

ASS. REC. BY:

REF: CS31 EGI 18004430/M1032k Special Instruction:

Surveyor: MA

ASSIGNMENT (Office)

From (Person): Yee Pei Li

of EGI

Date/Time: 7/3/18 12:18pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: FBL 9408L

Insured: GT1389J

at Workshop m/s Speedy Motor

Tel: 64815567

of Blk 10, Amk Ind. Park 3A #05-21

Policy No:

Claim No: DSMCV1800477

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 6/3/2018

CA / REV / REP. / REV 24 HRS

08/03/18

Date/Time: 3:53pm 07/3/18

Person Contacted: Ms. Tan

H.O.D. Endorsement:

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate
	FBL 9408L - X	
	GT 1389J - CS/EGII/7018919/R/vbe2	D.O.A: 02/10/17
16/3/18	@1018am ms Tan said they will not provides us the estimate (veron)	





# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

ERGO INSURANCE PTE LTD

Ref : CS/EG18004430/M1vd3

5 TEMASEK BOULEVARD  
#04-01 SUNTEC TOWER FIVE  
SINGAPORE 038985

Date : 07-03-2018



Code : EGI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GT 1389J	Veh. Inspected	FBL 9408L
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	07/03/2018

## 2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

## 4. Description of Damages

## 5. General Information

Accident Date	06/03/2018	Inspection Date	
Survey held at	SPEEDY MOTOR CYCLE SERVICE CENTRE BLK 10 ANG MO KIO IND.PARK 2A #05-21 SINGAPORE 568047		

## 5a. Remarks

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

## **Nivitha (LKK Auto)**

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**From:** Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>  
**Sent:** Wednesday, 7 March 2018 12:18 PM  
**To:** 'admin-d@lkkauto.com'  
**Subject:** OI : GT1389J / TP : FBL9408L/LKK / DOA : 06/03/2018  
**Attachments:** GT1389J - SAS.pdf; FBL9408L - SAS.pdf; RE: NOTICE OF ACCIDENT - FBL9408L (36.1 KB)

Dear Catherine,

We have rejected to their PRS list, please assist to conduct this survey from JUSEQUITY LAW CORPORATION,

ADDRESS : **SPEEDY MOTOR CYCLE SERVICE CENTRE**  
BLK 10 ANG MO KIO INDUSTRIAL PARK 2A  
#05-21  
SINGAPORE 568047

PERSON TO CONTACT : MR LIM SAM HEE @ 6481 5567 / 9388 6867

ERGO OFFICER-IN-CHARGE : SITI

**Note: To survey on without prejudice basis. Please note that our insured/insured driver has yet to e-file their SAS for this accident. Obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.**

Please update the survey status via [Survey.Report@ergo.com.sg](mailto:Survey.Report@ergo.com.sg).

Attached is Third Party SAS (note: reports not to be released to any Third Party). No estimates was provided.

**Kindly acknowledge receipt of this email.**

Thank you.

### **Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985  
Tel.: 65 6829 9199 DID: 65 6829 9194  
Website: [www.ergo.com.sg](http://www.ergo.com.sg)

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	8130J
<b>Vehicle Details</b>	
Vehicle No.:	FBL9408L
Vehicle to be Exported:	No
Intended De-registration Date:	02 May 2018
Vehicle Make:	SUZUKI
Vehicle Model:	GSX1300RAL6 (HAYABUSA ABS)
Primary Colour:	White
Secondary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	X704159118
Chassis No.:	JS1CK1116G0100462
Maximum Power Output:	-
Open Market Value:	\$13,281.00
Original Registration Date:	12 May 2017
First Registration Date:	12 May 2017
Transfer Count:	1
Actual ARF Paid:	\$1,993.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	11 May 2027
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,052.00
COE Rebate Amount:	\$5,461.00
<b>Total Rebate Amount:</b>	<b>\$5,461.00</b>

The information contained herein is correct as at 02 May 2018

OK

## 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 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	06/03/2018 16:37
Date Of Accident	06/03/2018 08:50
Exact Location Of Accident	PIE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL9408L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PEK CHENG KUN, BRYAN
NRIC No	S9408130J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92326741
Alternative Phone No	OFFICE-92326741

### Vehicle Particulars

Manufacturer	SUZUKI
Model	MOTOR
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5091033998
Cover Note Number	

### Driver

Name of Driver	PEK LEON
NRIC No	S9402328I
Date Of Birth	26/01/1994
Occupation	INDOOR
Date Of Driving Pass	27/06/2017
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92326741
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address BLK 207 PETIR RD #06-565  
 Postcode  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured RELATIVE  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

Type Of Accident COLLISION - CHANGE/CROSS LANE  
 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 ambulance? NO  
 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 [OTHER] BT PANJANG NPC  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

PLS REFER ATTACHED ACCIDENT REPORT FROM THE DRIVER. POLICE REPORT NO. T/20180306/2123

**Attachment(s)**

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: WILL PASSED TO W/SHOP FOR TP CLAIM  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number GT1389J  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	RIDER
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBL9408L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## 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.
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:

- (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.

Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 6/3/2018

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/EIN No.:





**SINGAPORE  
POLICE FORCE**



T/20180306/2123

1 of 3

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Report No. T/20180306/2123

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/03/2018 15:48		Vide Report No.:		Station Diary No.: 77	
<b>Informant's Particulars</b>					
Name of Informant: PEK LEON			Address: APT BLK 207 PETIR ROAD #06-565 SINGAPORE 670207		
ID Type / ID No.: NRIC NO / S9402328I			Contact No.:		Mobile: 92326741
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 24	Date of Birth: 26/01/1994	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRAFTER			Driving Licence Information: Class:		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2018 08:50	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE towards Changi, before Lornie Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL9408L	Motorcycle				Seriously Damaged	0
GT1389J	Van				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20180306/2123

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Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Report No. T/20180306/2123

## CONTINUATION OF REPORT

Rider			
Name	PEK LEON	ID No.	S9402328I
Related Vehicle	FBL9408L (Motorcycle)	Contact No.	92326741
Hospital/Clinic	PROHEALTH 24-HOUR MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	06/03/2018	Date Discharge	06/03/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Rider			
Name	Sua Chiew Siong	ID No.	S7988763C
Related Vehicle	NIL	Contact No.	81841286
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 06/03/2018 at about 0850hrs, I was riding my vehicle FBL9408L along PIE towards Changi, before Lornie Exit. I was then travelling on the second last lane. Out of a sudden, a white van came out from his lane to the right. I then swerve my vehicle towards the right side to avoid van. I was unable to react as it was too sudden and too close thus the white van still hit onto my vehicle. After which, I exchanged particulars with the van driver and seek my own medical assistance. I wish to state that before the van had a collision with my vehicle, it had contact with my left leg. Thus my leg suffered from a strain/sprain. I had seen a doctor at Pro-health 24-hr Medical Clinic and was issued a 03 days' medical certificate from 06/03/2018 to 08/03/2018. My vehicle exhaust pipe sustained damage due to the collision.



**SINGAPORE  
POLICE FORCE**



T/20180306/2123

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Report No. T/20180306/2123

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

CONTINUATION OF REPORT

**Sketch Plan**

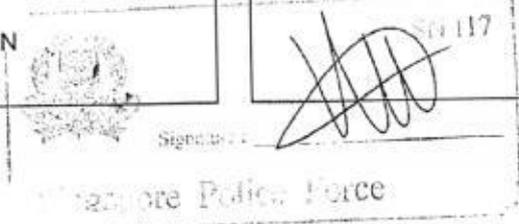
Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J/ Sgt 2 CHERYL YEO	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / AEIT / SSI KASMAWATI BTE SAMIAN Contact No.: 65476179	

Signature Of Informant: 
Date/Time: 06/03/2018 15:48
Classification Of Case: 117

Authentication Stamp  
NP168



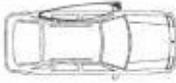
**LKK Auto Consultants Pte Ltd**

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

Page No.:1 of 1

<b>PRE-REPAIR INSPECTION REPORT</b>			
ERGO INSURANCE PTE LTD		Ref: CS3/EGI18004430/M1d3e2	
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER		Date: 23-05-2018	
FIVE SINGAPORE 038985		Code: EGI	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	GT 1389J	Veh. Inspected	FBL 9408L
Policy No.		Coverage (\$)	0.00
Claim No.	DSMCV1800477	Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	07/03/2018
2. Vehicle Particulars & Condition			
Make & Model	SUZUKI GSX1300RAL6	c.c	1340
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JS1CK1116G0100462	Colour	WHITE
Odometer	13791 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	120/70 R17	MICHELIN	8 mm
L/H Front Tyre			mm
R/H Rear Tyre	195/50 R17	MICHELIN	8 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.			
5. General Information			
Accident Date	06/03/2018	Inspect Date / Time	08/03/2018 ( 06:14 PM )
Survey held at	SPEEDY MOTOR CYCLE SERVICE CENTRE BLK 10 ANG MO KIO IND PARK 2A #05-21 SINGAPORE 568047		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$3,000-\$4,000			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	

Report Ref No. CS3/EGI18004430/M1d3e2

Inspected By



MA CHIN FOOK

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MinstAFA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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