ASS REC. BY REF CS FCI 1800 S	5277/Ugd3 cuperial Instruction:
ASSIGNMEN	Office) Date/Time 2/3/18 @ 12/15pm
Estimated Cost	Bill to:
To Inspect Vehicle No. FBL 7432 D	Insured: SHC 1446 E Tel: 628 16520
at Workshop m/s Sun Hock Hin No 6 Note Jane 4	Tel: 62816520
Policy No:	Claim No: 018002168 MFS H
Sum Insured:	Excess:
Make of Veh: (Client's Record)	D.O.A. 14/03/2018
Date/Time: 1016cm@21318 Person Contacted:	Peymond Vehicle NOUT
Date/Time Action/Instruction (>> Estimate FBL 7437D->	,
79/3/18@ 7.21pm vevised to Caren Tan	3615/Klqbn2 D-0.4:10/12/201.

ASS. REC. BY: Moreus REF:	ta/
ASS	SIGNMENT
	2
From: Date:	Veh No: F3 L743 2 DYr Regn:
OD/ TP / WS / TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
To Inspect Vehicle No: F5.2 7432D	Truck / Trailer or
at Workshop m/s 3/17/	Make: Sym Max sym c.c 400
of	Colour Orange A/C: Insured / Std / NI / NA
	Sp.Reading 24182 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No: RFGLXA 902HS 800092
Policy No.	131 137
Claims No.	Gen. Cond: 800d / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inother Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /(S/Rim / STD A/Rim or
	Tyre Size: F: 120/70-15
(Policy Condition)	R: 160/60-14
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU (PIR) SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value: /5(c -	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal 6
GIA / PR Seen: Consistent?: Yes or No	L/Bal.
Est. Repairs:	D.O.A. 14/3/12 D.O.I. 21/3/10
Lum Sum: % 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
Date: Vehicle: IN / OUT Person Contacted:	015, 115 30
	The U/C / Chassis frame / Body Structure affected due to collision.
The state of the s	
LYASYS9 nett 95	7 /
Mals confind finel by	\$ 7045.56 w/h Raguard
(Clyd 6 116284 142)	\$ 7045.56 with Raymond
	<u> </u>
RECEIVED O A JUM 2	month of the state
RECEIVED BUT JUIL (/ RECTION D
	1 0/0/2000
Date/Time, File Pass to?	
noll hasses	Days Of Repair:
1) 08/6 MGH : Final Report F	Resurvey No. of Trip: Survey Fee: 160
2) Add Fee:	Transportation: (5)
Add Fee:	7_0-10,_01 90
Report Format : 7P	: Interview (\$) Photos
	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$ 7045.56)	:Weekend (\$) (\\0\\8
	TOTAL (415)

f



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	rnationale Des Experts En Auton	nobile
FIRS	T CAPITAL INSU	RANCE LTD	Ref : CS/FCI180052	77/Uqd3
	OBINSON ROAD 01 CITY HOUSES	INGAPORE 068877	Date: 21-03-2018 Code: FCI2	
١.		Policy Particu	lars :- THIRD PARTY CLA	IM
	Insured Veh.	SHC 1446E	Veh. Inspected	FBL 7432D
	Policy No.		Coverage (\$)	0.00
	Claim No.	D18002168MFSH	Excess (\$)	0.00
	Assign From	CWS (KAREN TAN)	Assign Date	21/03/2018
2.		Vehicle F	Particulars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	•	Steering	
	Brakes		Modification	
	General			
3.		Con	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
	Links Bridge	Desc	ription of Damages	ALEXANDER COMPANSA
5.	Emerge No. 1992	Ger	neral Information	
	Accident Date	14/03/2018	Inspection Date	21/03/2018
	Survey held at	BAN HOCK HIN CO.PTE L	TD	
		NO 6 DEFU LANE 4 SINGAPORE 539410		
5a.	THE REAL PROPERTY.		Remarks	
			"WITHOUT PREJUDICE" BAS S, WE HAVE NOT AUTHORIS	



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

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

MOTOR SURVEY ASSIGNMENT

Date

15-03-2018

Our Ref No. D18002168MFSH

Accident Date

14-03-2018

Claim Type. Third Party

Insured Vehicle

SHC1446E

Third Party Vehicle. FBL7432D

Survey Location

NO. 6 DEFU LANE 4

Contact Person.

RAYMOND

Contact No.

62816520/0

Fax No. 62842969

Survey Type

WITHOUT PREJUDICE: LIABILITY UNCLEAR:

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

KARENT

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.

	• •					
Job Sheet (/	ClaimWS/Surveyor/JobSheet/	236008) 🚂 PF	RI Documents 🚇 C	lose 🗶		
	2		PRI Header Det	ails		
Claim No	D18002168MFSH	Policy No	D-18088936MFSH		Claimant S.No & Name	1 & BAN HOO
Workshop Name	BAN HOCK HIN CO. PTE LTD (Contact Person : RAYMOND)	Survey Location & Contact Details	NO. 6 DEFU LANE 4 Mobile: 0 , Phone EmailId: RAYMONE	: 628165		842969
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDIO	CE: LIABI	LITY UNCLE	AR:
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC1446E		TP Vehicle No	FBL7432D
PRI Recieved Date	19-03-2018 08:47:36 PM	Surveyor Appointed Date	20-03-2018 12:14:	47 PM	Surveyor Accept Date	21-03-2018 (
	47	3	Survey Report Up	load		
Surveyor Inspection Date *:		Surveyor Report Date	21-03-2018		Upload Survey Report *:	Choose File
		•	Vehicle Particula	ars		
Make	Please Select Make ▼	Model	Please Select Mode	el 🔻	Year	Select Year
Chasis No		Engine No			Mileage	
Color		Cubic Capacity				
Multiple Do	ocuments Upload					
		Upload Multiple	Documents			
File Nam	ne				Action	
Surveyor J	ob Remarks					
Remarks					Save	

Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Thursday, 22 March 2018 3:21 PM

To:

'Claim Workflow System'; assignments

Cc:

KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR

Subject:

RE: SURVEY ASSESSMENT - D18002168MFSH/1

Attachments:

CSFCI18005277Uqd3.pdf

Dear Karen,

Enclosed herewith preliminary advice of FBL 7432D.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

From: Admin-D (LKKAuto)

Sent: Wednesday, 21 March 2018 10:19 AM

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

Cc: KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D18002168MFSH/1

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

Sent: Tuesday, 20 March 2018 12:14 PM To: ASSIGNMENTS@LKKAUTO.COM

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

Subject: PRI: SURVEY ASSESSMENT - D18002168MFSH/1

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

MS First Capital Insurance Limited



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your Ref: D18002168MFSH

Date: 22 March 2018

Our Ref: CS/FCI18005277/Uqd3

The Motor Claims Department First Capital Insurance Ltd

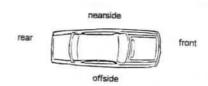
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. FBL 7432D .

Please be informed that we had conducted the inspection of the abovementioned vehicle on $\underline{21/03/2018}$ at the premises of M/s $\underline{BAN\ HOCK\ HIN.}$ and have the following to report:-

Workshop Estimate Amount	: S\$	7,786.00	
Revised Estimate Amount	: S\$	4,441.00	
"Check" Items Amount	: S\$	2,202.00	
Market Value	: S\$	- X	
LTA Reimbursement Value	: <u>S</u> \$	= =/	
Nett Value	: S\$		

Description of Damage:
The vehicle sustained damages
at the o/s n/s body.



Yours faithfully

CHUA KANG SENG Licensed Appraiser Enquire Transfer Fee

Vehicle Details			
Vehicle No.:	FBL7432D		
Vehicle Type:	P01 - Passenger Scooter		
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make:	SYM		
Vehicle Model :	MAXSYM 400I CVT		
Chassis No.:	RFGLXA902HS800092		
Propellant:	Petrol		
Engine No.:	MU107437		
Engine Capacity :	400 cc		
Maximum Power Output:			
Maximum Laden Weight:	399 kg		
Unladen Weight :	219 kg		
Year Of Manufacture :	2016		
Original Registration Date :	27 Feb 2017		
Lifespan Expiry Date :	·		
COE Category :	D - Motorcycle		
Quota Premium :	\$6,113.00		
COE Expiry Date :	26 Feb 2027		
Road Tax Expiry Date :	26 Aug 2018		
Inspection Due Date :	26 Feb 2020		
Intended Transfer Date:	21 Mar 2018		
CO2 Emission :			
CO Emission :	(=)		
HC Emission :	-		
NOx Emission :	:6		
PM Emission :	•		
Late renewal fee(s) will be impos	ed if road tax / lay up has expired. Please use Enqu	ire Road Tax Payable for fee(s) pay	/able.
Road tax, including Over Paymer Amount Payable	nt (if any), of a vehicle will follow the vehicle to the	new registered owner when its own	nership is being transferred.
MANAGE AND STREET OF THE STREET	Amount Before GST	GST Amount	Amount After GST
	(5\$)	(S\$)	(\$\$)
Transfer Fee :	25.00	•	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

Enquire PARF/COE Rebate for Registered Vehicle

/ehicle Owner Particulars	
Owner ID Type:	Club/Association/Organisation
Owner ID:	0162D
/ehicle Details	
/ehicle No.:	FBL7432D
/ehicle to be Exported:	No
ntended De-registration Date:	21 Mar 2018
/ehicle Make:	SYM
/ehicle Model:	MAXSYM 400I CVT
Primary Colour:	Orange
Manufacturing Year:	2016
Engine No.:	MU107437
Chassis No.:	RFGLXA902HS800092
Maximum Power Output:	-
Open Market Value:	\$5,631.00
Original Registration Date:	27 Feb 2017
irst Registration Date:	27 Feb 2017
ransfer Count:	0
Actual ARF Paid: ntended PARF Rebate Details	\$845.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
ARF Rebate Amount:	\$0.00
ntended COE Rebate Details	
COE Expiry Date:	26 Feb 2027
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,113.00
COE Rebate Amount:	\$5,459.00
otal Rebate Amount:	\$5,459.00

The information contained herein is correct as at 21 Mar 2018

OK



(/)

Bike model	
SYM MAXSYM	
Type Any	_
Any	
Price From	_
Any	
Price To	_
Any	
Class	
Any	
MORE SEARCH OPTIONS ❤	
	O SEARCH III VIEW ALL (/LISTING/LISEDRIKES/LISTING/)

SYM Maxsym 400i (/listing/usedbike/sym-sym-maxsym-400i/2744/)



(/listing/usedbike/sym-sym-maxsym-400i/2744/)

sep\$12800 Reg : 20/04/2015 Type: Scooters 400cc

Coe till 4/2025. Loan available, welcome trade in. Serious buyers are welcome to negotiate. Unit selling fast. Contact us ASAP!

Posted on : 12/03/2018

★ PAID AD ★ DEALER AD

DETAILS > (/LISTING/USEDBIKE/SYM-SYM-MAXSYM-4001/2744/)

SYM Maxsym 400i (/listing/usedbike/sym-sym-maxsym-400i/3168/)



(/listing/usedbike/sym-sym-maxsym-400i/3168/)

Reg: 11/01/2013 Type: Scooters 400cc 66000km

All above are included in the sale. Items just change are: Battery, Start plug, Engine oil (1.8litres), Oil filter. Contact me if interested. Serious buyer only. Price able to neg.

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 16/03/2018 10:51

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.
- 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	16/03/2018 09:39
Date Of Accident	14/03/2018 00:15
Exact Location Of Accident	JLN TENTERAM TWDS JLN BAHAGIA NEAR C/P ENT BLK 20
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBL7432D
Insured/Policyholder	
Name Of Registered Owner	NTUC INCOME INSURANCE CO-OPERATIVE LIMITED
Co Reg No	S97CS0162D
Email Address	MUHAMMAD.SHAFIQ@INCOME.COM.SG
Mobile Phone No	(LOCAL) +65-98568836
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	SYM
Model	MAXSYM 400I-400CC
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5050486199-06
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD SHAFIQ BIN IBRAHIM

 NRIC No
 S9220829Z

 Date Of Birth
 23/06/1992

 Occupation
 OUTDOOR

 Date Of Driving Pass
 06/11/2012

Driving Experience 5 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98568836

Fax Number Contact Number

EMail Address MUHAMMAD.SHAFIQ@INCOME.COM.SG

Address

BLK 516 JELAPANG RD

#01-251

Postcode

670516

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by ambulance?

YES

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police? If Yes. Please state which Police Station

YES

Police Station Name

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

ADVISED OF TO SUBMIT TO MOTOR CLAIMS EMAIL

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC1446E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

GOH MIAH CHIAH

NRIC/Passport Number

S1497306J

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 14

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

MUHAMMAD SHAFIQ BIN IBRAHIM

Approximate Age

26

Injuries Sustain

Injured person in which vehicle?

FBL7432D

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

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 truthful and accurate as possible. Any wilful 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 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 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:
 - 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.

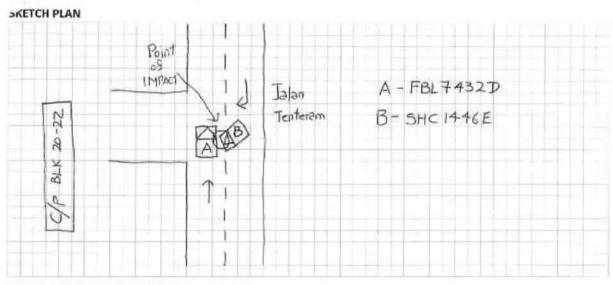
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: 15/03/18

1545HRS

Reporting Centre Personnel's Signature

Name: VINCENT NRIC/FIN No.: S99/137

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	Roser +	Report No	T/20180315/7007 -	
	11034	DEPOT THO	1/20/003/2/ 1007	-/
				/
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	/			
1				

DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: 15/03/18

15 SOHRS

Reporting Centre Personnel's Signature

Name: VINCENT NRIC/FIN No.: 599/138





1 013

Report No. T/20180316/7007

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

11/21/2010 01/10	ne Report &)18 13:26	fade:	Vide Report No.: E/20160314/0005	Station Clary No.:
Informa	nt's Partic	ulars		
	f Informant: IMAD SHAF	FIQ BIN IBRAHIM	Address: APT BLK 516 JELAPANG RD	#01-251 SINGAPORE 670516
	/ ID No.: O / S92208:	29Z	Contact No.: Home/Office:	Mobile: 98568836
National SINGAP	ity ORE CITIZ	EN	Email: sharfick@hotmail.com	
Sex: Male	Age: 25	Date of Birth: 23/06/1992	Type of Informant: Rider	
Race: Malay	,		Language: English	Institution / School Name:
Occupation: Other insurance representatives		oresentatives	Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

Type of Accident	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/03/2018 00:15	Type of Location Straight Road
JALAN TENT	ERAM am towards Jalan Bahagis	a near carpark entr		Tenteram
Weather: Clear		Road Surface: Dry		Road Speed Limit
Weather: Clear Traffic Flow: Two Way		The second secon		Road Speed Limit Traffic Volume: No Traffic

Vehicle No	Type	Make	Model	Color	Condition	No of Passenge
FBL7432D	Motorcycle	SYM	MaxSym 400l	Orange		O
SHC1446E	Car	TOYOTA	PRIUS	Blue		D

Details of V	chicle Insurance		-	The second second
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBL7432D	NTUC Income Insurance Co-Operative Limited			

Police Report



2 of 3 Report No. T/20180315/7007

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408855 Tel No: 65470000

CONTINUATION OF REPORT

Details of Perso	10/23/06/05/05/5/05	VIII SEE				
Any Pedestrian II No. of Pedestrian		Hon of t	edestrian	Crnee	ing MA	
Rider	s injured. MIL	L OSE CLI	- GUESTI INT	Citias	ing. res	
	AND DESCRIPTION OF THE PERSON	COALUM	III No		S9220829Z	
Name	MUHAMMAD SHAFIQ BIN IE	RAFIM	ID No.		0355/0535	
Related Vehicle	FBL7432D (Motorcycle)		Conta	ci No.	98568836	
Hospital/Clinic	Iospital/Clinic TAN TOCK SENG HOSPITAL		Class	28.00	Class 2B,2A,2,3 Date of Expiry: NIL	
			Licence & Expiry Date		A CONTRACTOR OF STREET	
Date Treatment	14/03/2018	Date D	ischarge	14/03	1/2018	
No. of Days gran	led Medical Leave 31	Degree	of Injury	Sligh	1	
Driver						
Name	GOH MIAH CHIAH		ID No		S1497306J	
Related Vehicle	SHC1446E (Car)		Conta	ct No.	NIL	
Hospital/Clinic	NIL		Class Orivin Licens Expin	g	Class 3,4 Date of Expiry: NIL	
Date Treatment	NIL		ischarge			
No. of Days gran	ted Medical Leave NIL	Degree	of Injury	NIL		

Brief Details.

I was travelling along Jalan Tenteram towards Jalan Bahagia and when I was approaching near the carpark entrance of Blk 20-22 Jalan Tentaram, a taxi SHC1446E, from the opposite direction suddenly made a right turn towards the carpark entrance and collided onto my right side. I was conveyed to TTSH due to my injury. The taxi driver had also admitted liability at scene and there was an eyewitness.

Muhammad Nurirwan Bin Mazlan @ 88611344.

Police Report



T(29180315/7007

Police Station Of Origin Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/2019031 6/7007

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan.

Authentication Stamp

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Intermant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter Not applicable	Date/Time: 15/03/2018 13:28
Officer In Charge Of Case: TP / TPHQ / LEE GUANG HUI Contact No.: 65476138	Classification Of Case:



Customer:

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

MOTOR CLAIMS DEPT

UUOTATIO

NO. : 32457

Alal NO. : 32457

The photo After DATE : 16

CLAIM NO. : 11

POLICY NO. :

2//3/18

FROM : RA QUOTATION

: 16/03/2018

: 11115

: RAYMOND

VEHICLE NO.

: FBL7432D

MAKE/MODEL

: SYM / MAXSYM 400I CVT

(Page 1 of 3)

						(Fay	e 1 01 3)
S/N	Description		Action	Qty	Unit Price		Amount
	ALIGNMENT BODY	4	REPLACE	1.00	\$350.00		350.00
	P/N: 29561					14-5	,
	BALANCER HANDLE 1		REPLACE	1.00	\$38.00		38.00
	P/N: 29008		REPLACE	4.00	6442.00	Daye	112.00
	BALL RACE SET		REPLACE	1.00	\$112.00	18	112.00
	BAR HANDLE		REPLACE	1.00	\$55.00	51	55.00
	P/N: 56670						
	BOX FR-INNER		REPLACE	1.00	\$68.00	CN	68.00
	P/N: 55078						
	BOX REAR (GIVI) V56N MAXIA 4		REPLACE	1.00	\$875.00	euz	875.00
	P/N: 54026					0	
	COIN BOX LH.LID BK-001U		REPLACE	1.00	\$20.00	rege	20.00
	COVER L SIDE ASSY		REPLACE	1.00	\$108.00	Cn	108.00
	P/N: 57009						
	COVER L-BODY ASSY		REPLACE	1.00	\$199.00	cn	199.00
	P/N: 55058						
0	COVER OUTER ASSY .BK-001U		REPLACE	1.00	\$119.00	cuj	119.00
	P/N: 55354						
1	FR FENDER GY-517S		REPLACE	1.00	\$95.00	(4-7	95.00
	P/N: 57032						-
2	FRONT UNDER SPOLIER		REPLACE	1.00	\$262.00	cul	262.00
	P/N: 55352						
3	GRIP LH-RR		REPLACE	1.00	\$95.00	Tois	95.00
	P/N: 55074						





Zuota						je 2 01 3)
S/N	Description	Action	Qty	Unit Price	1	Amount
14	HEAD LIGHT SET	REPLACE	1.00	\$1,188.00	/ Cur	1,188.00
15	INNER BIN STIFFENER P/N: 55119	REPLACE	1.00	\$18.00	11	18.00
16	L FRONT BRAKE DISK BK-001C	REPLACE	1.00	\$175.00	17	175.00 🗴
17	LABOUR # # P/N: 06766	Supply/Install	16.00	\$35.00	480	560.00 7
	- FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.					
18	LEVER LH P/N: 55102	REPLACE	1.00	\$85.00	Sno	85.00
19	L-FR COVER GARNISH BK P/N: 55050	REPLACE	1.00	\$9.00	(4.	9.00
20	LH.FR.CUSHION COMP BK-001C 4550rber	REPLACE	1.00	\$432.00	Bel	432.00 7
21	MAINSTAND ASSY P/N: 55104	REPLACE	1.00	\$145.00	Deap Cat	145.00
22	METER PANEL BK-001U P/N: 55090	REPLACE	1.00	\$32.00	697	32.00
23	MIRROR LH P/N: 55351	REPLACE	1.00	\$147.00	647	147.00
24	PANEL LH-FLOOR ASSY P/N: 55055	REPLACE	1.00	\$42.00	Cui	42.00
25	R FRONT BRAKE DISK BK-001C	REPLACE	1.00	\$175.00	nn	175.00 🗡
26	R SIDE COVER ASSY BK-231P	REPLACE	1.00	\$108.00	cre	108.00 2
27	RH.FR.CUSHION COMP BK-001C ossorbe	REPLACE	1.00	\$432.00	Bed	432.007
28	RIM SPORT FRONT P/N: 55465	REPLACE	1.00	\$556.00	ellucys	556.00
29	SIDE STAND COMP	REPLACE	1.00	\$35.00	Cur	35.00
30	SPRAY PAINTING ON ALL COVERS	Spray	1.00	\$450.00	400	450.00
31	STEP LH PILLION	REPLACE	1.00	\$45.00	cui	45.00
32	P/N: 55118 STICKER (ORANGEFORCE) BOX REAR NEW P/N: 54254	REPLACE S.	√ _{1.00}	\$45.00	sen	45.00
33	STICKER (ORANGEFORCE) COVER SIDE NEW 🖴	REPLACE S.	N _{2.00}	\$70.00	sen	140.00
34	P/N: 54256 STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT	REPLACE 5,	J 1.00	\$12.00	120	12.00





(Page 2 of 3)

Quotation Nos.: 32457

(Page 3 of 3)

S/N	Description	Action	Qty	Unit Price		Amount
35	STICKER(ORANGEFORCE) WINDSHIELD NEW P/N: 54253	and the state of t		\$70.00	ner	70.00
36	STRG.STEM COMP	REPLACE	1.00	\$170.00	bel	170.00
37	TRANSPORT CHARGES P/N: 07169	4	1.00	\$90.00	35	90.00
38	WIND SCREEN ASSY BK-001U	REPLACE	1.00	\$229.00	cuj	229.00
		SUB TOTAL GST @ 7 %				,786.00 5545.02
		GRAND TOTAL		•	\$8	,331.02

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD



RAYMOND

Acknowledge & Accepted By

5701

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.

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:

8713.40

P-6128-40
102
5.265
106-1265
7045-56





Customer:

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

QUOTATION

NO. : 32668

- Rev. 1

Supplementary 1 To QTN: 32457

DATE

: 04/06/2018

CLAIM NO. : 11115

POLICY NO. :

FROM : RAYMOND

VEHICLE NO.

: FBL7432D

MAKE/MODEL

: SYM / MAXSYM 400I CVT

(Page 1 of 2)

					(Page 1 of 2)
/N	Description	Action	Qty	Unit Price	Amount
7	BALL STEERING UPPER P/N: 54481	Replace	1.00	\$8.00	nue 8.00
*	CAP COVER CRANKCASE P/N: 55076	Replace	1.00	\$8.00	ere 8.00
	CLIP HOSE (1 INCH) P/N: 29700	Replace	1.00	\$1.90	1.90
	COOLANT RADIATOR (ANF 30) P/N: 45831	Replace	3.00	\$11.50	34.50
	COVER L-CRANK CASE P/N: 55121	Replace	1.00	\$255.00	CM 255.00
	GASKET COVER P/N: 55100	Replace	1.00	\$30.00	nn 30.00
E	OIL BRAKE (KUTTEN KEULER) DOT 4 P/N: 39338	Replace	1.00	\$15.00	Nec 15.00
	RIVET P/N: 21027	Replace	2.00	\$2.50	rec 5.00
,	STEEL BALL UP ASSY P/N: 52815	Replace	1.00	\$18.00	ru 18.00
2	STEERING CONE UPPER P/N: 54480	Replace	1.00	\$8.00	ne 8.00
7	STRG DUST SEAL P/N: 57894	Replace	1.00	\$8.00	Ne 8.00
	TRAP COMP P/N: 55120	Replace	1.00	\$14.00	D71 14.00
,	VALVE RIM P/N: 27762	Replace	1.00	\$10.00	ne 10.00
	BATTERY BAND P/N: 56697	Replace	1.00	\$12.00	12.00





Quotation Nos.: 32668 - Rev. 1

(Page 2 of 2)

<u>S/N</u>	Description	Action	Qty	Unit Price	Amount
		SUB TOTAL			\$427.40
		GST @ 7 %			\$29.92
		GRAND TOTAL			\$457.32

Validity: 30 days

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.





S/N	Description	Action	Qty	Unit Price	
14	HEAD LIGHT SET	REPLACE	1.00		Amount
		.,_,_,_	1.00	Disc %: 10.00	1,069.20
15	LABOUR	Supply/Install	16.00	\$30.00	480.00
	P/N: 06766	English to the safe Later showing the	, 0,00	φοσσ	480.00
	- FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.				
16	LEVER LH	REPLACE	1.00	\$85.00	76.50
	P/N: 55102			Disc %: 10.00	
7	L-FR COVER GARNISH BK	REPLACE	1.00	\$9.00	8.10
	P/N: 55050			Disc %: 10.00	
8	LH.FR.CUSHION COMP BK-001C	REPLACE	1.00	\$432.00	388.80
				Disc %: 10.00	
19	MAINSTAND ASSY	REPLACE	1.00	\$145.00	130.50
2727	P/N: 55104			Disc %: 10.00	
20	METER PANEL BK-001U	REPLACE	1.00	\$32.00	28.80
	P/N: 55090			Disc %: 10.00	
21	MIRROR LH	REPLACE	1.00	\$147.00	132.30
	P/N: 55351			Disc %: 10.00	
22	PANEL LH-FLOOR ASSY	REPLACE	1.00	\$42.00	37.80
	P/N: 55055			Disc %: 10.00	
3	R SIDE COVER ASSY BK-231P	REPLACE	1.00	\$108.00	97.20
304				Disc %: 10.00	
4	RH.FR.CUSHION COMP BK-001C	REPLACE	1.00	\$432.00	388.80
_				Disc %: 10.00	
5	RIM SPORT FRONT	REPLACE	1.00	\$556.00	500.40
_	P/N: 55465			Disc %: 10.00	
16	SIDE STAND COMP	REPLACE	1.00	\$35.00	31.50
-	CDDAY DAINTING ON ALL COLUMN			Disc %: 10.00	
7	SPRAY PAINTING ON ALL COVERS	Spray	1.00	\$400.00	400.00
8	STEP LH PILLION	REPLACE	1.00	\$45.00	40.50
	P/N: 55118		9	Disc %: 10.00	
9	STICKER (ORANGEFORCE) BOX REAR NEW	REPLACE	1.00	\$45.00	45.00
	P/N: 54254				
0	STICKER (ORANGEFORCE) COVER SIDE NEW	REPLACE	2.00	\$70.00	140.00
	P/N: 54256				
1	STICKER NUMBER PLATE FRONT (BLACK)	REPLACE	1.00	\$10.00	10.00
	STRAIGHT				
	P/N: 32921				
2	STICKER(ORANGEFORCE) WINDSHIELD NEW	REPLACE	1.00	\$70.00	70.00
	P/N: 54253				
3	STRG.STEM COMP	REPLACE	1.00	\$170.00	153.00
	TRANSPORT SUAPORTS		Į	Disc %: 10.00	
1	TRANSPORT CHARGES		1.00	\$35.00	35.00
	P/N: 07169				





Quotation Nos. : 32457 - Rev. 1 (Page 3 of 3)

WIND SCREEN ASSY BK-001U REPLACE 1.00 \$229.0	
	00 206.10
Disc %: 1	10.00
BALL STEERING UPPER Replace 1.00 \$8.0	00 7.20
P/N: 54481 Disc %: 1	10.00
CAP COVER CRANKCASE Replace 1.00 \$8.0	00 7.20
P/N: 55076 Disc %: 1	10.00
CLIP HOSE (1 INCH) Replace 1.00 \$1.9	90 1.71
P/N: 29700 Disc %: 1	10.00
COOLANT RADIATOR (ANF 30) Replace 3.00 \$11.5	50 31.05
P/N: 45831 Disc %: 1	10.00
COVER L-CRANK CASE Replace 1.00 \$255.0	00 229.50
P/N: 55121 Disc %: 1	10.00
GASKET COVER Replace 1.00 \$30.0	00 27.00
P/N: 55100 Disc %: 1	10.00
OIL BRAKE (KUTTEN KEULER) DOT 4 Replace 1.00 \$15.0	00 13.50
P/N: 39338 Disc %: 1	10.00
RIVET Replace 2.00 \$2.5	50 4.50
P/N: 21027 Disc %: 1	10.00
STEEL BALL UP ASSY Replace 1.00 \$18.0	00 16.20
P/N: 52815 Disc %: 1	10.00
STEERING CONE UPPER Replace 1.00 \$8.0	7.20
P/N: 54480 Disc %: 1	10.00
STRG DUST SEAL Replace 1.00 \$8.0	7.20
P/N: 57894 Disc %: 1	10.00
TRAP COMP Replace 1.00 \$14.0	00 12.60
P/N: 55120 Disc %: 1	10.00
VALVE RIM Replace 1.00 \$10.0	9.00
P/N: 27762 Disc %: 1	10.00
BATTERY BAND Replace 1.00 \$12.0	00 10.80
P/N: 56697 Disc %: 1	10.00
SUB TOTAL	\$7,045.56
GST @ 7 %	\$493.19
GRAND TOTAL	\$7,538.75

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD



RAYMOND

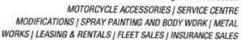
This quotation is sent via email / LAN-Fax and will bear a computer generated signature.





Acknowledge & Accepted By







QUOTATION

NO. : 32457

- Rev. 1

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

DATE

: 16/03/2018

CLAIM NO. : 11115

POLICY NO. :

FROM

: RAYMOND

VEHICLE NO.

MOTOR CLAIMS DEPT

Customer:

: FBL7432D

MAKE/MODEL

: SYM / MAXSYM 400I CVT

(Page 1 of 3)

S/N	Description	Action	Qty	Unit Price	Amount
1	ALIGNMENT BODY	REPLACE	1.00	\$350.00	350.00
	P/N: 29561				
2	BALANCER HANDLE	REPLACE	1.00	\$38.00	34.20
	P/N: 29008		[Disc %: 10.00	
3	BALL RACE SET	REPLACE	1.00	\$112.00	100.80
			[Disc %: 10.00	
4	BAR HANDLE	REPLACE	1.00	\$55.00	49.50
	P/N: 56670			Disc %: 10.00	
5	BOX FR-INNER	REPLACE	1.00	\$68.00	61.20
	P/N: 55078		ľ	Disc %: 10.00	
6	BOX REAR (GIVI) V56N MAXIA 4	REPLACE	1.00	\$875.00	787.50
	P/N: 54026			Disc %: 10.00	
7	COIN BOX LH.LID BK-001U	REPLACE	1.00	\$20.00	18.00
				Disc %: 10.00	
8	COVER L SIDE ASSY	REPLACE	1.00	\$108.00	97.20
	P/N: 57009			Disc %: 10.00	
9	COVER L-BODY ASSY	REPLACE	1.00	\$199.00	179.10
	P/N: 55058			Disc %: 10.00	
10	COVER OUTER ASSY .BK-001U	REPLACE	1.00	\$119.00	107.10
	P/N: 55354			Disc %: 10.00	
11	FR FENDER GY-517S	REPLACE	1.00	\$95.00	85.50
	P/N: 57032			Disc %: 10.00	
12	FRONT UNDER SPOLIER	REPLACE	1.00	\$262.00	235.80
	P/N: 55352			Disc %: 10.00	
13	GRIP LH-RR	REPLACE	1.00	\$95.00	85.50
	P/N: 55074			Disc %: 10.00	







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 Intern	nationale Des Experts En Auton	nobile			
FIRS	ST CAPITAL INSU	RANCE LTD	Ref : CS/FCI180052	Ref : CS/FCI18005277/Uqd3e2			
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date: 12-06-2018 Code: FCI2				
1.	Policy Particulars :- THIRD PARTY CLAIM						
	Insured Veh.	SHC 1446E	Veh. Inspected	FBL 7432D			
	Policy No.	D-18088936MFSH	Coverage (\$)	0.00			
	Claim No.	D18002168MFSH	Excess (\$)	0.00			
	Assign From	KAREN TAN	Assign Date	21/03/2018			
2.		Vehicle P	articulars & Condition				
	Make & Model	SYM MAXSYM	c.c	400			
	Engine No.	HIDDEN	Year of Reg.	2017			
	Chassis No.	RFGLXA902HS800092	Colour	ORANGE			
	Odometer	24182	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	SPORTS RIM			
	General	GOOD					
3.		Con	ditions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre	120/70-15	PIRELLI	6 mm			
	L/H Front Tyre			mm			
	R/H Rear Tyre	160/60-14	PIRELLI	6 mm			
	L/H Rear Tyre			mm			
4.		Descr	iption of Damages				
	THE VEHICLE SU	STAINED DAMAGES AT THE	O/S AND N/S BODY.				
	DAMAGES SEE D	ETAILS.					
5.		Gen	eral Information	EAIM FBL 7432D 0.00 0.00 21/03/2018 400 2017 ORANGE IN ORDER SPORTS RIM Balance 6 mm mm 6 mm mm 21/03/2018 BASIS. DRISED REPAIRS.			
	Accident Date	14/03/2018	Inspection Date	21/03/2018			
	Survey held at	BAN HOCK HIN CO.PTE LT	D				
		NO 6 DEFU LANE 4 SINGAPORE 539410					
5a.			Remarks				
	B)THE INSPECTION	NSISTENT TO ACCIDENT RE ON WAS CONDUCTED ON A' CE TO YOUR INSTRUCTION:	WITHOUT PREJUDICE" BAS	SIS. SED REPAIRS.			
5b.		Estim	ate Days of Repair				
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	5 Working Day	ys			



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 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBL 7432D

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BALANCER HANDLE N/S	MISSING	38.00	38.00
1	SET BALL RACE	DAMAGED	112.00	112.00
1	BAR HANDLE	BENT	55.00	55.00
1	BOX FR-INNER	CRACKED	68.00	68.00
1	BOX REAR (GIVI) V56N MAXIA 4	CUT	875.00	875.00
1	COIN BOX LH.LID BK-001U	DAMAGED	20.00	20.00
1	COVER L SIDE ASSY	CRACKED	108.00	108.00
1	COVER L-BODY ASSY	CRACKED	199.00	199.00
1	COVER OUTER ASSY BK-001U	CUT	119.00	119.00
1	FR FENDER GY-517S	CUT	95.00	95.00
1	FRONT UNDER SPOILER	CUT	262.00	262.00
1	GRIP LH-RR	TORN	95.00	95.00
1	SET HEAD LIGHT	CRACKED / CUT	1,188.00	1,188.00
1	INNER BIN STIFFENER	NOT NECESSARY	18.00	1.
1	L FRONT BRAKE DISK BK-001C	NOT NECESSARY	175.00	g-
1	LEVER LH	BROKEN	85.00	85.00
1	L-FR COVER GARNISH BK	сит	9.00	9.00
1	LH.FR.CUSHION COMP BK-001C ABSORBER	BENT	432.00	432.00
1	MAINSTAND ASSY	DEEP CUT	145.00	145.00
1	METER PANEL BK-001U	CUT	32.00	32.00
1	MIRROR LH	CUT	147.00	147.00
1	PANEL LH-FLOOR ASSY	сит	42.00	42.00
1	R FRONT BRAKE DISK BK-001C	NOT NECESSARY	175.00	-
1	R SIDE COVER ASSY BK-231P	CRACKED	108.00	108.00
1	RH.FR.CUSHION COMP BK-001C ABSORBER	BENT	432.00	432.00
1	RIM SPORT FRONT	WARPED / BENT	556.00	556.00
1	SIDE STAND COMP	CUT	35.00	35.00
1	STEP LH PILLION	CUT	45.00	45.00
1	BATTERY BAND (ADDITIONAL)	NECESSARY	12.00	12.00
1	STRG STEM COMP	BENT	170.00	170.00
1	WIND SCREEN ASSY BK-001U	сит	229.00	229.00

Report Ref No. CS/FCI18005277/Uqd3e2



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 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	BALL STEERING UPPER (ADDITIONAL)	NECESSARY	8.00	8.00
1	CAP COVER CRANKCASE (ADDITIONAL)	CRACKED	8.00	8.00
1	CLIP HOSE (1 INCH) (ADDITIONAL)	NECESSARY	1.90	1.90
3	COOLANT RADIATOR (ANF 30) @\$11.50 (ADDITIONAL)	NECESSARY	34.50	34.50
1	COVER L-CRANK CASE (ADDITIONAL)	CRACKED	255.00	255.00
1	GASKET COVER (ADDITIONAL)	NECESSARY	30.00	30.00
1	OIL BRAKE (KUTTEN KEULER) DOT 4 (ADDITIONAL)	NECESSARY	15.00	15.00
2	RIVET @\$2.50 (ADDITIONAL)	NECESSARY	5.00	5.00
1	STEEL BALL UP ASSY (ADDITIONAL)	NECESSARY	18.00	18.00
1	STEERING CONE UPPER (ADDITIONAL)	NECESSARY	8.00	8.00
1	STRG DUST SEAL (ADDITIONAL)	NECESSARY	8.00	8.00
1	TRAP COMP (ADDITIONAL)	DAMAGED	14.00	14.00
1	VALVE RIM (ADDITIONAL)	NECESSARY	10.00	10.00
	LESS 10% DISCOUNT		(1)	-612.8
			6,496.40	5,515.5
	SPECIAL NETT ITEMS			
1	STICKER (ORANGEFORCE) WINDSHIELD NEW (SN)	NECESSARY	70.00	70.00
1	STICKER (ORANGEFORCE) BOX REAR NEW (SN)	NECESSARY	45.00	45.00
2	STICKER (ORANGEFORCE) COVER SIDE NEW @\$70.00 (SN)	NECESSARY	140.00	140.00
1	STICKER NUMBER PLATE FRONT (BLACK) STRAIHT (SN)	NECESSARY	12.00	10.00
			267.00	265.00
	LABOUR			
	TRANSPORT CHARGES.		90.00	35.00
	ALIGNMENT BODY.		350.00	350.00
	LABOUR-FOR DISMANTLING AND ASSEMBLING OF PARTS.		560.00	480.00
	SPRAY PAINTING ON ALL COVERS.		450.00	400.00
			-	8
			19	P
			-	0
			1,450.00	1,265.00
	GRAND TOTAL		8,213.40	7,045.56

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RECOMMENDED COST OF REPAIRS 7,045.56

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CHUA KANG SENG Licensed Appraiser