

Enquire Transfer Fee

Vehicle Details			
Vehicle No.	FBD8294X		
Vehicle Type	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1	No Attachment		
Vehicle Scheme	Normal		
Vehicle Make	YAMAHA		
Vehicle Model	FJR1300 ABS		
Chassis No.	JYARP13A000005176		
Propellant	Petrol		
Engine No.	P510E022443		
Engine Capacity	1298 cc		
Maximum Power Output	-		
Maximum Laden Weight	429 kg		
Unladen Weight	291 kg		
Year Of Manufacture	2009		
Original Registration Date	07 Aug 2009		
Lifespan Expiry Date	-		
COE Category	D - Motorcycle		
Quota Premium	\$902.00		
COE Expiry Date	06 Aug 2019		
Road Tax Expiry Date	06 Aug 2018		
Inspection Due Date	06 Aug 2018		
Intended Transfer Date	18 Nov 2017		
CO2 Emission	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee (s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee	11.00	-	11.00
Total Amount Payable			11.00

You may print this page for reference.

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	06/11/2017 16:19
Date Of Accident	05/11/2017 01:30
Exact Location Of Accident	PIE(CHANGI) AT THE 15KM MARKBEFORE WHAMPOA FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBD8294X
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD SHAFUL ANWAR BIN ABDUL RAZAK
NRIC No	S7621270H
Email Address	DABONZ88@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82820831
Alternative Phone No	OFFICE-82820831

Vehicle Particulars

Manufacturer	YAMAHA
Model	FJR1300 ABS
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MC/00088515/05

Cover Note Number

Driver

Name of Driver	MUHAMMAD SHAFUL ANWAR BIN ABDUL RAZAK
NRIC No	S7621270H
Date Of Birth	10/07/1976
Occupation	INDOOR
Date Of Driving Pass	14/05/2000
Driving Experience	17 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82820831
Fax Number	
Contact Number	OFFICE-82820831
EMail Address	DABONZ88@GMAIL.COM

Address
 Postcode
 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 CHAIN COLLISION
 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) 1

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name CHANGI N.P.C
 Police Station Address ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO: (T/20171105/2094) ON THE 5/11/2017, I WAS ON THE FIRST LANE ALONG PIE TOWARDS CHANGI NEAR TO WHAMPOA FLYOVER. THERE WAS AN ACCIDENT EARLIER ON THE FIRST LANE AND THE CARS IN FRONT OF ME STOPPED. STOPPED AS WELL TO FIND THE OPPORTUNITY TO FILTER TO THE 2ND LANE. WHILE WAITING TO FILTER LEFT, THE VEHICLE SJS3643G COLLIDED ON TO THE BACK OF MY MOTORCYCLE. THE IMPACT OF THE COLLISION PUSHES MY MOTORCYCLE TO COLLIDE WITH THE VEHICLE SJJ8958M AS I WAS THROWN OFF FROM MY MOTORCYCLE. I TRIED TO GET UP AND HOP TO THE NEAREST RAILING FOR SAFETY REASONS. I MANAGED TO EXCHANGE PARTICULARS WITH THE VEHICLE THAT I COLLIDED WITH. THE TRAFFIC POLICE THAT WAS ATTENDING TO THE EARLIER ACCIDENT CAME AND HELP TO CALL FOR AMBULANCE. I WAS THEN CONVEYED BY AMBULANCE. I SUFFERED ABRASIONS AND BRUISES FROM THE ACCIDENT AND WAS GIVEN 4 DAYS OF MC.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJS3643G
 Vehicle Make/Model/Colour HONDA/FIT 1.3G A
 Details Of Properties
 Name of Driver UNKNOWN DRIVER
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJJ8958M

Vehicle Make/Model/Colour TOYOTA/COROLLA AXIO

Details Of Properties

Name of Driver JOHNSON

NRIC/Passport Number

Contact Number 91597827

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name MUHAMMAD SHAFUL ANWAR BIN ABDUL RAZAK

Approximate Age 41

Injuries Sustain ABRASIONS AND BRUISES

Injured person in which vehicle? FBD8294X

Were seat belts worn? NO

Was injured conveyed to hospital by ambulance? YES

Address

Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.

VERIFIED BY AJAX MARS

REPORTING OFFICER

Muhammad Faizal

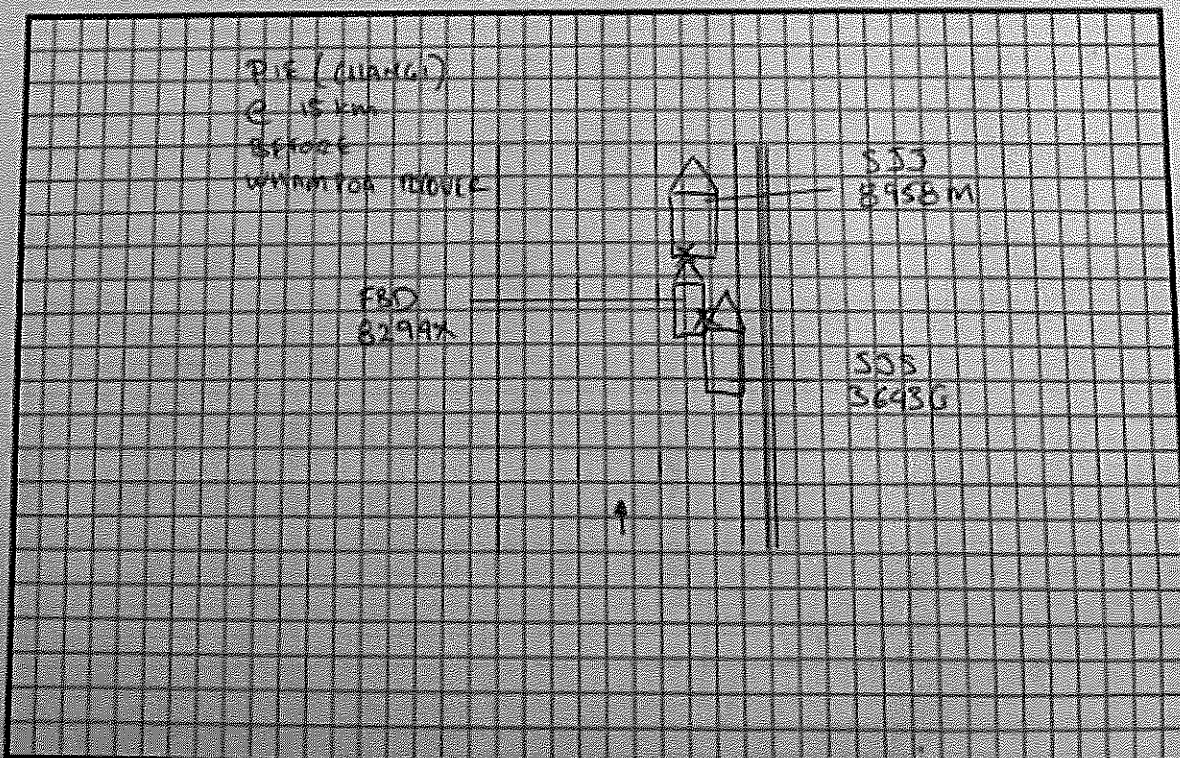
Bin Pablia

Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date & Time

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

Sketch Plan





SINGAPORE POLICE FORCE



T/20171105/2094

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

1 of 4

Report No. T/20171105/2094

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/11/2017 17:27		Vide Report No.:		Station Diary No.: 38	
Informant's Particulars					
Name of Informant: MUHAMMAD SHAFUL ANWAR BIN ABDUL RAZAK			Address: APT BLK 127 SIMEI STREET 1 #03-304 SINGAPORE 520127		
ID Type / ID No.: NRIC NO / S7621270H			Contact No.: Home/Office: Mobile: 82820831		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 10/07/1976	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: LOGISTICS ANALYST			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 05/11/2017 01:30	Type of Location: Bend
Location: Along Road 1 PAN ISLAND EXPRESSWAY Towards Changi Airport, at the 15KM mark before whampoa flyover				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBD8294X		YAMAHA	FJR1300 ABS	Black		0
SJJ8958M						0
SJS3643G						0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20171105/2094

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20171105/2094

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20171105/2094

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

4 of 4

Report No. T/20171105/2094

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 NUR MUHAMMAD ISKANDAR BIN
REINDIO

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 LIM ENG KUAN, CLARENCE

Contact No.: 65476195

SN 160

Authentication Stamp

NP168

Signature:

Singapore Police Force

Signature Of Informant:

Date/Time:

05/11/2017 17:27

Classification Of Case:

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-17-166655

Date of Request: 07/11/2017

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 07/11/2017
Enquiry By Tan Chok Lok
TP Vehicle No. SJS3643G
Accident Date 05/11/2017

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJS3643G	ECICS Limited	13/08/2017-12/08/2018	63374779 /6303 0178

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-17-166655

Date of Request: 07/11/2017

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 07/11/2017
Enquiry By Tan Chok Lok
TP Vehicle No. SJS3643G
Accident Date 05/11/2017

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



QUOTATION

Customer :

NO. : 32149

ECICS LIMITED

T TEMASEK BOULEVARD
#10-01 SUNTEC TOWER ONE
Singapore 038987

MOTOR CLAIMS DEPT

DATE : 17/11/2017

CLAIM NO. : 11059

POLICY NO. : MC/00088515/05

FROM : RAYMOND

VEHICLE NO. : FBD8294X

MAKE/MODEL : YAM / FJR1300 ABS

(Page 1 of 3)

S/N	Description	Action	Qty	Unit Price	Amount
1	BALL BEARING STEERING CONE (BIG) P/N: 13452	REPLACE	1.00	\$1.50	1.50
2	BAR HANDLE LH	REPLACE	1.00	\$218.00	218.00
3	BOX SIDE (LH) P/N: 40574	REPLACE	1.00	\$1,880.00	1,880.00
4	BOX SIDE (RH) P/N: 40575	REPLACE	1.00	\$1,880.00	1,880.00
5	COVER CRANKCASE LH P/N: 55870	REPLACE	1.00	\$182.00	182.00
6	COVER GRIP (GRAB ON) P/N: 56090	REPLACE	1.00	\$75.00	75.00
7	COVER SIDE RH 2	REPLACE	1.00	\$90.00	90.00
8	COVER TAIL 2	REPLACE	1.00	\$165.00	165.00
9	COWLING UPPER ASSY 1 P/N: 40617	REPLACE	1.00	\$283.00	283.00
10	DAMPER COVER SIDE RH 2	REPLACE	1.00	\$8.50	8.50
11	EMBLEM 3D	REPLACE	1.00	\$38.00	38.00
12	FOOTREST REAR RH	REPLACE	1.00	\$21.00	21.00
13	FRAME REAR COMP	REPLACE	1.00	\$1,365.00	1,365.00



S/N	Description	Action	Qty	Unit Price	Amount
14	GASKET CRANKCASE COVER P/N: 48868	REPLACE	1.00	\$25.00	25.00
15	GASKET MUFFLER P/N: 49863	REPLACE	2.00	\$18.00	36.00
16	LABOUR P/N: 06766 - LABOUR QUOTED FOR DISMANTLING AND INSTALLATION OF PARTS.	Supply/Install	24.00	\$35.00	840.00
17	LOWER FRONT BODY RH P/N: 40590	REPLACE	1.00	\$1,190.00	1,190.00
18	MIRROR LH P/N: 40593	REPLACE	1.00	\$248.00	248.00
19	MIRROR RH P/N: 40594	REPLACE	1.00	\$248.00	248.00
20	MUFFLER ASSY 1 P/N: 40595	REPLACE	1.00	\$1,659.00	1,659.00
21	MUFFLER ASSY 2 P/N: 40596	REPLACE	1.00	\$1,659.00	1,659.00
22	PEDAL GEAR	REPLACE	1.00	\$145.00	145.00
23	PLUG COVER 2 P/N: 45266	REPLACE	2.00	\$3.00	6.00
24	REPAIR FUEL TANK	Repair	1.00	\$155.00	155.00
25	RIVERT P/N: 49845	REPLACE	10.00	\$1.50	15.00
26	RUBBER FOOTREST FRONT P/N: 34783	REPLACE	1.00	\$25.00	25.00
27	SCREW PAN HEAD P/N: 24409	REPLACE	2.00	\$2.50	5.00
28	SEAT ASSY TANDEM	REPLACE	1.00	\$357.00	357.00
29	SLIDER FRAME SET (MOTOVATION) P/N: 40764	REPLACE	1.00	\$138.00	138.00
30	SPRAY PAINTING ON FUEL TANK	Spray	1.00	\$250.00	250.00
31	SPRING COMPRESSION	REPLACE	1.00	\$1.50	1.50
32	STAY 1 P/N: 40613	REPLACE	1.00	\$685.00	685.00
33	STAY 1 P/N: 40612	REPLACE	1.00	\$285.00	285.00
34	STAY MUFFLER 2	REPLACE	1.00	\$98.00	98.00

SUB TOTAL
GST @ 7 %

\$14,277.50
\$000.12



CERT NO. 2302-1-0333
ISO 9001: 2009

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
GRAND TOTAL					\$15,276.93

Validity: 30 days

For & on Behalf of
BAN HOCK HIN CO PTE LTD

Acknowledge & Accepted By



RAYMOND

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



CERT NO. 2032-1-0353
ISO 9001:2008