

ASS RECD BY: PCS REF: C33/LPC17013103/STB-1 Special Instruction: _____

Surveyor: Sebastian ASSIGNMENT (Office)

From (Person): Gerald Poh of LPC Date/Time: 17-10-2017

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: FBJ 7417 Insured: GDA 390W

at Workshop m/s: Ergson Painting Tel: 67606271

of: Blk 4 Yew Tee Ind Est 393

Policy No: _____ Claim No: 16/17/17/ V000/019961

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A: 28/02/17

(Client's Record)

CA / REV / REP. / REV 24 HRS (ap) H.O.D. Endorsed: _____

Date/Time: 01/12/17 Person Contacted: Ergson Vehicle: IN OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>FBJ 7417 - x</u>
	<u>GDA 390W - x</u>
<u>13/11</u>	<u>Disassemble</u>
<u>19/11</u>	<u>After Repair</u>

Submit Lump Sum \$1750/- (Red: 10550 : 86%)
3 days

21/12 - Typist

19/12/2017

RECEIVED 21 DEC 2017

no. 671



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

LONPAC INSURANCE BHD

Ref : CS3/LPC17013103/Stb-1

300 BEACH ROAD
#17-04/07 THE CONCOURSE SINGAPORE 199555

Date : 17-10-2017



Code : LPC2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBA 390U	Veh. Inspected	FBJ 741T
Policy No.		Coverage (\$)	0.00
Claim No.	16/17/17/VC00/019961	Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	17/10/2017

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

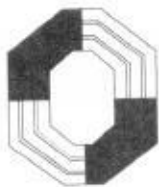
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5. General Information

Accident Date	28/06/2017	Inspection Date	17/10/2017
Survey held at	ENG SOON PAINTING SVC BLK 4 YEW TEE IND EST 393 - J WOODLANDS ROAD SINGAPORE 677969		

5a. Remarks

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



LONPAC INSURANCE BHD

(S98FC5635C)

Our Ref : 16/17/17/VC00/019961

Your Ref : CS3/LPC17013103/Sth3s2

13 October 2017

M/s LKK Auto Consultants Pte Ltd
51 Ubi Ave 1
#01-25 Paya Ubi Industrial Pk
Singapore 408933

Dear Sirs/Madam

PAPER SURVEY OF FBJ741T

We refer to the above accident.

We enclose the following documents :-

- a) Survey report & photos of FBJ741T
- b) GIA report of FBJ741T
- c) GIA report & photos of GBA390U

Kindly study the documents and let us have your opinion on the adjusted repair cost within the next 10 days.

Yours faithfully

GERALD POH
SENIOR EXECUTIVE
(CLAIMS)
Email : mt_claim@lonpac.com

ENG SOON PAINTING SERVICES

Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677978
Tel: 6760 6271

WONG CHEW YOON

c/o M/s Eng Soon Painting Services
Block 4 Yew Tee Ind Est 393-J
Woodlands Road
Singapore 677969

Date: 31 July 2017

Dear Sir,

Date of accident : 28/6/2017
Final repair bill to FBJ 741 T

To Supply,

Lump Sum repairs recommended	
By the surveyor	\$12,250.00

Total	\$12,250.00
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Dollars : TWELVE THOUSAND TWO HUNDRED FIFTY ONLY

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 05/07/2017 15:09
Date Of Accident 28/06/2017 06:55
Exact Location Of Accident CHOA CHU KANG AVE 2
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBJ741T
Insured/Policyholder
Name Of Registered Owner WONG CHEW YOON
NRIC No S7362589J
Email Address CYWONG333@YAHOO.COM
Mobile Phone No (LOCAL) +65-96187769
Alternative Phone No OTHERS-96187769

Vehicle Particulars

Manufacturer YAMAHA
Model JUPITER 135

Exact Purpose for which vehicle was being used at time of accident

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 MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
Fleet Policy NO
Policy Number
Cover Note Number

Driver

Name of Driver WONG CHEW YOON
NRIC No S7362589J
Date Of Birth 11/04/1973
Occupation INDOOR
Date Of Driving Pass 16/08/2007
Driving Experience 9 YEARS AND 10 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-96187769
Fax Number
Contact Number OTHERS-96187769
Email Address CYWONG333@YAHOO.COM

Address
Name
Approximate
Injuries

Address BLK 114 TECK WHYE LANE #03-686
Postcode S680114
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 - HEAD ON COLLISION
Weather Conditions CLEAR
Road Surface DRY

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? YES
If Yes, Please state which Police Station
Police Station Name CHOA CHU KANG NEIGHBOURHOOD POLICE POST
Police Station Address ROAD: BLK 116 TECK WHYE LANE , POSTCODE: 680116 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-7629999 - FAX NO: 67636615
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
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBA390U
Vehicle Make/Model/Colour CITROEN BERLINGO
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

Address

DETAILS OF INJURED PERSON 1

WONG CHEW YOON

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBJ741T

Were seat belts worn?

Was injured conveyed to hospital by ambulance? YES

Address

Postcode



**SINGAPORE
POLICE FORCE**



1720170702/2051

1 of 3

Report No. 1720170702/2051

Police Station Of Origin:
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No. 1 800-7629899

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	02/07/2017 15:28	Vide Report No.:	J20170628/0052	Station Diary No.:	21
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Informant's Particulars

Name of Informant:	WONG CHEW YOON	Address:	APT BLK 114 TECK WHYE LANE #03-896 SINGAPORE 680114		
ID Type / ID No.:	NRIC NO / S7362589J	Contact No.:	Home/Office: Mobile: 95187769		
Nationality:	SINGAPORE CITIZEN	Email:			
Sex:	Male	Date of Birth:	11/04/1973	Type of Informant:	Rider
Female	44	Language:	English	Institution / School Name:	
Race:	Chinese	Driving Licence Information:	Class: 2B, 3	Date of Expiry:	
Occupation:	WAREHOUSE ASSISTANT				

General Information of the Accident

Type of Accident:	Injury	Conveyed By Ambulance	Drink Drive:	Date/Time of Accident:	Type of Location:
			No	28/06/2017 06:55	T-Junction
Location:	Along Road 1 CHOA CHU KANG AVENUE 2				
Weather:	Clear	Road Surface:	Dry	Road Speed Limit:	
Traffic Flow:	One Way	Traffic Control:	Not Controlled	Traffic Volume:	Light
Type of Collision:	Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance:
					Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ741T	Motorcycle	YAMAHA	JUPITER 135	Purple	Slightly Damaged	1
GBA390U	Van		MANUAL		Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.:	Insurance Company:	Insurance No	Effective	Expiry Date
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SINGAPORE
POLICE FORCE



152017010020051

2 of 3

Police Station Of Origin

Choo Choo Kiang NPP

116 Teck Whye Lane #01-740 SINGAPORE

#80116

Tel No: 1800 7020990

Report No: 152017010020051

CONTINUATION OF REPORT

Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
FBJ411	MSO INSURANCE (SINGAPORE)	71963210	27/12/2018	26/12/2017
PTE LTD				

Details of Person Involved

Any Person Involved No		Use of Pedestrian Crossing NA	
No of Pedestrians Injured Nil			
Rider	WONG CHEE WEN	ID No	SZ 362583
Related Vehicle	FBJ411 (Motorcycle)	Contact No	96187758
Hospital/Clinic	NGS TANGSUNG GENERAL HOSPITAL	Class of Injury	Class 2B3
		Driving	Date of Expiry Nil
		Licence &	
		Expiry Date	
Date treated	28/05/2017	Date Discharge	02/07/2017
No of Days granted Medical Leave	30	Duration of Injury	56days

Brief Details

On 28/05/2017 at 09:05hrs, I was riding along Choo Choo Kiang Avenue 2. As I was riding pass 686, 280 Corporate Exit, Vehicle (GFA 2801) entered the carpark without yielding onto oncoming traffic and did not stop at the stop line. I noticed emergency lights and sounded my horn however my vehicle could not overtake as the car was in my way. My vehicle was not injured however I was not aware of any injuries to the driver of the car. My vehicle was not injured however I was not aware of any injuries to the driver of the car. My vehicle was not injured however I was not aware of any injuries to the driver of the car.

POLICE REPORT

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	28/06/2017 17:46
Date Of Accident	28/06/2017 07:00
Exact Location Of Accident	CHOA CHU KANG AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA390U
Insured/Policyholder	
Name Of Registered Owner	QUEK HOCK SENG CONSTRUCTION (PTE) LTD
Co Reg No	198101533C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67770222

Vehicle Particulars

Manufacturer	CITROEN
Model	BERLINGO-1.6 D HDI WITHOUT ABS (M)

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken REPORTING ONLY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/16/VC00/099044
Cover Note Number	

Driver

Name of Driver	CHUA THIAM YONG
NRIC No	S1723401C
Date Of Birth	21/01/1965
Occupation	INDOOR
Date Of Driving Pass	20/09/1982
Driving Experience	34 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98306379
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 249 CHOA CHU KANG AVE 2 #15-470
Postcode	680249
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION- TURNING OUT OF MINOR ROAD
Weather Conditions	CLEAR
Road Surface	DRY

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)	3

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX 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
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBJ741T
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 RIDER
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBJ741T
Were seat belts worn?
Was injured conveyed to hospital by ambulance? YES
Address
Postcode

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 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. 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' law yers/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' law yers/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 law yers/law firms), which may be sited 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

— Please refer to sketch —

Sketch Plan Pg. 2

Describe Circumstances of the Accident

- Please refer to police report -

Declaration

We declare the foregoing particulars are true in every respect.

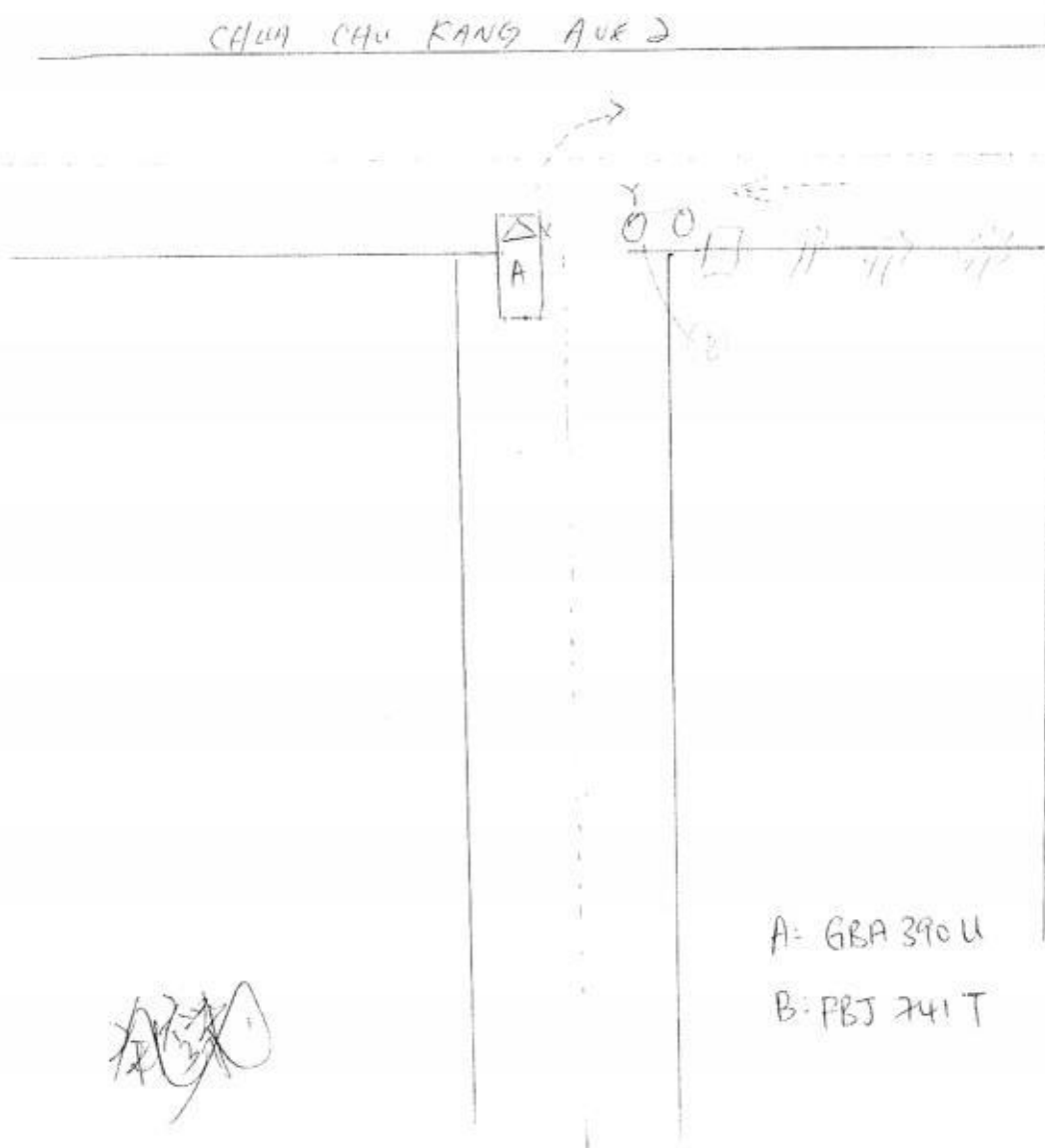
☒

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan #2 Pg. 1



CHUN CHU KANG AVE 2



**SINGAPORE
POLICE FORCE**



T/20170628/2093

1 of 3

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No: T/20170628/2093

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/06/2017 13:56	Vide Report No.: J/20170628/0052	Station Diary No.: 79
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Informant's Particulars

Name of Informant: CHUA THIAM YONG			Address: APT BLK 249 CHOA CHU KANG AVENUE 2 #15-470 SINGAPORE 680249	
ID Type / ID No.: NRIC NO / S1723401C			Contact No.:	Mobile: 98306379
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 52	Date of Birth: 21/01/1965	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Supervisor/General foreman (building and related trades)		Driving Licence Information: Class: 2B,3,4,5		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/06/2017 07:00	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 CHOA CHU KANG AVENUE 2 CHOA CHU KANG TERRACE CHOA CHU KANG AVE 2 > CHUA CHU KANG TERRACE INFRONT OF BLK 250 (MPAG: 4422A)				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ741T	Motorcycle	YAMAHA	JUPITER 135 MANUAL	Purple	Slightly Damaged	2
GBA390U	Van	CITROEN	CITROEN BERLINGO 1.6 HDI (M) WITHOUT ABS	Silver	Slightly Damaged	3



**SINGAPORE
POLICE FORCE**



T/20170628/2093

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

2 of 3

Report No. T/20170628/2093

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	-	ID No.	-
Related Vehicle	FBJ741T (Motorcycle)	Contact No.	-
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
Driver			
Name	CHUA THIAM YONG	ID No.	S1723401C
Related Vehicle	GBA390U (Van)	Contact No.	98306379
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 28/06/2017 at about 0700hrs, I was in V1 (GBA390U, Van) with my 2 children, sending them to their school. As I exited Blk 250 Choa chu kang Ave 2, I stopped at the give way line after the gantry to check my blind spot on the right as I intended to make a right turn towards Choa Chu Kang Ave 2 towards Choa Chu Kang way. As there were objects (Trees and electrical box) blocking the blind spot, I inched forward but subsequently when I realized, V2 (FBJ741T, Motorcycle) coming from Choa Chu Kang Ave 2 towards Choa Chu kang Ave 1 knocked onto the right of my vehicle.

Rider of V2 was conveyed to Ng Teng Feng General hospital on the spot. Traffic Officer IO Marish attended to the scene and instructed me to head down to the nearest npc to Lodge a report.



SINGAPORE
POLICE FORCE



T/20170628/2093

3 of 3

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No. 1800-7659999

Report No. T/20170628/2093 /

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: J / SIAU JING YANG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/06/2017 13:56
Officer In Charge Of Case: TP / GIT / Insp NORHIDAWATI BINTE AHMAD Contact No.: 65476310	Classification Of Case:

Authentication Stamp
NP168

Accident Photo



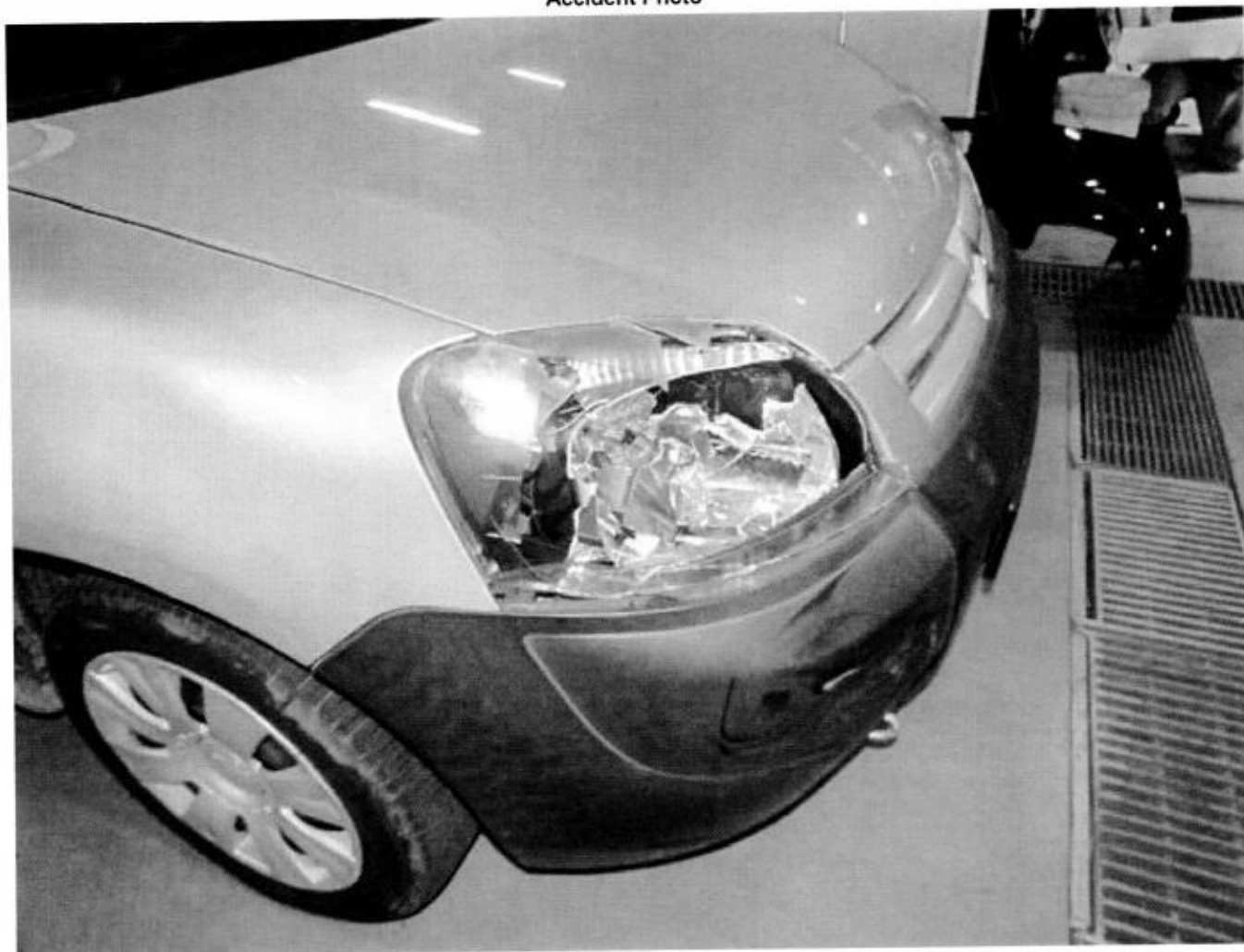
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



scene pic



scene pic



scene pic



AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road, #07-280, Singapore 470110
Mobile : 9855 6879 Email : automaxsurvey@gmail.com
Registration No. 53110062J

Report Ref : TP17060003

Date: 31 July 2017

Wong Chew Yoon
c/o Eng Soon Painting SVC
Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677969

THIRD PARTY SURVEY ACCIDENT OCCURED ON 28 June 2017

Workshop Name and Address

Eng Soon Painting SVC
Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677969

As per your instruction dated 05 July 2017
We have carried out a physical inspection on the said
We enclosed herewith our report and findings as follows:

with regard to the above matter.
FBJ 741 T

1. VEHICLE PARTICULARS

Registration No : FBJ 741 T
Model : YAMAHA JUPITER 135
Year / Capacity : 2013 / 134 cc
Chassis No : MH355S004DK126018

Engine No : 55S126027
Mileage : n.a km
Colour : Multi colour

2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>	<u>Rim</u>
FRONT :	70/90/R17	Pirelli	9.00 mm	Sport
REAR :	70/90/R17	Pirelli	9.00 mm	Sport

AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road , #07-280, Singapore 470110
Mobile : 9855 6879 Email : automaxsurvey@gmail.com
Registration No. 53110062J

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the ALL portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : 14 working days to complete

5. In accordance to your instruction, we have Not Authorised repair to the vehicle and the survey done on a "Without Prejudice" basis. We hope that this report will be of assistance to you in dealing with the matter.

6. Should you discover any discrepancy in the report, please kindly notify us within 1 week, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle Number: FBJ 741 T

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$)	Our Revised Estimation (\$)
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List Items

2 pcs Side lamp assy X NN
 1 pc Headlamp assy with casing X NN
 1 pc Front mudguard ✓ cut
 1 pc Rim R
 1 set Front fork cover X } NN
 2 pcs Front fork tube X }
 2 pcs Front fork oil seal X }
 1 pc Handle bar ✓ 15T
 1 pc Handle bar grip ✓ cut
 2 pcs Handle bar balance ✓ cut
 1 pc Master cylinder assy X
 1 set Ignition switch assy X
 1 pc Meter assy X
 1 pc Meter casing X
 1 pc Horn switch X
 1 pc Starter switch X
 1 set Side mirror assy ✓ 15T
 1 pc Crankshaft cover X) NN
 1 pc Main stand X)
 1 pc Front wheel shaft X)
 2 pcs Front side cover ✓ cut
 1 pc Brake pedal ✓ 15T
 1 pc Front fork bracket X
 1 pc Steering cone X
 1 pc Steering cone bearing X
 1 pc Exhaust pipe assy X
 1 pc Kick starter X
 1 pc Seat assy X
 1 pc Main frame cover ✓ CRK
 1 pc Rear Swing arm assy X NN
 1 pc Body frame assy R

electronically shocked	\$	150.00	\$	150.00
electronically shocked	\$	435.00	\$	255.00
deformed	\$	108.00	\$	108.00
bent/distorted	\$	450.00	\$	450.00
grazed/deformed	\$	94.00	\$	94.00
bent/distorted	\$	222.00	\$	222.00
grazed/deformed	\$	104.00	\$	104.00
bent/distorted	\$	208.00	\$	208.00
bent/distorted	\$	88.00	\$	88.00
grazed/deformed	\$	168.00	\$	168.00
grazed/deformed	\$	228.00	\$	228.00
shocked	\$	435.00	\$	435.00
electronically shocked	\$	1,758.00	\$	1,758.00
grazed/deformed	\$	456.00	\$	456.00
grazed/deformed	\$	70.00	\$	70.00
grazed/deformed	\$	92.00	\$	92.00
grazed/deformed	\$	90.00	\$	90.00
grazed/deformed	\$	255.00	\$	255.00
bent/distorted	\$	128.00	\$	128.00
bent/distorted	\$	68.00	\$	68.00
grazed/deformed	\$	340.00	\$	340.00
bent/distorted	\$	65.00	\$	65.00
bent/distorted	\$	115.00	\$	115.00
bent/distorted	\$	145.90	\$	145.90
bent/distorted	\$	85.00	\$	85.00
grazed/deformed	\$	820.00	\$	820.00
bent/distorted	\$	86.00	\$	86.00
grazed/deformed	\$	141.00	\$	141.00
broken	\$	158.80	\$	158.80
bent/distorted	\$	628.00	\$	628.00
bent - repair	\$	1,880.00	\$	-

121570

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$)	Our Revised Estimation (\$)
<u>List Items</u>				
1 pc	Rear mudguard ✓ cut	grazed/deformed	\$ 53.50	\$ 53.50
2 pcs	Rear side fairing cover ✓ CRK	cracked	\$ 88.00	\$ 88.00
1 pc	Shift gear pedal ✓ BT	distorted	\$ 68.00	\$ 68.00
1 pc	Throttle handle x NN	distorted	\$ 62.00	\$ 62.00
1 pc	Brake lever ✓ cut	distorted	\$ 52.00	\$ 52.00
1 pc	Clutch lever ✓ cut	distorted	\$ 52.00	\$ 52.00
1 pc	Inner cover x NN	grazed/deformed	\$ 118.00	\$ 118.00
1 pc	Front center cover for side lamp x NN	grazed/deformed	\$ 188.00	\$ 188.00
Parts Sub-Total			\$ 10,168.20	\$ 8,288.20
Discount 0.00%			\$ -	\$ -
			\$ 10,168.20	\$ 8,288.20

File Number : FBJ 741 T

10753.20
1) 1539.36
-10%
1385.37

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$)	Our Revised Estimation (\$)
<u>Special Nett Items</u>				
2 pcs	Number plate x	Necessary	\$ 70.00	\$ 70.00
2 blts	Fork oil x	Necessary	\$ 60.00	\$ 60.00
2 blts	Brake oil x	Necessary	\$ 60.00	\$ 60.00
1 pc	Meter cable x	grazed/loose	\$ 65.00	\$ 65.00
1 pc	Throttle cable x	grazed/loose	\$ 65.00	\$ 65.00
1 set	Wiring harness x	open cicruit	\$ 250.00	\$ 250.00
1 pc	Horn assy x	open cicruit	\$ 65.00	\$ 65.00
2 pcs	Tyre x	deformed	\$ 200.00	\$ 200.00
1 pc	Gasket ✓ NEC	Necessary	\$ 30.00	\$ 30.00
1 pc	Spark plug x	electronically shocked	\$ 18.00	\$ 18.00
1 pc	Brake pad x	Necessary	\$ 25.00	\$ 25.00
1 pc	Radiator assy x	damaged	\$ 658.00	\$ 658.00
1 pc	Radiator hose x	damaged	\$ 158.00	\$ 158.00
1 pc	Brake disc x	wrapped	\$ 183.00	\$ 183.00
1 pc	Front basket x	wrapped	\$ 88.00	\$ 88.00
1 pc	Front brake caliper x	damaged	\$ 250.00	\$ 250.00
1 set	Rear box with bracket ✓ cut	distorted	\$ 288.00	\$ 288.00
1 pc	ERP assy ✓ cut	Necessary	\$ 58.00	\$ 58.00

Special Nett Sub-Total \$ 2,591.00 \$ 2,591.00

Spare Parts Total \$ 12,759.20 \$ 10,879.20

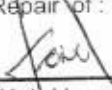
13344.20
2) 218

LABOUR COST

S/No	JOB DESCRIPTIONS	Workshop Estimation (\$)	Our Revised Estimation (\$)
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	Spare Parts	Total c/f \$	12,759.20	\$	10,879.20
1	Labour charges to repair and panel beat body frame structure cutting/welding and replacing the above mentioned parts.	\$	3,000.00	\$	300 2,600.00
2	Transport	\$	60.00	\$	60.00 ✓
	To replace wiring harness system incl checking	\$	240.00	\$	X 220.00
4	To tuff coat affected areas	\$	180.00	\$	50 150.00
5	To respray affected areas	\$	1,600.00	\$	200 1,400.00
			5080		
	Total	\$	17,839.20	\$	15,309.20
			18424.20		

The repairer has agreed to undertake the repair under a Sum Basis. We have further adjusted the amount to Sum Repair of:


Fong Kok Heng
Qualified Appraiser



\$ 12,250.00

37530

Parts: \$ 1385.37.
S/Nett: \$ 258.00
Labour: \$ 530.00

2173.37
Lump Sum - 20%

1738.69

L/s : \$ 1700 @ 3 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

Affiliated to Federation Internationale Des Experts En Automobile

LONPAC INSURANCE BHD

Ref : CS3/LPC17013103/Stbs2-1

300 BEACH ROAD
#17-04/07 THE CONCOURSE SINGAPORE 199555

Date : 26-12-2017



Code : LPC2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBA 390U	Veh. Inspected	FBJ 741T
Policy No.	Z/16/VC00/099044	Coverage (\$)	0.00
Claim No.	16/17/17/VC00/019961	Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	17/10/2017

2. Vehicle Particulars & Condition

Make & Model	YAMAHA	c.c	134
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	MH355S004DK126018	Colour	PURPLE
Odometer	182826	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	70/90-17	DUNLOP	6 mm
L/H Front Tyre			mm
R/H Rear Tyre	90/80-17	DUNLOP	6 mm
L/H Rear Tyre			mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION AND N/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	28/06/2017	Inspection Date	06/07/2017
Survey held at	ENG SOON PAINTING SVC BLK 4 YEW TEE IND EST 393 - J WOODLANDS ROAD SINGAPORE 677969		

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



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBJ 741T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
2	SIDE LAMP ASSY	NOT NECESSARY	150.00	-
1	HEADLAMP ASSY WITH CASING	NOT NECESSARY	435.00	-
1	FRONT MUDGUARD	CUT	108.00	108.00
1	RIM	TO REPAIR SEE LABOUR	450.00	-
1	SET FRONT FORK COVER	NOT NECESSARY	94.00	-
2	FRONT FORK TUBE	NOT NECESSARY	222.00	-
2	FRONT FORK OIL SEAL	NOT NECESSARY	104.00	-
1	HANDLE BAR	BENT	208.00	208.00
1	SET HANDLE BAR GRIP	CUT	88.00	88.00
2	HANDLE BAR BALANCE	CUT	168.00	168.00
1	MASTER CYLINDER ASSY	NOT NECESSARY	228.00	-
1	SET IGNITION SWITCH ASSY	NOT NECESSARY	435.00	-
1	METER ASSY	NOT NECESSARY	1,758.00	-
1	METER CASING	NOT NECESSARY	456.00	-
1	HORN SWITCH	NOT NECESSARY	70.00	-
1	STARTER SWITCH	NOT NECESSARY	92.00	-
1	SET SIDE MIRROR ASSY	MISSING	90.00	90.00
1	CRANKSHAFT COVER	NOT NECESSARY	255.00	-
1	MAIN STAND	NOT NECESSARY	128.00	-
1	FRONT WHEEL SHAFT	NOT NECESSARY	68.00	-
2	FRONT SIDE COVER	CUT	340.00	340.00
1	BRAKE PEDAL	BENT	65.00	65.00
1	FRONT FORK BRACKET	NOT NECESSARY	115.00	-
1	STEERING CONE	NOT NECESSARY	145.90	-
1	STEERING CONE BEARING	NOT NECESSARY	85.00	-
1	EXHAUST PIPE ASSY	NOT NECESSARY	820.00	-
1	KICK STARTER	NOT NECESSARY	86.00	-
1	SEAT ASSY	NOT NECESSARY	141.00	-
1	MAIN FRAME COVER	CRACKED	158.80	158.80
1	REAR SWING ARM ASSY	NOT NECESSARY	628.00	-
1	BODY FRAME ASSY	TO REPAIR SEE LABOUR	1,880.00	-
1	REAR MUDGUARD	CUT	53.50	53.50

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	REAR SIDE FAIRING COVER	CRACKED	88.00	88.00
1	SHIFT GEAR PEDAL	BENT	68.00	68.00
1	THROTTLE HANDLE	NOT NECESSARY	62.00	-
1	BRAKE LEVER	CUT	52.00	52.00
1	CLUTCH LEVER	CUT	52.00	52.00
1	INNER COVER	NOT NECESSARY	118.00	-
1	FRONT CENTER COVER FOR SIDE LAMP	NOT NECESSARY	188.00	-
	LESS 10% DISCOUNT		-	-153.93
			10,753.20	1,385.37
	<u>SPECIAL NETT ITEMS</u>			
2	NUMBER PLATE (SN)	NOT NECESSARY	70.00	-
2	BLTS FORK OIL (SN)	NOT NECESSARY	60.00	-
2	BLTS BRAKE OIL (SN)	NOT NECESSARY	60.00	-
1	METER CABLE (SN)	NOT NECESSARY	65.00	-
1	THROTTLE CABLE (SN)	NOT NECESSARY	65.00	-
1	SET WIRING HARNESS (SN)	NOT NECESSARY	250.00	-
1	HORN ASSY (SN)	NOT NECESSARY	65.00	-
2	TYRE (SN)	NOT NECESSARY	200.00	-
1	GASKET (SN)	NECESSARY	30.00	30.00
1	SPARK PLUG (SN)	NOT NECESSARY	18.00	-
1	BRAKE PAD (SN)	NOT NECESSARY	25.00	-
1	RADIATOR ASSY (SN)	NOT NECESSARY	658.00	-
1	RADIATOR HOSE (SN)	NOT NECESSARY	158.00	-
1	BRAKE DISC (SN)	NOT NECESSARY	183.00	-
1	FRONT BASKET (SN)	NOT NECESSARY	88.00	-
1	FRONT BRAKE CALIPER (SN)	NOT NECESSARY	250.00	-
1	SET REAR BOX WITH BRACKET (SN)	CUT	288.00	200.00
1	ERP ASSY (SN)	CUT	58.00	58.00
			2,591.00	288.00
	<u>LABOUR</u>			
	LABOUR CHARGES TO REPAIR AND PANEL BEAT BODY FRAME STRUCTURE CUTTING / WELDING AND REPLACING THE ABOVE MENTIONED PARTS. INCLUSIVE OF THE REPAIR OF RIM AND BODY FRAME ASSY. TRANSPORT.		3,000.00	300.00
	TO REPLACE WIRING HARNESS SYSTEM INCL CHECKING.	NOT NECESSARY	240.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO TUFF COAT AFFECTED AREAS.		180.00	30.00
	TO RESPRAY AFFECTED AREAS.		1,600.00	200.00
			5,080.00	590.00
GRAND TOTAL			18,424.20	2,263.37
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,700.00

Report Ref No. CS3/LPC17013103/Stbs2-1

YEANG WAI KEEN

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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