Enquire Vehicle & Owner Information (Vehicle No. SKC4916K As At 11 Oct 2017 / 17:45:00)

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

Clindenii Owicier Deitalle

Owner ID Type:

Singapore NRIC

Owner ID:

S1218216C

Owner Name:

TAN NGOH PHENG

Registered Address Type:

HDB/HUDC

Registered Block/House

No.:

688F

Registered Street Name:

WOODLANDS DRIVE 75

Registered Unit No.:

#02-80

kégistered Building Name: -

Registered Postal Code:

e dittelihi Melhija e ibresicijila.

736688

Vehicle No.:

()

5KC4916K

Make Description/Model:

CHERY/T11 1.6 MT ABS D/AIRBAG SR RR 2WD 5DR

Insurance Company Name: FWD SINGAPORE PTE. LTD.

EROFIA MOTOR TRADING PTE LTD

1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

E-Mail: erofia@singnet.com.sg / erofia2@gmail.com

Tel: 67527740 Fax: 67528669

TO ARRANGE PRE-REPAIR SURVEY **BIKE IS IN / NOT IN WORKSHOP** TEL: 90696165 - MR TEO

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883 Tel: 67527740 / 97761091 Fax: 67528669 Co. Reg No. 201202259N

: Aiman Hafiz Name

Vehicle No: FS 8074 M

Accident Date:

11-Oct-17

Bin Nor Anuar

Vehicle Model: Piaggio PX200

Estimated Renair Costs

	Estimated Repair Costs		
<u>Qty</u>	<u>Description</u>	An	nount S(\$)
	<u>List Items</u>		
1	Front fender	\$	85.00
1	Front fork assy	\$	580.00
1	Front shock absorber	\$	320.00
1	Front fork cover	\$	42.00
1	Front rim	\$	80.00
1	Front brake disc	\$	150.00
1	Top cowling	\$	120.00
1	Front centre cowling	\$	85.00
1	Front panel moulding	\$	110.00
1	Headlamp	\$	120.00
1	Front signal -R/H	\$	65.00
1	Side mirror -R/H	\$	60.00
1	Handle bar	\$	185.00
1	Hand grip (1 set)	\$	38.00
1	Brake lever	\$	26.00
1	Step board panel	\$	180.00
1	Step board panel moulding	\$	55.00
1	Engine cover -R/H	\$	155.00
1	Engine cover moulding -R/H	\$	50.00
1	Kick starter	\$	90.00
1	Gear selector	\$	98.00
1	Exhaust pipe	\$	295.00
1	Rear signal -R/H	\$	55.00
1	Rear taillamp	\$	85.00
1	Rear spoiler	\$	55.00
		\$	3,184.00
	Less 10		318.40
		\$	2,865.60

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883 Tel: 67527740 / 97761091 Fax: 67528669 Co. Reg No. 201202259N

Name

: Aiman Hafiz

Bin Nor Anuar

Accident Date:

11-Oct-17

Vehicle No: FS 8074 M

Vehicle Model: Piaggio PX200

Estimated Repair Costs

	Special Nett Items		
1	Number plate (1 set)	\$	28.00
1	Steering cone (1 set)	\$	85.00
1	ERP IU	_ \$	170.00
		\$	283.00

S/No.	<u>Labour</u>	
1	To provide towing service.	\$ 50.00
2	To provide labour.	\$ 380.00
3	To respray painting.	\$ 1,000.00
4	To repair body frame.	\$ 450.00
		\$ 1,880.00

Grand Total

5,028.60

Dollars: Five Thousand Twenty-Eight And Sixty Cents Only.

EROFIA MOTOR TRADING PTE LTD

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 06/12/2017 10:28

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 witholding 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	06/12/2017 10:20
Date Of Accident	11/10/2017 17:45
Exact Location Of Accident	ALONG GAMBAS AVENUE
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FS8074M
Insured/Policyholder	
Name Of Registered Owner	AIMAN HAFIZ BIN NOR ANUAR
NRIC No	S9326536Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91284224
Alternative Phone No	OTHERS-91284224
Vehicle Particulars	
Manufacturer	PIAGGIO
Model	PX200E-198CC
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
Fleet Policy	NO
Policy Number	5088564340
Cover Note Number	
Driver	마이크림 그 보다 가는 사람들이 되었다. 교육 발표 기계 :
Name of Driver	AIMAN HAFIZ BIN NOR ANUAR
NRIC No	S9326536Z
Date Of Birth	25/07/1993
Occupation	INDOOR
Date Of Driving Pass	27/02/2012
Driving Experience	5 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91284224
Fax Number	

OTHERS-91284224

NOEMAIL

Email Address

DETAILS OF INJURED PERSON 1

Name AIMAN HAFIZ BIN NOR ANUAR

Approximate Age 2

Injuries Sustain

Injured person in which vehicle? FS8074M

Were seat belts worn? NO

Was injured conveyed to hospital by ambulance? YES

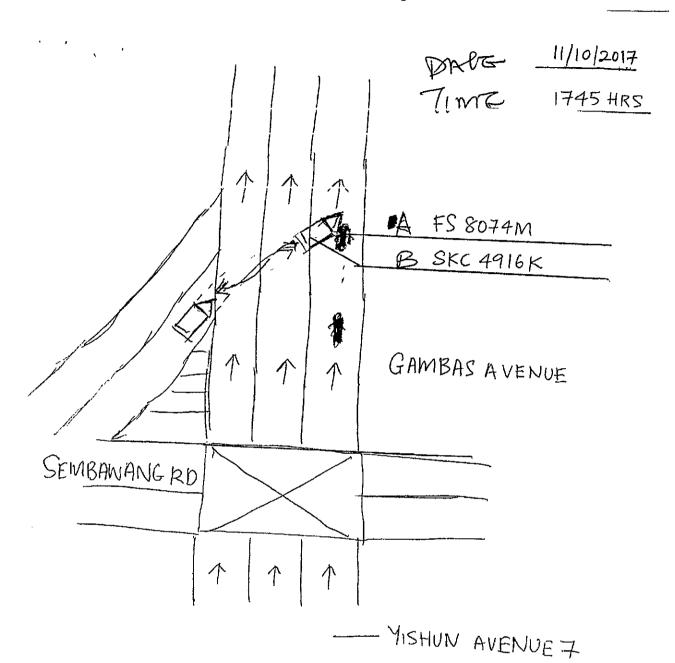
Address BLK 28 #03-271 MARSILING DRIVE

Postcode 730028

Accident Sketch Plan Pg. 1

والمستقل والأراوي مضاوعه والمعالي المعالية والمستعلقة والمراج الأراج المراج والمراج والمراجع

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SKETCH PLAN			
	TT:	·	ا با با المنظمان سيو
و از چارچین پورندست به منتشد به اماردهاند. چار از دو چارچین ساختین به منتشد به اماردهاند			
			
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DESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT		
	71		
refer to	police Report no	$T/20^{\circ}$	198.
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			:
DECLARATION			0.6 DEC 2017
I/We declare the foregoing particulars	are true in every respect.		0 & DEC 2017
			TO ACT PART DIMPEGATO
Mar. 7	Was	S. 1	IDAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4
	170	7	Singapore 415933
Policyholder's Signature	Driver's Signature		Reporting Ceffick: Refschield Signature
Date & Time:	(If driver is not the policyholder) Date & Time:		Name: Fax: 67492305 พระเชิกหม่งงางจะไปเพื่อsingnet.com.sg



V

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- By the lodgment 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 aforesald.
- 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

0 6 DEC 2017

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

1DAC KAKI BUKIT(VAC) 23 KAKI BUKITAVE 4

Reporting epyle Figsgne's Signature

Name: Fax: 67492305 EMBS/FIX No. 67492305 EMBS/FIX No. 67492305 Address

BLK 28 #03-271 MARSILING DRIVE

Postcode

730028

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident?

Was any other material or property damaged?

YES YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BUKIT PANJANG NORTH NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 27 MARSILING DRIVE, POSTCODE: 730027, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-3689999 - FAX NO: 63682383

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

AS PER POLICE REPORT No.T/20171012/2198. ATTENDED BY SITI

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

Vehicle Make/Model/Colour

SKC4916K

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





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Report No. T/20171012/2198

1 of 3

Tel No: 1800-3689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/10/2017 22:17		nde:	Vide Report No.:	Station Diary No.: 30		
Intoments	કારમતીલા	arsf Figure 1				
Name of In			Address:			
AIMAN HAFIZ BIN NOR ANUAR			APT BLK 28 MARSILING DRIVE #03-271 SINGAPORE 730028			
ID Type / II			Contact No.:			
NRIC NO /	S9326536	SZ	Home/Office: Mobile: 91284224			
Nationality SINGAPOR		N	Email:			
Sex: Age: Date of Birth: Male 24 25/07/1993			Type of Informant: Rider			
Race: Malay			Language:	Institution / School Name:		
Occupation: PROJECT MANAGEMENT OFFICE			Driving Licence Information: Class: 2B,3	Date of Expiry:		

General Informat	ion of the Accident	er i jaran da karan d	notalogica e propin	
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/10/2017 17:45	Type of Location: Straight Road
GAMBAS AVENU	aveling Toward Road 2 JE E 7 TOWARDS GAME			
Weather:		Road Surface:		Road Speed Limit:
Clear Traffic Flow: Two Way		Dry Traffic Control: Not Controlled	1	Traffic Volume: Moderate
Type of Collision: Moving Vehicle A				Anyone conveyed by ambulance: Yes

Details of V	ehicle Involved	ere je je konje e				TO PERSONAL PROPERTY.
Vehicle No.	Type	Make Make	Model	Color	Condition	No of Passenger
FS8074M	Motorcycle	PIAGGIO	PX 200E	Green	Seriously	0
					Damaged	
SKC4919K	Car				No	0
ı					Damage	

Details of Ve	hicle insurance	edodig sami sebesti:		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FS8074M	NTUC Income Insurance Co-Operative	5088564340	15/03/2017	14/03/2018
	Limited			





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Tel No: 1800-3689999

2 of 3 Report No. T/20171012/2198

CONTINUATION OF REPORT

Details of Rerso Any Pedestrian Ir		Egrafia (Egrafia) Vigilia (Egrafia)	ne n	10121051387.487	Table To part (c.)	
No. of Pedestrians Injured: NIL Use of Pedestrian Crossing: NA					ing: NA	
18der	her bergind kilomete	Antonio de la compansión de la compansió	18 10 19 10 10 10 10 10		S. Wajunj.	
Name	AIMAN HAFIZ BIN N	OR ANUAR		ID No	•	S9326536Z
Related Vehicle	FS8074M (Motorcycle		Conta	ct No.	91284224	
Hospital/Clinic	KHOO TECK PHUAT HOSPITA			Class Drivin Licene Expiry	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	11/10/2017		Date Disc	harge	12/10)/2017
No. of Days granted Medical Leave 10		Degree of	Injury	Serio	us	

Brief Details.

On the 11/10/2017 at about 1745hrs, I was travelling along Yishun Avenue 7 towards Gambas avenue, I was at the extreme right lane of the straight road, Suddenly a Singapore registered vehicle (SKC4916K) came from Sembawang road filtering into Gambas avenue without signaling, The driver abruptly change lane to the extreme first lane. I avoid the collision and fell on the right side of the divider. The driver then just drove off his vehicle without stopping. A motorist stopped and called for ambulance assistance. While waiting for ambulance a Chinese guy came to approach me and told me that he witness that the driver of (SKC4916K) change lane abruptly. I was then attended by a paramedic and was conveyed to KTPH hospital. The doctor attended to me and I had injuries on my right side of the head, Abrasion on the right shoulder, cuts and abrasion on both of my hands. I did a X-ray for my chest, shoulder, wrist and right hip. No fractured was found except my right wrist suspected to have a hairline crack. The doctor then warded me for pain observation in ED Trauma ward and discharge me on the 12/10/2017 and gave me 10 days of HL (11/10/2017 to 20/10/2017) reference number: KH20171210815. I also wish to state that when I conveyed Traffic police was at scene.





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Tel No: 1800-3689999

3 of 3 Report No. T/20171012/2198

CONTINUATION OF REPORT

Sketch Plan

NP168

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 / Signature Of Officer Recording The Report: Signature Of Interpreter: Not applicable Officer Recording The Report: Signature Of Interpreter: Not applicable Officer Recording The Report: Signature Officer Recording The Recording	Signature Of Informant: Date/Time: 12/10/2017 22:17
Officer In Charge Of Case: TP / GIT / Staff Sgt SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476394	Classification Of Case:
Authentication Stamp	···



T/20171205/2081

of 1

Case Summary Form (CSF)

Report No.T/20171205/2081

Manual Form Serial No

Report Number

T/20171205/2081

Vide Report Number

T/20171012/2198

Date/Time of Report Made

05/12/2017 14:43

Place Report Lodged

Traffic Police Division HQ

Name of Informant

Aiman Hafiz Bin Nor Anuar

ID Type / ID No.

NRIC NO / S9326536Z

Home/Office

Mobile

91284224

Email

Date/Time of Incident From

11/10/2017 17:45

Date/Time of Incident To

Incident Location

200 GAMBAS AVENUE SINGAPORE 738077

Brief Facts

On 12/10/2017 at about 2217, I lodged a report ref T/20171012/2198 at Bukit Panjang North NPP. I would to amend the plate number that was stated in the report from SKC4919K to SKC4916K. That is all.

Case Sensitivity

No

Officer-in-Charge of Case

TP / Traffic Police Division HQ /

SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN

Contact No.

65476394

Classification of Case

1) NO OFFENCE DISCLOSED



Certificate of Insurance

MOTOR VEHICLES (THIF	RD PARTY RISKS AND CO	MPENSATION) AC	T (CHAPTER 189)	-
MOTOR VEHICLES (THIS				
ROAD TRANSPORT ACT,	, 1987 (MALAYSIA)			
MOTOR VEHICLES (THIP	D PARTY RISKS) RULES,	1959 (MALAYSIA)		
Certificate Number :	5088564340		Cover : Third Party	
1. Index mark and Reg	istration Number of Veh	nicle	: FS8074M	
Chassis Number			VSX1T6008400	
2. Name of Policyholde	er		: AIMAN HAFIZ NOR AI	NUAR
3. Effective Date of Ins			: 15 Mar 2017	
4. Expiry Date of Insura	ance		: 14 Mar 2018	
5. Persons or Classes o			2777101 2020	
(a) Named Driver(s				
Provided that the Motor Vehic	ne person driving is perr	itted and is not dis	qualified by order of a	other laws or regulations to drive Court of Law or by reason of any
6. Limitations as to Use				
(a) Use for social de	omestic and pleasure pu	irposes and in con	nection with the Policy	holder's business or profession.
This Policy does not cov			,	
(a) Use for hire or r	eward.			
(b) Use for racing, p	pace-making, reliability t	trial or speed-testi	ng.	
	iage of goods (other tha			or business.
	pose in connection with		,	
# Limitations rend (Chapter 189) a headings.	dered inoperative by Sec nd Section 95 of the Roa	ction 8 of the Mote ad Transport Act, 1	or Vehicle (Third Party i .987 (Malaysia), are no	Risks and Compensation) Act t to be included under these
EVCESS (SECTION 1)		N1 / A		
EXCESS (SECTION 1)		N/A		
EXCESS (SECTION 2)		N/A		
INSURE WITH COE		N/A	1100 ANII IA	
NAMED DRIVER (1)		AIMAN HAFIZ BIN	NOR ANUAR	
NAMED DRIVER (2)		N/A		
HIRE PURCHASE COMPA		N/A		
SUM INSURED	:	N/A		
Vehicles (Third Party Ris	ks and Compensation) A	Act (Chapter 189) : 2292)	s is issued in accordanc and Part IV of the Road	e with the provisions of the Motor Transport Act, 1987 (Malaysia)
Date of Issue	: 14 Mar 2017 17:43	hrs		
Countersigned By:	Zonaf		For NTUC INCOME	INSURANCE CO-OPERATIVE LIMITED
J	Authorised	Officer		Chief Executive
			`	errier manuskists



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$9326536Z





AIMAN HAFIZ BIN NOR ANUAR

Hace MALAY Date of birth 25-07-1993

8932663Gz

Country of birth SINGAPORE

ARE LIDENSED TO DRIVE MEHICLES IN THE LODGOWING GIVE Motorcycles =< 200 CC
Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg S9326536Z S/No. 9000167153 NP 428A4

Date of Issue 05-08-2008 APT BEK 28 MARSILING DRIVE #U3-2/1 SINGAPORE 730028 '-/ Nigrad NRIC No: \$9326536Z Date: 26/11/2010 (R) No: 6665586