| From (Person): MUV | in yong of | MENT (Office) | Date/Time: 12/3/18@ 6.26pr |
|---|---------------------------------|---------------|----------------------------|
| Estimated Cost: | . 3 – – | Bill to: | |
| OD TP WS TP RES | 11000000 | | 010 (477 0 |
| To Inspect Vehicle No: | 0 1011 | 108 Insured | 7 |
| at Workshop m/s | Do G Defu fun e | HIO Tel | 62816520 |
| Policy No: | 40. Q DE LO HAVE | Claim No: CM | TD 1801070/GPC |
| Sum Insured: | | Excess: | 10100107010190 |
| Make of Veh: | | | D.O.A. 08/03/18 |
| (Client's Record) | 1. 3 | | D.O.A. 00/03/10 |
| CA / REV / REP. / R | REV 24 HRS 1WP | | H.O.D. Endorsement. |
| | 0 - 1 1. | . D. I . | Vehicle IN / DUT |
| Date/Time: q-ISany | 013/3/8 Person Contacted | t Kapmond | venicia in juli |
| Date/Time: 9 15cm | | J | venicia IIV/J/01 |
| Date/Time Q ISONY Date/Time Action/In: | struction () Estima | J | venicia IX///OI |
| Date/Time Action/In: | struction () Estima 340PY-X | J | venicia INVIVII |
| Date/Time Action/In: | struction () Estima | J | venicia IX/J/UI |

REF: SMO

Reference No.: (S) SMD | 800H7H2 | Uvol3
Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

| <u>dmin</u>) Offic | (): Case handler to make sure all informate Assign Form | Y-Date | N-Date | Y-Date | N-Date |
|------------------------|--|--|------------|-------------------|---------|
| C | Reference No. | v | | | |
| С | Customer Code | | | | |
| N | Assign From | | | | |
| C | Assign Date | _ | | | |
| C | Veh No (Inspected) | ~ | | | |
| C | Veh No (Insured) | ~ | | | |
| C | D.O.A | ~ | | | |
| c | Policy No | | | | |
| C | Claim No | ~ | | | |
| c | Insurance Authorisation (CA /REV/REP) | | | | |
| c | Report Type | ~ | | | |
| c | Weekend Charges | | | | |
| N | Survey held at/Repairer | - | | | |
| c | Excess | | | | |
| - | gnment Form | the surveryor co | ompleted a | iii required | Informa |
| _ <u>c</u> | Vehicle No | | | | |
| С | Regn Month/Year | | | - | - |
| N | Vehicle Type | | | - | |
| N | Make & Model | r | | | - |
| С | Engine Capacity. (C.C) | ~ | | | - |
| N | Colour | | | | |
| С | Odometer. (Sp.Reading) | | | | - |
| С | Chassis No | ~ | - | | - |
| N | General Condition | | | | - |
| N | Steering | | | | |
| N | Brake | | | | - |
| N | Modification (Modi) | | | | |
| C | Tyre Size | ~ | | | - |
| N | Tyre Make | | | 0.00 | |
| С | Tyre Balance | | | | |
| С | Date of Inspection | ~ | | | |
| N | Survey held | | | | |
| N | Des.of Damages | | | | |
| 1 :5vst | em - (Views/Merimen) | V 2-11-1-12-12-12-12-12-12-12-12-12-12-12- | | 792 | |
| C | Damaged Vehicle Photographs Uploaded | ~ | Anna N | | |
| | kshop Estimate/Assignment Form | | | | |
| | | | | | - |
| N | ALL Parts condition | | | The second second | |
| | Market Value for OD cases | | | | |
| N | Market Value for OD cases Estimate Repair Cost for PRI (RSI, TMI, MSIG) | | | | |
| C | Market Value for OD cases Estimate Repair Cost for PRI (RSI, TMI, MSIG) Days of repair | | 4 | | |
| 0 0 0 | Market Value for OD cases Estimate Repair Cost for PRI (RSI, TMI, MSIG) Days of repair Finalised Amount | 7 | - | | |
| 0 0 0 | Market Value for OD cases Estimate Repair Cost for PRI (RSI, TMI, MSIG) Days of repair | | | | |

Date

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

| SON | 100 111011011105 | OULO A DODE DI | D-1 - 00/01/04/0004 | 7.10.0 1-10 |
|-------|--|----------------------|----------------------------|-------------|
| 26260 | IPO INSURANCE | SINGAPORE PL | Ref : CS/SMO18004 | /42/UVd3 |
| #05- | AFFLES PLACE -01/06 GAPORE LAND TO | OWERSINGAPORE 048623 | Date: 13-03-2018 Code: SMO | |
| 1. | ALCOHOLD TO | Policy Particulars | :- THIRD PARTY CLAI | M |
| | Insured Veh. | SLG 6477P | Veh. inspected | FBH 3408Y |
| | Policy No. | | Coverage (\$) | 0.00 |
| | Claim No. | CMTD1801070/GPC | Excess (\$) | 0.00 |
| | Assign From | MELVIN YONG | Assign Date | 13/03/2018 |
| 2. | GALLET THE A | Vehicle Part | iculars & Condition | |
| | Make & Model | | c.c | 0 |
| | Engine No. | HIDDEN | Year of Reg. | |
| | Chassis No. | | Colour | |
| | Odometer | | Steering | |
| | Brakes | | Modification | |
| | General | | | |
| 3. | | Condit | tions of Tyres | |
| | | Size | Make | Balance |
| | R/H Front Tyre | | | mm |
| | L/H Front Tyre | | | mm |
| | | | | mann . |
| | R/H Rear Tyre | | | mm |
| | R/H Rear Tyre L/H Rear Tyre | | | mm |
| 4. | - Processor value none of the | Descript | ion of Damages | 2000 |
| | - Processor value none of the | | | 2000 |
| 4. | L/H Rear Tyre | Gener | al Information | mm |
| | - Processor value none of the | Gener 08/03/2018 | | 2000 |
| | L/H Rear Tyre | Gener | al Information | mm |

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

Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Thursday, 15 March 2018 9:10 AM

To:

'Ye, Yong Kang Melvin'

Cc:

'Gnoh, Pau Loong'; 'Henry, Irene James'; SUR

Subject:

RE: Accident Involving FBH3408Y & SLG6477P on 08/03/2018

Attachments:

FBH 3408Y PRELI ADVISED.pdf

Dear Melvin,

Enclosed preliminary revised of vehicle FBH 3408Y

Date of survey: 13/3/2018 Number of days:3 days

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)

Sent: Tuesday, 13 March 2018 10:07 AM

To: 'Ye, Yong Kang Melvin' <melvin.ye@sompo.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Gnoh, Pau Loong' <PauLoong.Gnoh@sompo.com.sg>; 'Henry, Irene James' <irene.henry@sompo.com.sg>; SUR

<sur@lkkauto.com>

Subject: RE: Accident Involving FBH3408Y & SLG6477P on 08/03/2018

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

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

From: Ye, Yong Kang Melvin [mailto:melvin.ye@sompo.com.sg]

Sent: Monday, 12 March 2018 6:25 PM

To: Raymond <raymond@bhh.com.sg>; admin-d@lkkauto.com; assignments@lkkauto.com

Cc: Gnoh, Pau Loong <PauLoong.Gnoh@sompo.com.sg>; Henry, Irene James <irene.henry@sompo.com.sg>

Subject: RE: Accident Involving FBH3408Y & SLG6477P on 08/03/2018

Our Claim Reference: CMTD1801070/GPC

Your Reference: FBH 3408Y

Hi Raymond,

We acknowledged receipt of your claim documents.

Please be informed that Gnoh Pau Loong the handler of this case.

We have appointed LKK Auto to conduct the survey.

Aside to LKK Auto,

Please make arrangement to conduct the survey for FBH 3408Y.

Best Regards Melvin Ye Claims Division

D: 6322 4667 | T: 6461 6555 | F: 6221 3302





Sompo Insurance Singapore Pte. Ltd.

0 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

Website: www.sompo.com.sg | Facebook: www.facebook.com/SompoSG

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From: Raymond [mailto:raymond@bhh.com.sp]

Sent: Monday, 12 March, 2018 5:27 PM

To: Claims - Motor Survey < Motor Survey @sompo.com

Subject: Accident Involving FBH3408Y & SLG6477P on 1/03/1018

Dear Sir / Madam,

We attached the third party claim documents for your perusal.

Appreciate for you to arrange for the Pre-repair survey.

Thanks

Best Regards, Raymond Ban Hock Hin Co., Pte Ltd

Tel: (65) 6281 6520 x 220 | Fax: (65) 6284 2969

Visit us at http://www.bhh.com.sg

Facebook: http://www.facebook.com/bhhsg



No. 6 Defu Lane 4, Singapore 539410

www.bhh.com.s

MOTORCYCLE ACCESSORIES | SERVICE CENTRE | MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL WORKS |

RESURGENCE V DAINESE







51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564

Your ref:

CMTD1801070/GPC

Our ref:

CS/SMO18004742/Uvd3

Date: 15/3/2018

The Motor Claims Department
M/s SOMPO INSURANCE SINGAPORE PTE LTD

Dear Sir/Madam

PRELIMINARY ADVICE OF VEHICLE NO. FBH 3408Y

We thank for your instruction on 12/3/2018

Please be informed that we had conducted the inspection of the above mentioned vehicle on

13/3/2018

at the premises of M/s

BAN HOCK HIN CO PTE LTD

and have the following to report:-

Workshop Estimate Amount

: S\$1,737.00

Revised Estimate Amount

: \$\$990.20

"Check" Items Amount

: S\$

Market Value

: S\$

LTA Reimbursement Value

: 55

Nett Value

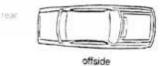
: S\$

Description of Damage:

The vehicle sustained damages at the

o/s and n/s body.

nearside



front

Comments/Present Status:

Damages Consistent

Yours faithfully,

MARCUS CHUA

Licensed Appraiser

Nivitha (LKK Auto)

From:

Ye, Yong Kang Melvin <melvin.ye@sompo.com.sg>

Sent:

Monday, 12 March 2018 6:25 PM

To:

Raymond; admin-d@lkkauto.com; assignments@lkkauto.com

Cc:

Gnoh, Pau Loong; Henry, Irene James

Subject:

RE: Accident Involving FBH3408Y & SLG6477P on 08/03/2018

Our Claim Reference: CMTD1801070/GPC

Your Reference: FBH 3408Y

Hi Raymond,

We acknowledged receipt of your claim documents.

Please be informed that Gnoh Pau Loong the handler of this case.

We have appointed LKK Auto to conduct the survey.

Aside to LKK Auto,

Please make arrangement to conduct the survey for FBH 3408Y.

Best Regards

Melvin Ye Claims Division

D: 6322 4667 | T: 6461 6555 | F: 6221 3302



A Century of Trust

Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623 Website: www.sompo.com.sg | Facebook: www.facebook.com/SompoSG

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From: Raymond [mailto:raymond@bhh.com.sg]

Sent: Monday, 12 March, 2018 5:27 PM

To: Claims - Motor Survey < Motor Survey @sompo.com.sg >

Subject: Accident Involving FBH3408Y & SLG6477P on 08/03/2018

Dear Sir / Madam,

We attached the third party claim documents for your perusal.

Appreciate for you to arrange for the Pre-repair survey.

Thanks

Best Regards,
Raymond
Ban Hock Hin Co., Pte Ltd
Tel: (65) 6281 6520 x 220 | Fax: (65) 6284 2969
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Facebook: http://www.facebook.com/bhhsg



No. 6 Defu Lane 4, Singapore 539410

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MOTORCYCLE ACCESSORIES | SERVICE CENTRE | MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL WORKS |













Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars | |
|----------------------------------|-------------------|
| Owner ID Type: | Company |
| Owner ID: | 0288K |
| Vehicle Details | |
| Vehicle No.: | FBH3408Y |
| Vehicle to be Exported: | No |
| Intended De-registration Date: | 13 Mar 2018 |
| Vehicle Make: | YAMAHA |
| Vehicle Model: | YBR 125 MANUAL |
| Primary Colour: | Red |
| Manufacturing Year: | 2013 |
| Engine No.: | E3J2E008763 |
| Chassis No.: | LBPKE1788D0010040 |
| Maximum Power Output: | |
| Open Market Value: | \$1,267.00 |
| Original Registration Date: | 15 May 2013 |
| First Registration Date: | 15 May 2013 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$191.00 |
| Intended PARF Rebate D | etails |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate De | etails |
| COE Expiry Date: | 14 May 2023 |
| COE Category: | D - Motorcycle |
| COE Period(Years): | 10 |
| QP Paid: | \$1,700.00 |
| COE Rebate Amount: | \$878.00 |
| Total Rebate Amount: | \$878.00 |

The information contained herein is correct as at 13 Mar 2018

Enquire Transfer Fee

| Vehicle Details | |
|---------------------------------|--|
| Vehicle No. : | FBH3408Y |
| Vehicle Type : | P00 - Passenger Motorcycle/Autocycle/Moped |
| Vehicle Attachment 1 : | No Attachment |
| Vehicle Scheme : | Normal |
| Vehicle Make : | YAMAHA |
| Vehicle Model : | YBR 125 MANUAL |
| Chassis No. : | LBPKE1788D0010040 |
| Propellant : | Petrol |
| Engine No. : | E3J2E008763 |
| Engine Capacity : | 124 cc |
| Maximum Power Output : | • |
| Maximum Laden Weight : | 285 kg |
| Unladen Weight: | 124 kg |
| Year Of Manufacture : | 2013 |
| Original Registration Date : | 15 May 2013 |
| Lifespan Expiry Date: | - |
| COE Category : | D - Motorcycle |
| Quota Premium: | \$1,700.00 |
| COE Expiry Date : | 14 May 2023 |

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.
- 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

| Date Of Report Date Of Accident Exact Location Of Accident Country/State of Loss | ACCIDENT STATEMENT 09/03/2018 13:15 08/03/2018 15:40 ALONG BARTLEY RD TOWARDS SERANGOON AVE 1 SINGAPORE ETAILS OF OWN VEHICLE FBH3408Y |
|--|--|
| Date Of Accident Exact Location Of Accident Country/State of Loss | 08/03/2018 15:40 ALONG BARTLEY RD TOWARDS SERANGOON AVE 1 SINGAPORE ETAILS OF OWN VEHICLE |
| Exact Location Of Accident Country/State of Loss | ALONG BARTLEY RD TOWARDS SERANGOON AVE 1 SINGAPORE ETAILS OF OWN VEHICLE |
| Country/State of Loss | SINGAPORE ETAILS OF OWN VEHICLE |
| | ETAILS OF OWN VEHICLE |
| | |
| D | FBH3408Y |
| /ehicle Registration Number | |
| nsured/Policyholder | |
| Name Of Registered Owner | BAN HOCK HIN CO PTE LTD |
| Co Reg No | 197000288K |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-62812079 |
| Vehicle Particulars | |
| Manufacturer | YAMAHA |
| Model | YBR 125 |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | REPORTING ONLY |
| Vehicle Category | MOTORCYCLE |
| Insurance Company | |
| Name of Insurance Company | ALLIED WORLD ASSURANCE COMPANY, LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | AVFMSB0000591702 |
| Cover Note Number | |
| Driver | |

LU DENG LIANG Name of Driver G2289647X NRIC No 02/06/1984 Date Of Birth OUTDOOR Occupation 01/08/2013 Date Of Driving Pass 4 YEARS AND 7 MONTHS **Driving Experience** MALE Gender

(LOCAL) +65-94993458 Mobile Number Fax Number

Contact Number

SRA3@SG.MCD.COM EMail Address

Address

324 SERANGOON AVENUE 3 #05-288 SINGAPORE 550324

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

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

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

The second financia of the

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]

SERANGOON NPC

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180308/2177. ON 08/03/2018 AT ABOUT 1540HRS, I WAS RIDING MY COMPANY'S MOTORCYCLE (FBH3408Y) ALONG BARTLEY ROAD DOING DELIVERY. I WAS RIDING ALONG LANE 2 AND WANTED TO FILTER TO LANE 1. I CHECKED MY RIGHT REAR MIRROR AND DID NOT SEE ANY VEHICLE. I THEN FILTER TO THE RIGHT. ALL OF A SUDDEN, ONE VEHICLE (SLG6477P) APPEARED IN HIGH SPEED AND OVERTOOK MY MOTORCYCLE. I TRIED TO AVOID COLLISION HOWEVER THE LEFT REAR OF THE VEHICLE BRUSHED THE RIGHT SIDE OF MY MOTORCYCLE WHICH CAUSED MY VEHICLE TO FALL OVER AND I ROLLED ON THE FLOOR A FEW TIMES. SHORTLY AFTER AMBULANCE AND TP ARRIVED AND I WAS CONVEYED TO TAN TOCK SENG HOSPITAL. MY MANAGER, KUMAR, WENT DOWN TO SCENE TO TALK TO THE OFFICER AND WAS GIVEN A CASE CARD WITH REPORT NUMBER F/20180308/0166.

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

SLG6477P

Vehicle Make/Model/Colour

MERCEDES BENZ/GLA180 AUTO/SILVER

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

OOM NHOL

NRIC/Passport Number

Contact Number

93832464

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LU DENG LIANG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBH3408Y

Were seat belts worn?

NO

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode



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 Authroised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
 The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
 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 evaluable application by interested parties.
 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 below made available aforestaid.

- 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 process my personal data/personal information set out in this [form] and any other personal information to all insurer(s) who have insured 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 shall be collectively referred to as the vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (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 interest. "Insurers"), the insurers' isvyers/law firms, the Monetery Authority of Singapore and any relevant government agency/authority (such as
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

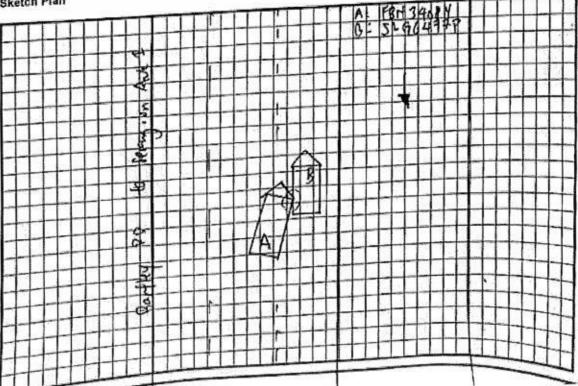
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve (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
- (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,
- (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 sized outside of Singapore, for one or more of the above Purposes.

VERIFIED BY AJAX MARS REPORTING OFFICER THOMAS NG CHIN CHUN

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

Witnessed by Reporting Centre Personnel

Sketch Plan







Police Station Of Origin; Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 550129

1 013 Report No. T/20180308/2177

Tel No: 1800-4880999

| REPORT O | F A TRAFFIC | ACCIDENT | | | | |
|--------------------------|-------------------------|------------------------------|---|----------------------------|--|--|
| | ne Report M 18 20:48 | lado; | Vide Report No.: | Station Diary No.: 63 | | |
| Informa | nt's Particu | lars | | | | |
| Charles Children College | Informant: GLIANG | | Address: 324 SERANGOON AVENUE | 3 #05-288 SINGAPORE 550324 | | |
| | / ID No.: / G2289647 | 'X | Contact No.: Home/Office: Mobile: 94993458 | | | |
| National | | | Email: | | | |
| Sex: Male | Age: 33 | Date of Birth: 02/06/1984 | Type of Informant: Rider | | | |
| Race: Chinese | | I seeman seed of the seed | Language: Chinese | Institution / School Name: | | |
| Occupa | tion: RY MAN | | Driving Licence Information: Class: 2B,3 | Date of Expiry: | | |

| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 08/03/2018 15:40 | Type of Location Straight Road | |
|---|------------------------------|---------------------------------|---|-----------------------------------|--|
| Location: Along Road 1 BARTLEY RO Weather: | | Road Surface: | | Road Speed Limit: | |
| Clear Traffic Flow; One Way | | Traffic Control: Not Controlled | | Traffic Volume: Heavy | |
| Type of Collis | slon: | - Same Direction | | Anyone conveyed by ambulance: | |

| Vehicle No. | Туре | Make | Mode | Color | Condition | No of Passanger |
|-------------|------------|------|------|-------|---------------------|-----------------|
| FBH3408Y | Motorcycle | | | 9 | Slightly Damaged | 0 |
| SLG6477P | Car | | | | | 0 |





2 013

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE

Report No. T/20180308/2177

556129

Tel No: 1800-4880999

CONTINUATION OF REPORT

Brief Details.

On 08/03/2018 at about 1540hrs, I was riding my company's motorcycle (FBH3408Y) along Bartley Road doing delivery. I was riding along lane 2 and wanted to filter to lane 1. I checked my right rear mirror and did not see any vehicle. I then filter to the right. All of a sudden, one vehicle (SLG6477P) appeared in high speed and overtook my mortorcycle. I tried to avoid collision however the left rear of the vehicle brushed the right side of my motorcycle which caused my vehicle to fall over and I rolled on the floor a few times. Shortly after Ambulance and TP arrived and I was conveyed to Tan Tock Seng Hospital. My manager, Kumar, went down to scene to talk to the officer and was given a case card with report number F/20180308/0166.





T/20180308/2177

3013

Report No. T/20180308/2177

Police Station Of Origin; Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129

Tel No: 1800-4880999

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: F / Sgt 2 NGIO HAN BOON, DARREN | Signalure Of Informant: |
|--|--------------------------------|
| Signature Of Interpreter: Not applicable | Date/Time: 08/03/2018 20:48 |
| Officer In Charge Of Case: | Classification Of Case: |
| SI MOHAMED AKBAR BIMMEERA HUSSAIN Contact No.: 65573313 | SN 154 |
| Authentication Stamp | |



QUOTATION

Customer:

SOMPO INSURANCE SINGAPORE PTE LTD

50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWER SINGAPORE 048623

MOTOR CLAIMS DEPT

VEHICLE NO.

: FBH3408Y

MAKE/MODEL

: YAM / YBR125

NQ. : 32434

Not Add DATE : 12/03/2018
CLAIM NO. : 11109
POLICY NO. : AVFMSB0000591702

L/S 3 . FROM : RAYMOND

The phys Affer Upa (Page 1 of 2)

| | U | 15/5/ | / () | | (Page | 1 01 2) |
|-------|--|--------------------|------------|-------------------|-------|----------------|
| S/N | Description | Action | Qty | <u>Unit Price</u> | 1 | Amount |
| | BAR HANDLE | REPLACE | 1.00 | \$70.00 | Seef | 70.00 |
| | P/N: 42062 | | | | | 15 |
| | COVER TAIL LH (RED) | REPLACE | 1.00 | \$90.00 | Cre | 90.00 |
| 1.000 | P/N: 45418 | | | | 01.2 | 100 |
| * | COWLING FRONT (RED) Regay SU | REPLACE | 1.00 | \$283.00 | C1617 | 283.00 |
| 53 | P/N: 42639 | | | | | 60-001e-01-007 |
| | CRASH BAR | REPLACE | 1.00 | \$195.00 | sel | 195.00 |
| | P/N: 35878 | | | 10270170170100 | | |
| | FOOTREST FRONT | REPLACE | 1.00 | \$78.00 | sed | 78.00 |
| | P/N: 42064 | 100000000000000000 | 18/02/22/1 | | _ | 00.00 |
| | HANDLE SEAT | REPLACE | 1.00 | \$98.00 | SUL | 98.00 |
| | P/N: 42567 | | | *05.00 | | 70.00 |
| | LABOUR | Supply/Install | 2.00 | \$35.00 | | 70.00 |
| | P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED. | | | | | |
| | LAMP SIGNAL FRONT LH | REPLACE | 1.00 | \$55.00 | 17 | 55.00 |
| | P/N: 43344 | | | | | |
| | LAMP SIGNAL FRONT RH | REPLACE | 1.00 | \$55.00 | Cun | 55.00 |
| | P/N: 42003 | | | | | |
| 0 | LAMP SIGNAL REAR LH | REPLACE | 1.00 | \$63,00 | 17 | 63.00 |
| | P/N: 44858 | | | | 1 1 | 00.00 |
| 1 | LAMP SIGNAL REAR RH | REPLACE | 1.00 | \$63.00 | 17 | 63.00 |
| | P/N: 45419 | | | 250 250 | | |
| 2 | LEVER BRAKE | REPLACE | 1.00 | \$19.00 | SIA | 19.00 |
| | P/N: 26343 | | | | 0.1 | , |
| 3 | LEVER CLUTCH | REPLACE | 1.00 | \$19.00 | 5 61 | 19.00 |
| | | | | | | |

P/N: 52644



| | S/N | Description | Action | Qty | Unit Price | Α | mount |
|-----|-----|--|-----------|------|------------|---------------|----------|
| | 14 | MIRROR LH | REPLACE | 1.00 | \$30.00 | 11 | 30.00 |
| | | P/N: 52645 | | | | 400000 (To.) | 24 |
| | 15 | MIRROR RH | REPLACE | 1.00 | \$30.00 | 17 | 30.00 X |
| | | P/N: 46219 | | | | | |
| | 16 | MUDGUARD FRONT (RED) | REPLACE | 1.00 | \$98.00 | C-47 | 98.00 |
| | | P/N: 45374 | | | | | |
| | 17 | MUDGUARD REAR | REPLACE | 1.00 | \$68.00 | 17 | 68.00 X |
| | | P/N: 45416 | | | | | 000000 |
| | 18 | PEDAL BRAKE | REPLACE | 1.00 | \$87.00 | 44 | 87.00 |
| | | P/N: 44906 | | | | 0000 08 | |
| | 19 | PLATE NUMBER REAR (6.5 INCH X 9 INCH) | REPLACE | 1.00 | \$12.00 | 11 | 12.00 |
| | | P/N: 26951 | | | | | |
| | 20 | PROTECTOR MUFFLER (REAR) | REPLACE | 1.00 | \$32.00 | euz | 32.00 |
| | | P/N: 27115 | | | | | |
| | 21 | PROTECTOR MUFFLER 3 | REPLACE | 1.00 | \$145.00 | SIL | .145.00 |
| | | P/N: 42261 | | | | 1. | |
| | 22 | RUBBER FOOTREST FRONT | REPLACE | 2.00 | \$15.00 | 70,0 | 30.00 |
| | | P/N: 26136 | | | | | 5. |
| 8 | 23 | STICKER NUMBER PLATE FRONT (BLACK) | REPLACE | 1.00 | \$12.00 | nec | 12.00 10 |
| D | | STRAIGHT P/N: 32921 | | | | | |
| 9 | 24 | TRANSPORT CHARGES-MOBILE RESCUE / REPA | MR. | 1.00 | \$35.00 | | 35.00 |
| N | 24 | ONSITE | urt | 1.00 | | | |
| 100 | | P/N: 41523 | | | | | |
| | | c | SUB TOTAL | | | \$1.7 | 737.00 |
| | | | SST @ 7 % | | | | 121.59 |
| | | | | | | | 1430 |

GRAND TOTAL

Validity: 30 days

919

For & on Behalf of

Acknowledge & Accepted By

BAN HOCK HIN CO PTE LTD



RAYMOND

This quotation is sent via email / LAN-Fax and will bear a computer generated signature. Repairer of the following:

LKK Auto Consultants hence notify

- 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:





\$1,858.59



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 Internati | onale Des Experts En Auto | omobile | |
|---|-------------------|---|--|----------------------|--|
| SOMPO INSUI | RANCE | SINGAPORE PL | Ref : CS/SMO18004742/Uvd3e2 | | |
| 50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWERSINGAPORE 048623 | | | Date: 16-05-2018 | | |
| 1. | (Marie) | Policy Particulars | :- THIRD PARTY CL | AIM | |
| Insured | Veh. | SLG 6477P | Veh. Inspected | FBH 3408Y | |
| Policy N | o. | | Coverage (\$) | 0.00 | |
| Claim No | 0. | CMTD1801070/GPC | Excess (\$) | 0.00 | |
| Assign F | rom | MELVIN YONG | Assign Date | 12/03/2018 | |
| 2. | | Vehicle Part | iculars & Condition | | |
| Make & I | Model | YAMAHA YBR | c.c | 124 | |
| Engine N | No. | HIDDEN | Year of Reg. | 2013 | |
| Chassis | No. | LBPKE1788D0010040 | Colour | RED | |
| Odomete | er | 36927 | Steering | IN ORDER | |
| Brakes | | IN ORDER | Modification | SPORTS RIM | |
| General | | GOOD | | | |
| 3. | | Condit | ions of Tyres | | |
| | | Size | Make | Balance | |
| R/H Fron | | 2.75-18 | METZELER | 6 mm | |
| L/H Fron | t Tyre | | | mm | |
| R/H Rear | | 90-90-18 | METZELER | 6 mm | |
| L/H Rear | Tyre | | | mm | |
| 4. | Basilla | | on of Damages | | |
| THE VEHI | CLE SU | STAINED DAMAGES AT THE O/S | S AND N/S BODY. | | |
| DAMAGES | S SEE D | | | | |
| 5. | | Genera | Information | | |
| Accident | Date | 08/03/2018 | Inspection Date | 13/03/2018 | |
| Survey h | eld at | BAN HOCK HIN CO.PTE LTD | | | |
| | | NO 6 DEFU LANE 4 SINGAPORE 539410 | | | |
| 5a. | 9-16 | R | emarks | | |
| A)THE INS B)IN ACCO | SPECTIC ORDANG | N WAS CONDUCTED ON A"WIT E TO YOUR INSTRUCTIONS, W | THOUT PREJUDICE" BA VE HAVE NOT AUTHORI | SIS. SED REPAIRS. | |
| 5b. | | Estimate | Days of Repair | | |
| ESTIMATE | ED NOR | MAL PERIOD FOR REPAIR: | 3 Working Da | ys | |



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBH 3408Y

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|------|--|---------------|------------------------------|-------------------|
| | REPLACEMENT OF PARTS | | | |
| 1 | BAR HANDLE | BENT | 70.00 | 70.00 |
| | COVER TAIL LH (RED) | CRACKED | 90.00 | 90.00 |
| 1 | CRASH BAR | BENT | 195.00 | 195.00 |
| 1 | FOOTREST FRONT | BENT | 78.00 | 78.00 |
| | HANDLE SEAT | SERVICEABLE | 98.00 | - |
| 1 | LAMP SIGNAL FRONT LH | NOT NECESSARY | 55.00 | 1 |
| 1 | LAMP SIGNAL FRONT RH | CUT | 55.00 | 55.00 |
| 1 | LAMP SIGNAL REAR LH | NOT NECESSARY | 63.00 | - |
| | LAMP SIGNAL REAR RH | NOT NECESSARY | 63.00 | 1 |
| | LEVER BRAKE | SCRATCHED | 19.00 | 19.00 |
| | LEVER CLUTCH | SCRATCHED | 19.00 | 19.00 |
| | MIRROR LH | NOT NECESSARY | 30.00 | |
| 1 | MIRROR RH | NOT NECESSARY | 30.00 | |
| - 14 | MUDGUARD FRONT (RED) | CUT | 98.00 | 98.00 |
| 4 | MUDGUARD REAR | NOT NECESSARY | 68.00 | 1 |
| 4 | PEDAL BRAKE | BENT | 87.00 | 87.00 |
| | PLATE NUMBER REAR (6.5 INCH X 9 INCH) | NOT NECESSARY | 12.00 | |
| | PROTECTOR MUFFLER (REAR) | сит | 32.00 | 32.00 |
| | PROTECTOR MUFFLER 3 | SCRATCHED | 145.00 | |
| | RUBBER FOOTREST FRONT @\$15.00 | TORN | 30.00 | 30.00 |
| | LESS 10% DISCOUNT | | S | 91.80 |
| | | | 1,337.00 | 826.20 |
| | SPECIAL NETT ITEMS | | | |
| | STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT | NECESSARY | 12.00 | 10.00 |
| | (SN) | | 12.0 | 0 10.00 |
| | LABOUR | | | |
| | COWLING FRONT (RED) | | 283.0 | |
| | LABOUR - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED. | | 70.0 | 0 70.0 |
| | TRANSPORT CHARGES - MOBILE RESCUE / REPAIR | | 35.0 | 0 35.0 |
| | ONSITE. | | 388.0 | 0 155.0 |
| _ | GRAND TOTAL | | 1,737.0 | 0 991.2 |

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| RECOMMENDED COST OF LUMP SUM REPAIRS | 800.00 | |
|--------------------------------------|--------|--|
| (TO ITS PRE-ACCIDENT CONDITION) | | |

Report Ref No. CS/SMO18004742/Uvd3e2

CHUA KANG SENG

Licensed Appraiser

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