHERN MOTOR

Tanjiluk 97495749

3 days

sur@lkkauto.com

WP

Resurvey after repair
Insurance

Tel 63896111

Fax 62247175

14/9/17

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	12 Sep 2017		12 Sep 2017 16:24 Edit Adj Rpt	S\$2,349.00 Edit Estimates	S\$2,349.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:		GEORON, Co. Reg. No.: -							
Main Claimant:		MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN, ID: S9005908D							
Vehicle Reg. No.:		FBK5013Z	Date of Loss:	05/09/2017 23:00 - :59					
Claim Type:		TP / SNM17D05222C02	Policy/Cover Note No.:	DMCVSN3017591701					
Vehicle Reg. No. (Insured):		GBB310X	Policy No. (Claimant):	5084104731					
		Excess:	S\$0.00						
Repairer:		Southern Motor (HQ) BLK 1006 BUKIT MERAH LANE 2, #01-10, 159762 Bukit Merah - Tel: 62730369							
Handling Insurer:		China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Angie Foo - 6389 6186]							
Claimant's Insurer:		NTUC Income Insurance Co-operative Ltd (HQ) - Tel:							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH] ... [Final Rpt due 21/09/2017]							
Adj Asg. Remarks:		PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE.							
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***FBK5013Z (SNM17D05222C02)**
[GBB310X]

TP

MUHAMMAD HENDRI DZULKARNAEN BIN SULAIMAN

Sep 5 2017 11:00PM

[GEORON]

Southern Motor

Upload Documents		Upload Photos	Compose New Letter	View Use Viewer	
Assessment Reports				1 per page	☒
No	Finalized On	National Assessment Centre Services (Bukit Merah)		Thumbnail	Print
1	08/09/17 11:47	Accident Statement		Load HTM	
2	08/09/17 12:09	Addendum Sheet		Load JPG	☒
3	08/09/17 12:10	Accident Statement Addm. #1		Load HTM	
Photos/Images				3 per page	☒
No	Finalized On	National Assessment Centre Services (Bukit Merah)		Thumbnail	Print
1	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
2	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
3	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
4	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
5	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
6	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
7	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
8	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
9	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
10	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
11	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
12	08/09/17 11:45	Accident Photo [Linked Accident Report Documents]		Load JPG	☒
13	08/09/17 11:45	Police Report [Linked Accident Report Documents]		Load JPG	☒
14	08/09/17 11:45	Police Report [Linked Accident Report Documents]		Load JPG	☒
15	08/09/17 11:45	Police Report [Linked Accident Report Documents]		Load JPG	☒
16	08/09/17 11:45	Police Report [Linked Accident Report Documents]		Load JPG	☒
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	14/09/17 11:45	General View		Load JPG	☒
2	14/09/17 11:45	General View		Load JPG	☒
3	14/09/17 11:45	General View		Load JPG	☒
4	14/09/17 11:45	General View		Load JPG	☒
5	14/09/17 11:45	General View		Load JPG	☒
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10	14/09/17 11:45	General View		Load JPG	☒
11	14/09/17 11:45	General View		Load JPG	☒
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13	14/09/17 11:45	General View		Load JPG	☒
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63	14/09/17 11:45	General View		Load JPG	☒

64	14/09/17 11:45	General View		Load JPG	☒
Documentation					
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	1 per page	☒	
1	12/09/17 16:26	THIRD PARTY FBK5013Z -FROM SOUTHERN NOTOR -ESTIMATE AND SAS REPORT		Load PDF	Thumbnail Print
2	12/09/17 16:26	INSURED SAS REPORT GBB310X		Load PDF	
No	Finalized On	National Assessment Centre Services (Bukit Merah)			
1	08/09/17 12:09	Accident Sketch Plan [Linked Accident Report Documents]		Load JPG	☒
2	08/09/17 12:09	Accident Sketch Plan [Linked Accident Report Documents]		Load JPG	☒

Linked Accident Report Documents

Assessment Reports					
No	Finalized On	National Assessment Centre Services (Bukit Merah)	1 per page	☒	
1	08/09/17 11:47	Accident Statement		Load HTM	Thumbnail Print
2	08/09/17 12:09	Addendum Sheet		Load JPG	☒
3	08/09/17 12:10	Accident Statement Addm. #1		Load HTM	
Photos/Images					
No	Finalized On	National Assessment Centre Services (Bukit Merah)	3 per page	☒	
1	08/09/17 11:45	Accident Photo		Load JPG	☒
2	08/09/17 11:45	Accident Photo		Load JPG	☒
3	08/09/17 11:45	Accident Photo		Load JPG	☒
4	08/09/17 11:45	Accident Photo		Load JPG	☒
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11	08/09/17 11:45	Accident Photo		Load JPG	☒
12	08/09/17 11:45	Accident Photo		Load JPG	☒
13	08/09/17 11:45	Police Report		Load JPG	☒
14	08/09/17 11:45	Police Report		Load JPG	☒
15	08/09/17 11:45	Police Report		Load JPG	☒
16	08/09/17 11:45	Police Report		Load JPG	☒
Documentation					
No	Finalized On	National Assessment Centre Services (Bukit Merah)	1 per page	☒	
1	08/09/17 12:09	Accident Sketch Plan		Load JPG	☒
2	08/09/17 12:09	Accident Sketch Plan		Load JPG	☒

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) 			
Show Remarks To: ☐ Handling Insurer Note: Remarks are private unless you show it to other parties.			

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)
 51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
 Singapore 408933
 Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CT117017633/T1GBE2
 Date: 27/12/2017

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN3017591701
Claimant Vehicle No :	FBK5013Z	Insured Vehicle No :	GBB310X
Date of Loss:	05/09/2017	Nature of Claim:	TP
		Claim No:	SNM17D05222C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	FBK5013Z	Engine No:	NC47E5000419
Make & Model:	HONDA CB 400 F3WYB, 399cc (M)	Chassis No:	JH2NC4796EK000421
Reg. Date:	28/09/2015 (Man. Year: 2015)	Odometer:	64097 km
Colour:	Red/Black		
Engine Capacity:	399 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	120/70 R17	Rear Tyre Size:	160/60 R17
Front Left Side:	Pirelli 5 mm	Rear Left Side:	Pirelli 5 mm
Front Right Side:	0 mm	Rear Right Side:	0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,349.00	1,989.00	360.00	15.33
Miscellaneous Items	0.00	0.00	0.00	
Labour	470.00	360.00	110.00	23.40
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,819.00	2,349.00	470.00	16.67
+ GST 7.00/7.00% (S\$)	197.33	164.43	32.90	16.67
Nett Amount (S\$)	3,016.33	2,513.43	502.90	16.67

INSPECTION

Date of Assignment:	12/09/2017	
Date Inspected:	13/09/2017	Inspected At:
		Southern Motor (HQ)
		BLK 1006 BUKIT MERAH LANE 2, #01-10
		Singapore 159762
Estimated Period of Repair:	3.0 days	

Adjuster: MOHD TAUFIKH

Manager: LOW AI PHING

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

(REPAIR COST NOT CONCLUDE)

(EXCLUDE CHECK ITEMS S\$360.00 NETT)

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 27 Dec 2017)	
Parts:	N/A	HONDA CB 400 F3WYB 399cc (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for FBK5013Z)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*MIRROR	Cut	85.00 FL	*85.00 FL
2	1		*HANDLE BAR	* Check	140.00 FL	*- FL
3	1		*TOOL BOX	Cracked	75.00 FL	*75.00 FL
4	1		*ENGINE GUARD	Bent	280.00 FL	*280.00 FL
5	1		*SPOKE LIGHT	Cracked	95.00 FL	*95.00 FL
6	1		*HAND GUARD	Cut	160.00 FL	*160.00 FL
7	1		*FRONT MUDGUARD	Cracked	165.00 FL	*165.00 FL
8	1		*EXHAUST PIPE	Dented	760.00 FL	*760.00 FL
9	1		*GIVI BOX	Dented	480.00 FL	*480.00 FL
10	1		*FRONT BRAKE DISC	* Check	260.00 FL	*- FL
11	1		*SIDE STAND	Bent	110.00 FL	*110.00 FL
					Sub Total (S\$)	2,610.00
					- List Item Discount on L Items 10.00/10.00% (S\$)	261.00
					Total Parts (S\$)	1,989.00

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	TRANSPORT	New	40.00	40.00
2	ALIGNMENT FORK COMPLETE	New	85.00	60.00
3	ALIGNMENT RIM	New	65.00	60.00
4	LABOUR	New	280.00	200.00
Gross Labour Cost (S\$)			470.00	360.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >