Surveyor 'MONUM From (Person) Lyrene Estimated Cost	Jan of	Bill to-	/	8/2/18/012-25 pr
OD # WS # TP RES / OD To Inspect Vehicle No. at Workshop m/s of Policy No:	Ben Hoc 10-6 Def	631D Le Hin Lake 4		HB 2179A 28165 20
Sum insured. Make of Veh: (Chent's Record) CA / REV / REP. / REV 2 Date/Time: 2.04 8		Excess.	D.O.A.	28 01 2018
Date/Time Action/Instruct	131D-X	stimate 1800=0-11/Lital	8	8 11 8C = N-0 (

08/11/13) Wef	
ASS REC. BY MOVELS . REF.	Fc./
	ASSIGNMENT
From: Date:	Veh No: 786 6631 D Yr Regn: 1912
Estimated Cost:	Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
TPV WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No: F36 663/	Make: Vanala Ft16 ST 00 15-3
t Workshop m/s 37H	Make: Yanalia Ft 6 ST c.c 15-3 Colour 5. hue / Stack A/C: Insured/Std/NI/NA
4,7,7	Sp. Reading 62672 T/Radio: Insured / Std / NI / NA
nsured	Essalus
Policy No.	CNO: ME 14220895791/215
laims No.	Gen. Cond: Good / Fair / Poor / Burnt
um Insured Excess:	Steering: In page / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Incom / Jammed / Leaked / Burnt or
Aake of Veh:	Modi: Nil SIBim / STD A/Rim or
	Tyre Size: F: 100160-17
(Palicy Condition)	
Remark: The veh had commenced its N/S	130/001/
repair at the time of inspection.	O/S BS / DUN / EXNOVA / GY / FS / LIZA MIC OHTSU / PIR / SUMI / TOYO / YOKO or
C/-	
DAC Accident Roort: Consistent? : Yes or No	Front Rear 6
	Les Les
1/-	-11
	0/1/1
um Sum. 20 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des: of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: I Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
SHIS CONFINA LIST	Poli. 1050 with Roymond. (Red 1553:59
100	
RECEIVED	
RECEIVED	2 5 APR 2018
RECEIVED.	2 5 APR 2018 Days Of Repair: 4
RECEIVED	Days Of Repair: 4 Resurvey No. of Trip: \ Survey Fee: // 0
RECEIVED 1 and Time. File Pass to? 254 Typist : Final Report ate/Time. File Return to?	2 5 APR 2018 Days Of Repair: 4
RECEIVED. The Time. File Pass to? 254 Typist : Final Report ata/Time. File Return to?	Days Of Repair: 4 Resurvey No. of Trip: \ Survey Fee: 7/0
RECEIVED. To Report Preli. Report Final Report Accordance. File Return to?	Days Of Repair: 4 Resurvey No. of Trip: \Survey Fee: 7/10 Transportation Sid Fee: Site Insp (\$)_s+Rs_si Interview (\$) Photos
RECEIVED 1 and Time. File Pass to? 254 Typist : Final Report ate/Time. File Return to?	Days Of Repair: 4 Resurvey No. of Trip: \Survey Fee: 7/0 Transportation Significant Sign

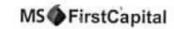


51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

FIR	ST CAPITAL INSU	RANCE LTD	Ref : CS/FCI180025	93/Utd3	
36 F	ROBINSON ROAD	INGAPORE 068877	Date: 08-02-2018 Code: FCI2		
1.	A STATE OF THE STA	Policy Particu	lars :- THIRD PARTY CLA	IM	
	Insured Veh.	SHB 2179A	Veh. Inspected	FBG 6631D	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	D18000910MFSH	Excess (\$)	0.00	
	Assign From	CWS (LURENE JAW)	Assign Date	08/02/2018	
2.		Vehicle P	articulars & Condition		
	Make & Model	15 15 15 15	c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
Chassis No. Colour					
	Odometer	5	Steering		
	Brakes		Modification		
	General				
3.		Cor	nditions 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.		Descr	ription of Damages		
5.	Scottle 14 1	Ger	neral Information		
	Accident Date	28/01/2018	Inspection Date	08/02/2018	
	Survey held at	BAN HOCK HIN CO.PTE L	TD		
		NO 6 DEFU LANE 4 SINGAPORE 539410			
5a.		THE RESERVE	Remarks		



MS First Capital Insurance Limited to Reg. No. 1960001060 GST Reg. No. H2 c001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Menry Underwriting Page: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

30-01-2018

Our Ref No. D18000910MFSH

Accident Date

28-01-2018

Claim Type. Third Party

Insured Vehicle

SHB2179A

Third Party Vehicle. FBG6631D

Survey Location

NO. 6 DEFU LANE 4

Contact Person.

RAYMOND

Contact No.

62816520/0

Fax No. 62842969

Survey Type

WITHOUT PREJUDICE:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

BAN HOCK HIN CO. PTE

Attention. NIL

Cc : TP Solicitor

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

LURENE

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

	1040:				Ä
Job Sheet (/C	ClaimWS/Surveyor/JobSheet/	234474) 🚣 PR	Il Documents 🙆 Close 🗶]	
			PRI Header Details		
Claim No	D18000910MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	4 & BAN HOCI
Workshop Name	BAN HOCK HIN CO. PTE LTD (Contact Person : RAYMOND)	Survey Location & Contact Details	NO. 6 DEFU LANE 4 Mobile: 0 , Phone: 628165 EmailId: RAYMOND@BHH,		842969
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB2179A TP Vehicle No		FBG6631D
PRI Recieved Date	07-02-2018 06:44:36 PM	Surveyor Appointed Date	08-02-2018 12:24:39 PM	Surveyor Accept Date	08-02-2018 0
			Survey Report Upload		
Surveyor Inspection Date *:		Surveyor Report Date	08-02-2018	Upload Survey Report *:	Choose File
			Vehicle Particulars		
Make	Please Select Make 🔻	Model	Please Select Model ▼	Year	Select Year
Chasis No		Engine No		Mileage	
Color		Cubic Capacity			
Multiple D	ocuments Upload				
		Upload Multiple	e Documents		
File Nan	me			Action	
Surveyor	Job Remarks				
Remarks				Save	

Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Friday, 9 February 2018 1:43 PM

To:

'Claim Workflow System'; assignments; SUR LURENEJAW@MSFIRSTCAPITAL.COM.SG

Cc:

Subject:

RE: SURVEY ASSESSMENT - D18000910MFSH/4

Attachments:

CSFCI18002593Utd3.pdf

Dear Lurene,

Enclosed herewith preliminary advice of FBG 6631D.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)

Sent: Thursday, 8 February 2018 2:12 PM

To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>;

SUR <sur@lkkauto.com>

Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG

Subject: RE: SURVEY ASSESSMENT - D18000910MFSH/4

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS.

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Claim Workflow System [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Thursday, 8 February 2018 12:25 PM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; LURENEJAW@MSFIRSTCAPITAL.COM.SG

Subject: PRI: SURVEY ASSESSMENT - D18000910MFSH/4

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Best Regards,

Admin Team

Claim Workflow System

Motor Claims Department



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 400933 TEL.: (065) 62563561 FAX: (065) 62564315

Your Ref: D18000910MFSH

Date: 09 February 2018

Our Ref: CS/FCI18002593/Utd3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

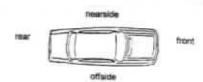
INITIAL INSPECTION REPORT OF VEHICLE NO. FBG 6631D .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 08/02/2018 at the premises of M/s BAN HOCK HIN, and have the following to report:-

Workshop Estimate Amount	: S\$	2,603.00	-54
Revised Estimate Amount	: S\$	982.00	
"Check" Items Amount	: S\$	529.00	
Market Value	: S\$	•	_
LTA Reimbursement Value	: S\$	-	
Nett Value	: S\$		_

Description of Damage:

<u>The vehicle sustained damages</u>
at the rear portion and o/s, n/s body.



Yours faithfully

CHUA KANG SENG Licensed Appraiser

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID:	4498D	
Vehicle Details		
Vehicle No.:	FBG6631D	
Vehicle to be Exported:	Yes	
Intended De-registration Date:	08 Feb 2018	
Vehicle Make:	YAMAHA	
Vehicle Model:	FZ16ST	
Primary Colour:	Black	
Manufacturing Year:	2012	
Engine No.:	45S9011624	
Chassis No.:	ME145S096C2011512	
Maximum Power Output:		
Open Market Value:	\$2,436.00	
Original Registration Date:	01 Oct 2012	
First Registration Date:	01 Oct 2012	
Transfer Count:	3	
Actual ARF Paid:	\$366.00	
Intended PARF Rebate Details		
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	*	
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details		
COE Expiry Date:	30 Sep 2022	
COE Category:	D - Motorcycle	
COE Period(Years):	10	
QP Paid:	\$1,852.00	
COE Rebate Amount:	\$860.00	

Enquire Transfer Fee

Vehicle Details		
Vehicle No. :	FBG6631D	
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped	
Vehicle Attachment 1 :	No Attachment	
Vehicle Scheme :	Normal	
Vehicle Make :	YAMAHA	
Vehicle Model :	FZ16ST	
Chassis No. :	ME145S096C2011512	
Propellant:	Petrol	
Engine No. :	4559011624	
Engine Capacity:	153 cc	
Maximum Power Output :	2	
Maximum Laden Weight :	330 kg	
Unladen Weight :	141 kg	
Year Of Manufacture :	2012	
Original Registration Date :	01 Oct 2012	
Lifespan Expiry Date :	3	
COE Category :	D - Motorcycle	
Quota Premium :	\$1,852.00	
COE Expiry Date :	30 Sep 2022	

OCBC Bank

OCHE CARDS



(1)

Bike model		
yamaha fz16		
Done		
Type Any		*
Price From		
Any		•
Price To		
Any		
Class		
Any		
MORE SEARCH OPTIONS ❖		
	Q SEARCH ■ VIEW ALL () LISTING A JSEDBIKES A JST	ING/)

UP TO 20% OFF RETAIL DEALS WITH OCBC CARDS

Yamaha FZ16 (/listing/usedbike/yamaha-yamaha-fz16/6018/)



(/listing/usedbike/yamaha-yamaha-fz16/6818/)

NW\$5800

Reg: 28/01/2013

Type: Street Bikes

153cc

Trade in/Loan of vehicle available. Interested buyers are welcome to neg. Come visit M1 Motoring Serangoon.

Posted on: 07/02/2018

*FHEAD *CHALSTERS

DETAILS > QUISTING/USEDBIKE/YAMAHA-YAMAHA-FZ16/6018/)

Yamaha FZ16 ST (/listing/usedbike/yamaha-yamaha-fz16-st/5434/)



(/listing/usedbike/yemaha-yamaha-fz16-st/5434/)

s=\$6200

Reg: 07/06/2012

Type: Street Bikes

153cc

Down Payment \$500 or zero down to ride away from this beautiful machine. Subject to approval. De Xing Motor. Pls call 67468582. Passed on: \$7702/2018

* PAID AD * DEALER AD

DETAILS > (/LISTING/USEDBIKE/YAMAHA-YAMAHA-FZ15-ST/5454/)

Yamaha FZ16 (/listing/usedbike/yamaha-yamaha-fz16/5312/)



(/listing/usedbike/yamaha-yamaha-tz16/5312/).

***\$6500

Reg: 10/06/2013

Type: Street Bikes

153cc

Trade in/Loan available. Visit Bike Dynamic Centre.

Posted on: 07/02/2018

* PRIDAD * DEALER AD

DETAILS > (/LISTING/USEDBIKE/YAMAHA-YAMAHA-FZ10/5313/)

Yamaha FZ16 ST (/listing/usedbike/yamaha-yamaha-fz16-st/5996/)



(/listing/usedbike/yamaha-yamaha-fz16-st/5996/)

mm\$7500

Reg: 10/03/2014

Type: Street Bikes

153cc 52000km

Beautiful tip top showroom condition. Original factory paint work. No accident, engine in great working condition with no rattle. Absolutely atunning. No repaired needed. Great commuting...

Posted on: 06/02/2018

◆PAD AD ◆DEALERAD

DETAILS > (/LISTING/LISEDBIKE/YAMAHA-YAMAHA-FZ16-ST/5996/)

Yamaha FZ16 (/listing/usedbike/yamaha-yamaha-fz16/4841/)



(/listing/usedbike/yamaha-yamaha-fz16/4841/)

\$5000

Reg : 30/07/2011 Type: Street Bikes

153cc

Beautiful engine 5 well maintain condition Yamaha FZ 16 for sale. We are open to negotiation. Full servicing done. Low down payment, Low interest from 6% & the highest trade in. Come view t...

Posted on: 04/02/2018

● PAGD AD ● DEALER AD

DETAILS > (/LISTING/LISEDBIKE/YAMAHA-YAMAHA-FZT6/4841/)



THE SCHEDULE

Motorcycle Insurance Policy

This Policy sets out the terms of a contract between NTUC income Insurance Co-operative Limited (INCOME) and you (the insured named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium. The provision of this insurance is subject to:

- any Endorsement specified as operative in the Schedule
- 2. the Conditions and General Exclusions of this Policy, and
- the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document. GST Reg No. M4-0003030-8

Policy Number

5070378321-02

The Policyhalder

: CHIAN CHOW PIEW BLK 2108 #12-170 COMPASSVALE LANE SINGAPORE 542210

Period of Insurance

: 01 Apr 2017 To 31 Mar 2018

Sum insured

: N/A

Premium (inclusive GST)

: 55122.47

Interest insured

Cover Type

: Third Party

Named Driver (1)

: CHIAN CHOW PIEW

Named Driver (2) Make/Model

: N/A

: YAMAHA/FZ 16

Capacity.

: 153cc

Registration Number Chassis Number

: FBG6631D

: ME1455096C2011512

Excess (Section 1)

I N/A

Excess (Section 2)

Hire Purchase Company

Registration Date Insure with COE NCO Entitlement

Number of Seater

: N/A 20%

: 01 Oct 2012

: 2

± N/A

Memo A : N/A

Endorsement Operative: M1

Agency

: DIRECT BUSINESS DEPT (00000600280)

Date of Issue

: 10 Mar 2017 00:16 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors

Chief Executive

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number

EMail Address

Gender

- 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 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

	ACCIDENT STATEMENT
Date Of Report	28/01/2018 10:24
Date Of Accident	28/01/2018 08:20
Exact Location Of Accident	BLK 104 ALJUNIED CRESCENT OSCP
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBG6631D
Insured/Policyholder	
Name Of Registered Owner	CHIAN CHOW PIEW
NRIC No	S7824498D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97237902
Alternative Phone No.	OTHERS-97237902
Vehicle Particulars	
Manufacturer	YAMAHA
Model	FZ 16
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
f 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	5070378321-02 (TP)
Cover Note Number	,
Driver	
Name of Driver	CHIAN CHOW PIEW
NRIC No	\$7824498D
Date Of Birth	22/08/1978
Occupation	INDOOR
ate Of Driving Pass	03/07/1995

22 YEARS AND 6 MONTHS

(LOCAL) +65-97237902

OTHERS-97237902

MALE

NOEMAIL

Address

BLK 210B #12-170 COMPASSVALE LANE

Postcode

542210

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

NO

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 0

Number of Passengers (Including Driver) **Details of Police Action**

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

ON 28TH JANUARY 2018 AT ABOUT 7:00 AM, I PARKED MOTORCYCLE IN ONE OF THE PARKING LOT. THEREAFTER I WENT FOR MY BREAKFAST, WHEN I CAME BACK FROM MY BREAKFAST AT ABOUT 08:20 AM, I SAW EIGHT PARKED MOTORCYCLES INCLUDING MINE ALEADY BEEN HIT AND TOPPLED DOWN ONTO THE ROAD. I ALSO SAW A TAXI SHB 2179A PARKED THERE, THE TAXI DRIVER THAN SAID THAT HE ACCIDENTALLY STEPPED ON HIS ACCELERATOR AND HIS TAXI MOVED FROWARD AND HIT ONTO THE EIGHT MOTORCYCLES THAT WAS PARKED IN THE PARKING LOT. I DID NOT TAKE DOWN ALL THE MOTORCYCLES PLATE NUMBER. MOMENTS LATER, THE POLICE ARRIVED AT THE SCENE. (ATTENDED BY CHRISTINA)

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

SHB2179A

TAXI

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
- Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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 insurers) 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 :
 - 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.

28 JAN 2029

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Pertonnel & Minature

Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

DESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	BIK 104 Alymied RESCALL CAPACE A FBG 6631-D B SHB 2179A DOA - 28/1/18 Thu - 8.20 am
DECLARATION I/We declare the foregoing particulars. 2 8 JAN 2033 Policy padder's Signature Date & Time:	are true in every respect. Driver's Signature (if driver is not the policyholder) Date & Time:	Reporting Centre Personners Signature Name: NRIC/FIN No.:





QUOTATION

NO. : 32350

Customer:

FIRST CAPITAL INSURANCE LTD 06 RAFFLES QUAY #21-00 SINGAPORE 048580 N+ Aller

DATE

: 07/02/2018

CLAIM NO. : 11091

POLICY NO: :

FROM

: RAYMOND

VEHICLE NO.

: FBG6631D

MAKE/MODEL

: YAM / FZ16

/Daga

		8/1/	18			(Page	1 of 3)
S/N	Description	Act	ion (Qty	Unit Price		Amount
1	ALIGNMENT BODY P/N: 29561	∜ REF	PLACE 1	.00	\$350.00	280	350.00
2	BAR FOOTREST FRONT RH P/N: 40315	REF	PLACE 1	.00	\$18.00	11	18.00 X
3	BODY, FRONT UPPER 1	REF	PLACE 1	.00	\$100.00	cm	100.00
4	BOLT FOOTREST REAR P/N: 44888	REF	PLACE 1	.00	\$5.00	11	5.00 X
5	BOX S48 ASTRA COOCASE	REF	PLACE 1	.00	\$215.00	647	215.00
6	BUSH FORK INNER (LOWER) P/N: 28440	REF	PLACE 2	.00	\$26.00	11	52.00 🗶
7	CAP END MUFFLER (BLACK) P/N: 43631	REF	PLACE 1	.00	\$24.00	517	24.00
8	CLIP TUBE INNER FORK P/N: 45092	REF	PLACE 2	.00	\$5.50	N	11.00
9	COVER 8	REF	PLACE 1	.00	\$45.00	CM	45.00
10	COVER REAR FENDER P/N: 44877	REF	PLACE 1	.00	\$25.00	cne	25.00
11	FENDER REAR P/N: 50202	REF	PLACE 1	.00	\$55.00	(M	55.00
12	FENDER(GREY)	REF	PLACE 1	.00	\$105.00	647	105.00
13	FLAP	REF	PLACE 1.	.00	\$24.00	70.0	24.00
14	handle balancer set	REF	PLACE 1	.00	\$19.00	5.1	19.00





Maria Carlotter	B. Common or other	DODEO
Quotation	NOS.	32350

2004	Market Market Committee Co					
/N	Description	Action	Qty	Unit Price		Amount
5	HANDLEBAR	REPLACE	1.00	\$36.00	bent	36.00
6	INNER TUBE COMP	REPLACE	2.00	\$155.00	2	310.00
	P/N: 52255				-	
7	LABOUR 🥒	Supply/Install	5.00	\$35.00	150	175.00
	P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.				• = >>	
3	LAMP SIGNAL FRONT RH	REPLACE	1.00	\$26.00	11	26.00
	P/N: 55188					
1	LEVER BRAKE	REPLACE	1.00	\$19.00	Sin	19.00
	P/N: 40317					
)	MAINSTAND	REPLACE	1.00	\$70.00	n	70.00
ľ	METER ASSY	REPLACE	1.00	\$388.00	11	388.00
	P/N: 55146					
	MIRROR LH	REPLACE	1.00	\$15.00	NI	15.00
	P/N: 26137					
l.	MIRROR RH	REPLACE	1.00	\$15.00	Cun	15.00
	P/N: 26503			~~~		-
	OIL FORK (UNICORN) MR-10	REPLACE	1.00	\$10.00	11	10.00
20	P/N: 54320	DEDLACE	4.00	#CO 00		00.00
5	PANEL COMP 2	REPLACE	1.00	\$60.00	cne	60.00
3	PANEL, BLIND 1	REPLACE	1.00	\$9.00	cm	9.00
7	PANEL,CONSOLE 1	REPLACE	1.00	\$19.00	Cm	19.00
3	PANEL,CONSOLE 2	REPLACE	1.00	\$19.00	cm	19.00
	PEDAL BRAKE	REPLACE	1.00	\$28.00	n	28.00
	P/N: 45125					10
)	PLATE NUMBER REAR (6.5 INCH X 9 INCH) // P/N: 26951	REPLACE	1.00	\$12.00	34	12.00
	PROTECTOR MUFFLER (SILVER)	REPLACE	1.00	\$48.00	SIL	48.00
	P/N: 40320				16 Cartes	
	RIVET	REPLACE	2.00	\$1.50	nen	3.00
	P/N: 40604				7	
1	RUBBER FOOTREST FRONT P/N: 40321	REPLACE	1.00	\$10.00	11	10.00
Vi.	SEAL DUST FORK	REPLACE	2.00	\$21.00	11	42.00
	P/N: 22026		00000	CONSTR.		
5	SEAL OIL (40X53X8) FORK	REPLACE	2.00	\$16.00	17	32.00





Amount	1 2 E		Unit Price	Qty	Action	Description	/N
17.00	ner		\$8.50	2.00	REPLACE	SEAL REAR FENDER	6
-						P/N: 44879	
4.00	The		\$4.00	1.00	REPLACE	SEAL REAR FENDER UPPER	7
_						P/N: 44880	
7.00	The		\$7.00	1.00	REPLACE	SPRING RETURN	8
	*					P/N: 45126	
110.00	Bert		\$110.00	1.00	REPLACE	STAY 1	9
13.00	Bert		\$13.00	1.00	REPLACE	STAY, SUPPORT 2	0
58.00			\$58.00	1.00	REPLACE	STEERING CONE SET	1
	111					P/N: 33765	
603.00	\$2,6				SUB TOTAL		
182.21	\$1	_			GST @ 7 %		
785.21	\$2,7				GRAND TOTAL		
	\$2,	_			GRAND TOTAL		

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.

71

1311

LKK Auto Consultants hence notify the Repairer of the following:

- Turnsurvey beforelater spray painting
- To display damaged part(a) during resurvey
- . Parts priors are subject to confirmation
- Third party survey is on a "Without Prejudice" basis.
- . No ringal modification(s) is allowed
- Supplementary (emis) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:









QUOTATION

NO.: 32350

- Rev. 1

FIRST CAPITAL INSURANCE LTD 06 RAFFLES QUAY #21-00 SINGAPORE 048580

DATE

: 07/02/2018

CLAIM NO. : 11091

POLICY NO. :

FROM

: RAYMOND

VEHICLE NO.

Customer:

: FBG6631D

MAKE/MODEL

: YAM / FZ16

(Page 1 of 2)

					(r age r or z)
S/N	Description	Action	Qty	Unit Price	Amount
1	ALIGNMENT BODY	REPLACE	1.00	\$280,00	280.00
	P/N: 29561				
2	BODY, FRONT UPPER 1	REPLACE	1.00	\$100.00	90.00
			1	Disc %: 10.00	
3	BOX S48 ASTRA COOCASE	REPLACE	1.00	\$215.00	193.50
			1	Disc %: 10.00	
4	CAP END MUFFLER (BLACK)	REPLACE	1.00	\$24.00	21.60
	P/N: 43631			Disc %: 10.00	
5	COVER 8	REPLACE	1.00	\$45.00	40.50
				Disc %: 10.00	
6	COVER REAR FENDER	REPLACE	1.00	\$25.00	22.50
	P/N: 44877		I	Disc %: 10.00	
7	FENDER REAR	REPLACE	1.00	\$55.00	49.50
	P/N: 50202		I	Disc %: 10.00	1
В	FENDER(GREY)	REPLACE	1.00	\$105.00	94.50
			I	Disc %: 10.00	
9	FLAP	REPLACE	1.00	\$24.00	21.60
			1	Disc %: 10.00	
10	HANDLE BALANCER SET	REPLACE	1.00	\$19.00	17.10
				Disc %: 10.00	
11	HANDLEBAR	REPLACE	1.00	\$36.00	32.40
			[Disc %: 10.00	
12	LABOUR	Supply/Install	5.00	\$30.00	150.00
	P/N: 06766				
	 FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED. 				
13	LEVER BRAKE	REPLACE	1.00	\$19.00	17.10
	P/N: 40317			Disc %: 10.00	





Amount	Unit Price	Qty	Action	Description	S/N
13.50	\$15.00	1.00	REPLACE	MIRROR RH	14
	isc %: 10,00			P/N: 26503	
54.00	\$60.00	1.00	REPLACE	PANEL COMP 2	15
	isc %: 10.00				
8.10	\$9.00	1.00	REPLACE	PANEL, BLIND 1	16
	isc %: 10.00				
17.10	\$19.00	1.00	REPLACE	PANEL, CONSOLE 1	17
	isc %: 10.00	E			
17.10	\$19.00	1.00	REPLACE	PANEL, CONSOLE 2	18
	isc %: 10.00	E			
10.00	\$10.00	1.00	REPLACE	PLATE NUMBER REAR (6.5 INCH X 9 INCH)	19
				P/N: 26951	
43.20	\$48.00	1.00	REPLACE	PROTECTOR MUFFLER (SILVER)	20
	isc %: 10.00			P/N: 40320	
2.70	\$1.50	2.00	REPLACE	RIVET	21
	isc %: 10.00	E		P/N: 40604	
15,30	\$8.50	2.00	REPLACE	SEAL REAR FENDER	22
	isc %: 10.00	E		P/N: 44879	
3.60	\$4.00	1.00	REPLACE	SEAL REAR FENDER UPPER	23
	isc %: 10.00	E		P/N: 44880	
6.30	\$7.00	1.00	REPLACE	SPRING RETURN	24
	isc %: 10,00	t		P/N: 45126	
99.00	\$110.00	1,00	REPLACE	STAY 1	25
	isc %: 10.00	D			
11.70	\$13.00	1.00	REPLACE	STAY, SUPPORT 2	26
	isc %: 10.00				
\$1,331,90			SUB TOTAL		
\$93.23	9		GST @ 7 %		
\$1,425.13	10		GRAND TOTAL		

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.







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 Inter	nationale Des Experts En Auton	nobile	
FIR	ST CAPITAL INSU	RANCE LTD	Ref : CS/FCI180025	93/Utd3q2	
	ROBINSON ROAD -01 CITY HOUSES	SINGAPORE 068877	Date: 27-04-2018 Code: FCI2		
1.		Policy Particu	lars :- THIRD PARTY CLA	IM	
	Insured Veh.	SHB 2179A	Veh. Inspected	FBG 6631D	
	Policy No.	D-18088937MFSH	Coverage (\$)	0.00	
	Claim No.	D18000910MFSH	Excess (\$)	0.00	
	Assign From	LURENE JAW	Assign Date	08/02/2018	
2.		Vehicle P	articulars & Condition		
	Make & Model	YAMAHA FZ16ST	c.c	153	
	Engine No.	HIDDEN	Year of Reg.	2012	
	Chassis No.	ME145S096C2011512	Colour	SILVER /BLACK	
	Odometer	67672	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	SPORTS RIM	
	General	GOOD			
3.		Cor	nditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	100/80-17	MICHELIN	6 mm	
	L/H Front Tyre			mm	
	R/H Rear Tyre	130/70-17	MICHELIN	6 mm	
	L/H Rear Tyre			mm	
١.		Descr	iption of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE	REAR PORTION AND N/S	O/S BODY.	
	DAMAGES SEE D	ETAILS.			
5.		Gen	eral Information		
	Accident Date	28/01/2018	Inspection Date	08/02/2018	
	Survey held at	BAN HOCK HIN CO.PTE LT	D		
		NO 6 DEFU LANE 4 SINGAPORE 539410			
5a.			Remarks		
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A	WITHOUT PREJUDICE" BAS S, WE HAVE NOT AUTHORIS	IS. ED REPAIRS.	
5b.		Estim	ate Days of Repair		
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	4 Working Day	S	



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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBG 6631D

aty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BAR FOOTREST FRONT RH	NOT NECESSARY	18.00	
1	BODY,FRONT UPPER 1	CRACKED	100.00	100.00
1	BOLT FOOTREST REAR	NOT NECESSARY	5.00	
1	BOX S48 ASTRA COOCASE	CUT	215.00	215.00
2	BUSH FORK INNER (LOWER) @\$26.00	NOT NECESSARY	52.00	
1	CAP END MUFFLER (BLACK)	SCRATCHED	24.00	24.00
2	CLIP TUBE INNER FORK @\$5.50	NOT NECESSARY	11.00	
1	COVER 8	CRACKED	45.00	45.00
1	COVER REAR FENDER	CRACKED	25.00	25.00
1	FENDER REAR	CRACKED	55.00	55:00
1	FENDER (GREY)	CUT	105.00	105.00
1	FLAP	TORN	24.00	24.00
1	SET HANDLE BALANCER	SCRATCHED	19.00	19.00
1	HANDLEBAR	BENT	36.00	36.00
2	INNER TUBE COMP @\$155.00	TO REPAIR SEE LABOUR	310.00	
1	LAMP SIGNAL FRONT RH	NOT NECESSARY	26.00	
1	LEVER BRAKE	SCRATCHED	19.00	19.00
1	MAINSTAND	TO REPAIR SEE LABOUR	70.00	
1	METER ASSY	NOT NECESSARY	388.00	
1	MIRROR LH	NOT NECESSARY	15.00	
1	MIRROR RH	CUT	15.00	15.00
1	OIL FORK (UNICORN)MR-10	NOT NECESSARY	10.00	
1	PANEL COMP 2	CRACKED	60.00	60.00
1	PANEL ,BLIND 1	CRACKED	9.00	9.00
1	PANEL ,CONSOLE 1	CRACKED	19.00	19.00
1	PANEL ,CONSOLE 2	CRACKED	19.00	19.00
1	PEDAL BRAKE	TO REPAIR SEE LABOUR	28.00	
1	PROTECTOR MUFFLER (SILVER)	SCRATCHED	48.00	48.00
2	RIVET @\$1.50	NECESSARY	3.00	3.00

Report Ref No. CS/FCI18002593/Utd3q2



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

Page No. 2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	
1	RUBBER FOOTREST FRONT	NOT NECESSARY	10.00	
2	SEAL DUST FORK @\$21.00	NOT NECESSARY	42.00	
2	SEAL OIL (40X5X8) FORK @\$16.00	NOT NECESSARY	32.00	
2	SEAL REAR FENDER @\$8.50	NECESSARY	17.00	17.00
1	SEAL REAR FENDER UPPER	NECESSARY	4.00	4.00
1	SPRING RETURN	NECESSARY	7.00	7.00
1	STAY 1	BENT	110.00	110.00
1	STAY ,SUPPORT 2	BENT	13.00	13.00
1	SET STEERING CONE	NOT NECESSARY	58.00	
	LESS 10% DISCOUNT			-99.10
			2,066.00	891.90
	SPECIAL NETT ITEMS			
1	PLATE NUMBER REAR (6.5 INCH X9 INCH) (SN)	BENT	12.00	10.00
			12.00	10.00
	LABOUR			
	ALIGNMENT BODY		350.00	280.00
	LABOUR-FOR DISMANTLE AND ASSEMBLING OF PARTS QUOTED INCLUSIVE OF THE REPAIR OF INNER TUBE COMP MAINSTAND AND PEDAL BRAKE		175.00	150.00
			525.00	430.00
	GRAND TOTAL		2,603.00	1,331.90

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)	1,050.00
--	----------

Report Ref No. CS/FCI18002593/Utd3q2

CHUA KANG SENG

Licensed Appraiser