ASS. REC. BY:	TOULS 46 CS CT 1800 1951 / TIVOS 52
Menneh From (Person) Estimated Con	Tautich Assignment (Office) Chory Boon Sen CTI Esta 31/1/18 (1.23pm
OD (F) Will To Inspect Ve at Workshop of of B K	Stip restor Rest
Sum Insured:	Briges N1452961460 Claim No. SNM 18000376 C02
Make of Veh: (Client's Recer: CA / REV	(REP. / REV 24 HRS WP)
	135pm@31 111 Person Contacted Ah Hnat Vehicle (D) OUT
Date/Time	Action/Instruction (Sestimate FBB 3359L - NBA GAI 8000123/y D.O.A. 14/12/2019 SLR 344 X - NBA GAI 8000123/y D-O.A. 14/12/2019
145 18	@ 453pm Ah Hurt will arrange for resurvey. @ 557pm Ah Hurt said TP pay his own repair cost

Survey Department Check List (Case Handler)

Reference No. :	cs	(TI 1800 1951 Tive	13
Policy Type: OD	/ TP	(TI 1800 1951 Tive TP RES / TL / EVA	

Case Handler

Typist

dmin (): Case handler to make sure all Inform Assign Form	<u>Y-Date</u>	N-Date	Y-Date	N-Date
C	Reference No.	V			
C	Customer Code				
N	Assign From				
c	Assign Date	V			
С	Veh No (Inspected)	~			
C	Veh No (Insured)	~	Le-normore de		
c	D.O.A	~			
C	Policy No	~			
	Claim No	_			
С	Insurance Authorisation (CA /REV/REP)				
С	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	~			
С	Report Type				
С	Weekend Charges	1			
N	Survey held at/Repairer				
С	Excess				
urvey	or (): Case handler to make sure t	he surveryor c	ompleted a	ll required	informa
The Control of the	nment Form				1
C	Vehicle No	~			
С	Regn Month/Year	~			-
N	Vehicle Type	~			
N	Make & Model	~			
C	Engine Capacity. (C.C)	~			
N	Colour	~			
C	Odometer. (Sp.Reading)	_			
c	Chassis No	~			
N	General Condition	~			
N	Steering	~			
	Brake	~			
N	Modification (Modi)	~			
N	- A Company of the Co	~			
C	Tyre Size	~			
N	Tyre Make	-			
c	Tyre Balance				
C	Date of Inspection	~	1		
N	Survey held	~			
N	Des.of Damages				
(2) Syst	em - (Views/Merimen)		T		
С	Damaged Vehicle Photographs Uploaded				
(3) Wo	rkshop Estimate/Assignment Form				
N	ALL Parts condition	/		-	
C	Market Value for OD cases				-
c	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				-
-	Days of repair	V			_
C					
c	Finalised Amount				
С	Finalised Amount Re-inspection Cases to Finalize within 5 Days]	
C C	Finalised Amount Re-inspection Cases to Finalize within 5 Days tem - (Views/Merimen)			,	

Case Handler



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 Internat	ionale Des Experts En Autom	obile			
CHI	NA TAIPING INSUI	RANCE (S) PTE LTD	Ref : CS/CTI1800195	51/T1vd3			
	ISON ROAD #16-0 INGLEAF TOWER	SINGAPORE 079909	Date: 31-01-2018 Code: CTI				
		Policy Particular	s :- THIRD PARTY CLAI	M			
	Insured Veh.	SLR 344X	Veh. Inspected	FBB 3359L			
	Policy No.	DMHCSN1752961700	Coverage (\$)	0.00			
	Claim No.	SNM18D00576C02	Excess (\$)	0.00			
	Assign From	MERIMEN (CHONG BOON SEN)	Assign Date	31/01/2018			
		Vehicle Par	ticulars & Condition				
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer	1*	Steering				
	Brakes		Modification				
	General						
3.		Cond	itions 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.		Descrip	tion of Damages				
5.	Boards No.	Gene	ral Information				
	Accident Date	14/12/2017	Inspection Date				
	Survey held at	SOUTHERN MOTOR	The state of the s				
		BLOCK 1006 BUKIT MERAH	LANE 2 #01-10 SINGAPOR	E 159762			
5a.	Continue Sin S		Remarks				
		ON WAS CONDUCTED ON A"W					

No results.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Authled	Status
Main	30 Jan 2018		31 Jan 2018 13:23 Assign			and real ca	New Assignment Cancel Case
	Main	Refere	nce	Claim De	ails	Documents	Show All
	JBFOLDER DET	AILS		de la la la de gardina		[Created by i	nsurer]
Insured:	reat.						
Main Claim			O SALVAKUMA				
Vehicle Reg. No.:		FBB3359L			Loss:	14/12/2017 00:00 - :59	
Claim Type:		TP / SNM18	TP / SNM18D00576C02		Policy/Cover Note No.:		61700
Vehicle Reg. No. (Insured):		SLR344X		Policy N	Policy No. (Claimant):		
				Excess		S\$0.00	
Repairer:		Southern Mo	tor (HQ) BLK 1	006 BUKIT MERA	H LANE 2, #01-10,	159762 Bukit Merah	- Tel: 62730369
Handling I	nsurer:	China Taipin	g Insurance (S	ingapore) Pte.	Ltd. (HQ) - Tel: 638	89 6111 [Handled	by Chong Boon Ser
Adjuster:		LKK Auto Co	nsultants Pte L	td (HQ) - Tel: 6	256-3561 [Final	Rpt due 09/02/	2018]
Adj Asg. R	emarks:	EST \$10,036.2	20, ASSIGN MOH	D RASUL AS SJE			
ASSOCIA	TED MAIL RECE	IVED				View All	l c
There are	no mail for this ca	se.				VIEW AII	Compose Case Mail
ALL ASSO	OCIATED TASKS	; =			View All Se	arch Tasks Create	New Task Complete
Due Date	e Priority T	ype Task Grou	p Subject	Handler A	ssigned By Co		

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 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.

- Any false reporting may be referred to the Police for Investigation.
 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	02/01/2018 18:59
Date Of Accident	14/12/2017 02:15
Exact Location Of Accident	AYE TOWARDS TUAS BEFORE AXIT 2A
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBB3359L
Insured/Policyholder	
Name Of Registered Owner	GANESAN S/O SALVAKUMAR
NRIC No	S9203920Z
Email Address	GANESANSALVAKUMAR26@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-88699532
Alternative Phone No	OTHERS-88699532
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400-399CC
Exact Purpose for which vehicle was being used at time of accident	AFTER NIGHT WORK GOING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO ge
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MOMVM000000309-00-001
Cover Note Number	
TO SECURE OF THE PARTY OF THE P	

J	D	r	i	V	e	r

GANESAN S/O SALVAKUMAR Name of Driver

S9203920Z NRIC No 26/01/1992 Date Of Birth INDOOR Occupation 22/06/2016 Date Of Driving Pass

1 YEAR AND 5 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-88699532 Mobile Number

Fax Number

OTHERS-88699532 Contact Number

GANESANSALVAKUMAR26@HOTMAIL.COM EMail Address

Address

BLK 64 TELOK BLANGAH DRIVE

#07-196

Postcode

100064

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 TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

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

TELOK BLANGAH NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 51 TELOK BLANGAH DRIVE , POSTCODE: 100051 ,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-2729999 - FAX NO: 63772526

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171216/2153

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

SLR344X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

China Taiping Lumance (Anipepone) PKELTON 3 Anson Ra #16-00 Apringhed Tower Autopone 079909 Tel 63296111

Address

Fan 62347175

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 30

DETAILS OF INJURED PERSON 1

Name

GANESAN S/O SALVAKUMAR

Approximate Age

Injuries Sustain

SERIOUS INJURY

Injured person in which vehicle?

FBB3359L

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 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 aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

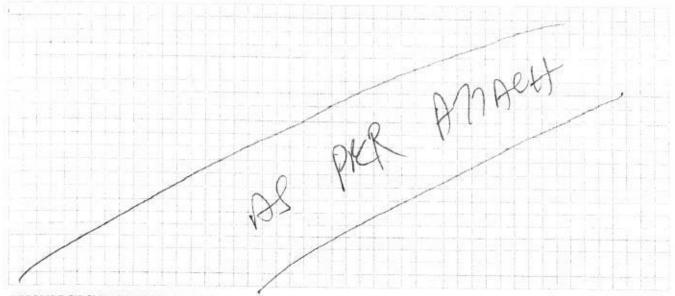
I understand, acknowledge, agree and consent that:

- 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)
 - (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.

Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature Name: NRIC/FIN No. 1001 Wald B



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The state of the s
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010

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Date & Time:

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

Reporting Centre Pessonnel's Signature Name:
NRIC/FIN No.: KOFA/ WATAB





1 of 3

Report No. T/20171216/2153

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:- 16/12/2017 21:42			Vide Report No.: A/20171214/0021		23	
Informan	t's Particu	lars	图 多元 在 1776 年	index part of	CHARLEST CONTRACTOR	
Name of	Informant:	VAKUMAR	Address: APT BLK 64 TELOK BLANG/ 100064	AH DRIVE	#07-196 SINGAPORE	
ID Type / ID No.: NRIC NO / S9203920Z		20Z ·	Contact No.: Home/Office:	Mobile: 88699532		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Age: Date of Birth:			Type of Informant:			
Race:		- In-	Language: English	84	on / School Name:	
Occupat	ion: ERING OF	FICER	Driving Licence Information: Class: 2B,2A	Date o	f Expiry:	

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/12/2017 02:1	Type of Location: Bend
0.800	Tuas before exit 2A.		g e	Road Speed Limit:
Weather: Clear	Roa	d Surface:	12	Position and the second
Traffic Flow:	Tra	fic Control: Controlled	r.	Traffic Volume: Light
One Way Type of Colli Retween Mo			(6)	Anyone conveyed by ambulance: Yes

THE RESERVE OF THE PARTY OF THE	ehicle Involve	Make	Model	Color	Condition	No of Passenge
Vehide No.	Туре	ALL LOSS OF THE PARTY OF THE PA	CHARLES TO A CONTRACT OF THE PARTY OF THE PA	Crow	Totally	0
FBB3359L	Motorcycle	HONDA	CB400	Grey	Damaged	
					Seriously	0
SLR344X	Car	42			Damaged	11000

Details of V	ehicle Insurance	I .	Effective	Expiry Date
Vehicle No.	Insurance Company	Insurance No		20/12/2017
FBB3359L	GREAT AMERICAN INSURANCE COMPANY	MT2016TR00273	17/09/2016	20/12/2017





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999 2 of 3 Report No. T/20171216/2153

CONTINUATION OF REPORT

Details of Perso	n Involved	Product in	STELL STA	Kalifornio ta	and the	
Any Pedestrian Ir	rvolved: No		(0)		The state of	
No. of Pedestrian	s Injured: NIL		Use of	Pedestrian	Cross	ing: NA
Rider .	ANGEST OF BUILDING		会の様となった。	建设体性	KY KENT	
Name	GANESAN S/O SAL	_VAKUMAF	2	ID No.		S9203920Z
Related Vehicle	FBB3359L (Motorcy	/cle)		Conta	ct No.	88699532
Hospital/Clinic	SINGAPORE GENE	ERAL HOS	PITAL	Class Drivin Licend Expire	g	Class: 2B,2A Date of Expiry: NIL
Date Treatment	14/12/2017		Date	Discharge	NIL	
No. of Days gran	ted Medical Leave	05	Degre	e of Injury	Serio	us

Brief Details.

On 14/12/2017 at about 0215 hrs, I was riding along AYE towards Tuas along Keppel Flyover. When I was approaching the end of the flyover before the bend, I saw construction work happening along the split road but towards Tuas. As I was heading towards Telok Blangah Road, I decided to keep left.

I did my checks and when there were no cars, I then moved to the extreme left lane. I was the travelling at 60km/h as there were speed stripes. I suddenly felt a hard push against the back of my bike and I skidded. When I hit the floor, I immediately pushed away the bike. When I came to a stop, the bike was quite a distance away from me. The car that hit me from behind also came to a stop. The car is a black Toyota Corolla Axis bearing registration number SLR 344 X . As a result of the collision, I suffered abrasions to both my elbows, both of my hands and wrists, both my knees, my right ankle and my right shoulder blade. I also suffered from 3 broken tooth.

After the collision, I stood up and walked towards the driver. I shouted at the driver to come out and subsequently he came out. He came and hugged me and said "bro, I bring you to Vivocity. We settle privately". When he hugged me, I could smell alcohol coming from his breath. I felt giddy thus I told him to give me some space. I then walked towards the side of the road and sat down on the road. The construction worker then told me to not sit on the road and it was dangerous. I then stood up and walked towards the chevron near the construction site. While I was walking, the driver was still trying to persuade me to settle the matter privately. I then called the police and the ambulance for assistance. I wish to inform that the driver continuously tried to persuade me to settle the matter privately the entire time.

The ambulance came and subsequently conveyed me to Singapore General Hospital. I subsequently got a 5 day MC from the incident.





3 of 3

Report No. T/20171216/2153

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

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: D / Sgt 2 BRANDON CHUA	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/12/2017 21:42
(4)	010-00
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Contact No.:	
Authentication Stamp	
ngapore Rallos Rorce	

Enquire PARF/COE Rebate for Registered Vehicle

ehicle Owner Particulars	0.00 692600	
Owner ID Type:	Singapore NRIC	
Owner ID:	3920Z	
Vehicle Details		
/ehicle No.:	FBB3359L	
Vehicle to be Exported:	No	
ntended De-registration Date:	06 Feb 2018	
Vehicle Make:	HONDA	
Vehicle Model:	CB400	
Primary Colour:	Grey	
Manufacturing Year:	2006	
Engine No.:	NC23E3100526	
Chassis No.:	JH2NC39926M200497	
Maximum Power Output:		
Open Market Value:	\$6,408.00	
Original Registration Date:	10 Mar 2007	
First Registration Date:	10 Mar 2007	
Transfer Count:	6	
Actual ARF Paid:	\$962.00	
Intended PARF Rebate Details		
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	<u> </u>	
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details		
COE Expiry Date:	30 Sep 2026	
COE Category:	D - Motorcycle	
COE Period(Years):	10	



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: If the January 2018

Motor Clover, Department China Taijoning Insurance (Shiggona) Pte Liter 3 Austra Rol #16-00 As ming leaf Town Singapore 079808

Dear Alm

Rei Lot of repair to Horola 28 400 St Mac # - 788 3 3 4 9 L

	38	950 00 CM
pe of meter complete	2.7	33000 04/
" Head lamp		in bt
n meter bracket		65:00 1
n thomps stary		110.00 11
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n Front signal		6500 Cna
7- mile mindered		16500 out
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a 749 brake pumps		143 000 - 6
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		81000 61
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u Feel fank		41000000
a Jork cover		19000 ora
a Rear absorber		frow Le/
- Reev type mudgerand	1 F 2000	
Yours faithfully	Aub Telal	7,173.00

Yours faithfully, SOUTHERN MOTOR

MIN

Tok 63896111 Fox 62+47174-



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

Hondo Ch400 57 Specie - TBB 3 249 L

Date: 18th January 2018 Richer Claims

China Taiping Swarance (Singapore) Pte lital

Aut 70tal: 11 7.17300

I pe of Rear medgeneral Rear box Bux bracket 2 peoch lear Argual Rear dwing arm Reer rim Rear fostrost Rear rin bearing

90 00 de 4 food M15 1 for 00 and 12000 and 1,400-00 ? 21250 CM stor brow 1000 nei/ 10388-00 1038.80

9349.20

Teas 10%

Nett

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:

Fransport Jack budy Rear No plate Jeck fork Tabour

3000 12000 6 100 1200 66 A500 60 3 faor 280 14/0036-20

sur & lukanto com. Tel 63796111

Fan 62347175

Yours faithfully, SOUTHERN MOTOR

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

Case No	tified	Est Submitted	Adj Assigned	Adj Rpt		Adj Subr	mitted I	ns Auth'ed	Status		
	Jan 2018		31 Jan 2018 13:23 Edit Adj Rpt	S\$8,103.20 Edit Estimat		S\$8,10 3 View Rp	Andrew Co.		Report Cancel		ey
Ма	in		Reference	C	laim (Details		Document	s	S	how All
LAIM SUBF	OLDER DE	TAILS					[Created	by insurer]			
sured:	-, Co. Re	g. No.: -									
ain aimant:	GANESAN	S/O SALVAK	JMAR, ID: S920	3920Z			1				
ehicle Reg.	FBB335	9L			Date	of Loss:		7 00:00 - :59 hs and 4 Days Fr	om LTA R	Reg Date (M	fan Yr)]
laim Type:	TP / SN	418D00576C	02		100 March 200 Ma	y/Cover No.:	DMHCSN17	52961700			
ehicle Reg. o. nsured):	SLR344X					y No. mant):	3				
1100110021					Exce		\$\$0.00				
epairer:	Southern	Motor (HQ) B	LK 1006 BUKIT ME	RAH LANE 2,	#01-1	0, 15976	2 Bukit Mera	h - Tel: 6273036	9		
andling nsurer:	The state of the s		e (Singapore) Pt							I DA	dive
djuster:	09/02/2	Consultants P	te Ltd (HQ) - Tel	: 6256-3561 .	[Har	ndled by I	MOHD TAU	IKH BIN HAMI	D] [F	inai Kpt	aue
dj Asg. emarks:	EST \$10,0	36.20, ASSIGN	MOHD RASUL AS	SJE.							
SSOCIATE	D MAIL RE	CEIVED						1	/iew All	Compose	Case Mail
here are no	mail for this	case.									
ALL ASSOC	IATED TAS	sks=					View All	Search Tasks	Create I	New Task	Complete
Due Date	Priority	Туре Та	sk Group Sub	oject Hand	iler	Assign	ned By	Completed On	Cr	eated On	Done
lo results.	summing.	CONTRACT WAY									
Due Date			sk Group Sub	oject Hand	iler	Assign					-

Claim Documents

*FBB3359L (SNM18D00576C02) [SLR344X] TP **GANESAN S/O SALVAKUMAR** Dec 14 2017 12:00AM [-] Southern Motor

Phot	tos/Images		3 per page	•	~
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thur	nbnail	Print
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67	06/02/18 12:52	General View	1 Load 3	PG	1
68	06/02/18 12:52	General View	1 Load J	PG	•
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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:

DMHCSN1752961700

Engine No:

Chassis No:

Odometer:

CS/CTI18001951/T1VD3S2

NC23E3100526

JH2NC39926M200497

Date:

18/07/2018

REFERENCE

Date of Loss:

Handling Insurer:

Claimant Vehicle

China Taiping Insurance (Singapore) Pte.

Ltd.

FBB3359L

14/12/2017

Policy No:

Nature of Claim:

Insured Vehicle No SLR344X

TP

Claim No:

SNM18D00576C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

Reg. Date:

Colour:

No:

FBB3359L

Make & Model:

HONDA CB400, 399cc

10/03/2007 (Man. Year: 2006)

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:

Front Tyre Size:

Front Left Side:

Front Right Side:

Good

120/60R17

Pirelli 5 mm

0 mm

Steering (Serviceable):

No

Footbrake (Serviceable): Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

Yes

Engine Modification:

Rear Tyre Size: Rear Left Side:

Rear Right Side:

160/60R17

0 km

Pirelli 5 mm

0 mm

The above values represent the remaining tyre treads depth

Repairer's	Adjuster's	Difference	Diff %
9,361.20	7,633.20	1,728.00	18.46
0.00	0.00	0.00	
675.00	470.00	205.00	30.37
0.00	0.00	0.00	
0.00	0.00	0.00	
10,036.20	8,103.20	1,933.00	19.26
702.53	567.22	135.31	19.26
10,738.73	8,670.42	2,068.31	19.26
	9,361.20 0.00 675.00 0.00 0.00 10,036.20 702.53	9,361.20 7,633.20 0.00 0.00 675.00 470.00 0.00 0.00 0.00 0.00 10,036.20 8,103.20 702.53 567.22	9,361,20 7,633,20 1,728,00 0,00 0,00 0,00 675,00 470,00 205,00 0,00 0,00 0,00 0,00 0,00 0,00 10,036,20 8,103,20 1,933,00 702,53 567,22 135,31

INSPECTION

Date of Assignment:

Date Inspected:

31/01/2018

Inspected At: 05/02/2018

Southern Motor (HQ)

BLK 1006 BUKIT MERAH LANE 2, #01-10

Singapore 159762

Estimated Period of Repair:

6.0 days

MOHD TAUFIKH BIN HAMID Adjuster:

Manager:

VERON CHEN

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.

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen_printrpt&caseid=679919&extid=263353&CFID=37577617&C... 1/5

(REPAIR COST NOT CONCLUDE) (EXCLUDE CHECK ITEMS S\$1,728.00 NETT)

REPAIR DETAILS

Reference

(Last Synchronised: 18 Jul 2018) Part Source:

HONDA CB400 399cc (Model not available in database) N/A Parts:

(Price-denominated Standard List) Repairer's Labour:

Print Code: (Unsubmitted, no print-code for FBB3359L)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the Validity:

END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

No.	Qty Part No.	Particulars	Condition	Repairer's	Amount
1	1	*REAR MUDGUARD	Deformed	90.00 FL	*90.00 FL
2	1	*REAR BOX	Missing	480.00 FL	*480.00 FL
3	1	*BOX BRACKET	Cracked	180,00 FL	*180,00 FL
3 4	2	*REAR SIGNAL	Cracked	130.00 FL	*130.00 FL
	1	*REAR SWING ARM	*Check	1,400.00 FL	*-FL
5	1	*REAR RIM	Cracked	850.00 FL	*850.00 FL
6	1	*REAR FOOTREST	Broken	35.00 FL	*35.00 FL
7 8	1	*REAR RIM BEARING	Necessary	50.00 FL	*50.00 FL
9	1	*REAR NO. PLATE	Bent	12.00 FS	*12.00 FS
10	1	*METER COMPLETE	Cracked	950.00 FL	*950.00 FL
11	1	*HEAD LAMP	Cracked	320.00 FL	*320.00 FL
12	1	*METER BRACKET	Bent	65.00 FL	*65.00 FL
13	1	*LAMP STAY	Bent	110.00 FL	*110.00 FL
14	1	*HEAD LAMP BRACKET	Bent	90.00 FL	*90.00 FL
-	1	*FRONT SIGNAL	Cracked	65.00 FL	*65.00 FL
15	1	*FRONT MUDGUARD	Cut	165.00 FL	*165.00 FL
16 17	1	*RADIATOR	*Check	520.00 FL	*-FL
18	1	*THROTTLE CABLE	Cut	110.00 FL	*110.00 FL
19	1	*HANDLE BAR	Bent	98.00 FL	*98.00 FL
20	1	*TOP BRAKE PUMP	Cut	285.00 FL	*285.00 FL
21	1	*SET MIRROR	Cut	130.00 FL	*130.00 FL
22	1	*ENGINE GUARD	Dented	110.00 FL	*110.00 FL
23	1	*FOOTREST BRACKET RH	Cracked	280.00 FL	*280.00 FL
24	1	*FRONT EXHAUST PIPE	Bent	950.00 FL	*950.00 FL
25	1	*REAR EXHAUST PIPE	Dented	650.00 FL	*650.00 FL
26	1	*FUEL TANK	Dented	850.00 FL	*850.00 FL
27	1	*FORK COVER	Cracked	290.00 FL	*290.00 FL
28	1	*REAR ABSORBER	Cracked	1,050.00 FL	*1,050.00 FL
29	1	*REAR TYRE MUDGUARD	Deformed	85.00 FL	*85.00 FL
	ranchise part. S=SpcNe			11/N/39835 (380M) (1	200000000000000000000000000000000000000
	anomos para a apassa		Sub Total (S\$)	10,400.00	8,480.00
		- List Item Discount o	n L Items 10.00/10.00% (S\$)	1,038.80	846.80
			Total Parts (S\$)	9,361.20	7,633.20

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended	Labour
1 (CCCCIIIIIICIIGCG	LUDUUI

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TRANSPORT.	New	30.00	30.00
2	JACK BODY.	New	180.00	100.00
3	JACK FORK.	New	85.00	60.00
4	LABOUR.	New	380.00	280.00
		Gross Labour Cost (S\$)	675.00	470.00
	Report	I was unsubmitted during this print-out.		

< END OF ESTIMATES >