

22/03/2002

ASS. RFC. BY:

REF:

CS/ICS18007345/Urbez

Special Instruction:

claim

Surveyor:

Marius

ASSIGNMENT (Office)

From (Person):

Muhimin

Abdul. Salam

of

ICS

Date/Time:

20042018 12pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FQ 5664R

Insured:

SJW 6104R

at Workshop m/s

Erofla motor

Tel:

6752 7740

of

Blk 1 Kaki Bukit Ave 6 #02-62

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

11-04-2018

CA / REV / REP. / REV 24 HRS WPI

H.O.D. Endorsement:

Date/Time:

20042018 1208pm

Person Contacted:

Liy

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

FQ 5664R - x

SJW 6104R - x

(08/11/13) wef

REF:

ASS. REC. BY: Marcus

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD (TP) / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: FQ 5664Rat Workshop m/s Euro

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: 500

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA FR Seen: e Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: 3/18/2018 Vehicle: IN / OUTDate / Time Action / Instruction 4/18/18

20/4/18 offer 700 mv 450 he will let me know maybe owner want new car

0/5/18 Summit TOTAL LOSS

MV: \$500, LTA: \$46.00, NV: \$454.00

RECEIVED 2018

Veh No: FQ 5664R Yr Regn: 9P

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Yamaha Rx7 c.c. 133Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 98090 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 2MC 240 252

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / STD A/Rim or

Tyre Size: F: 80/80-18R: 80/90-18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. _____ mm L/Bal. _____ mm

D.O.A. 11/4/18 D.O.I. 20/4/18

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

0/5, 1/5 2018

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐ : Prel. Report1) by post☒ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)Survey Fee: 380

Transportation: _____

S + RS, SI

Photos

Others

TOTAL

380

Report Format: _____

Lump Sum / I.B.I. (\$) _____

Catherine Chong (LKK Auto)

From: ECICS Claims <claims@ecics.com.sg>
Sent: Friday, 20 April, 2018 12:00 PM
To: erofia@singnet.com.sg; ECICS Claims
Cc: Catherine Chong (LKK Auto (admin-d@lkkauto.com); assignments@lkkauto.com
Subject: FW: pre-repair inspection request for accident involving SJW6104R and FQ5664R on 11 April 2018
Attachments: FQ5664R - DOC.pdf

Without Prejudice

Dear Sirs,

Thank you for your email.

We will appoint LKK for the survey.

Aside to LKK
Please assist to arrange for PRI.

Thank you.

Regards,
Abdul Salam
Claims Division
ECICS Ltd

WITH IMMEDIATE EFFECT FOR ALL PRE-REPAIR INSPECTION/SURVEY, please email to motorsurvey@ecics.com.sg

From: Erofia Motor - LeeLee Tan [mailto:erofia@singnet.com.sg]
Sent: Friday, 20 April, 2018 11:11 AM
To: ECICS Claims
Subject: pre-repair inspection request for accident involving SJW6104R and FQ5664R on 11 April 2018

Dear Sir/Madam

With reference to the above mentioned, attached necessary documents for your arrangement of pre-repair inspection of

Motorcycle No: FQ5664R

Workshop:
Erofia Motor Trading Pte Ltd
1 Kaki Bukit Avenue 6 #02-62
AutoBay @ kaki Bukit
Singapore 417883

Contact: 67527740

Thank you

Regards
Erofia Motor Trading Pte Ltd
Tel: 67527740
Fax: 67528669

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

This message may contain privileged and confidential information and is only intended for use by the addressee. No representation, warranty, guarantee or undertaking expressed or implied is made by ECICS Limited; as to the fairness, accuracy or completeness of any information, projections or opinions contained in this message. Any unauthorized disclosure, use or dissemination either in whole or in part is prohibited. If you are not the addressee indicated in his message (or responsible for delivery of the message to such person), you may not copy or deliver this message to anyone. In such case, you should destroy this message and kindly notify the sender by reply email. Opinions contained herein are the personal opinions of the sender and do not necessarily represent the views of ECICS Limited.

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	13/04/2018 14:17
Date Of Accident	11/04/2018 14:30
Exact Location Of Accident	ALONG PAN ISLAND EXPRESSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FQ5664R
Insured/Policyholder	
Name Of Registered Owner	SUHAIL AHAMED S/O MOHAMED ANEES
NRIC No	S9633699C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82334979
Alternative Phone No	OTHERS-82334979

Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ-133CC (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE

Are you claiming under your own insurance policy for repair to your vehicle? NO

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
Fleet Policy	NO
Policy Number	5091160374-01
Cover Note Number	

Driver

Name of Driver	SUHAIL AHAMED S/O MOHAMED ANEES
NRIC No	S9633699C
Date Of Birth	26/09/1996
Occupation	INDOOR
Date Of Driving Pass	06/01/2015
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82334979
Fax Number	
Contact Number	OTHERS-82334979
Email Address	NOEMAIL

Address	BLK 641 #10-48 ROWELL ROAD
Postcode	200641
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	ROCHOR NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO: 63918583
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT No.T/20180412/2078

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	SJW6104E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HAMSA BIN RAMLI
NRIC/Passport Number	S0122875G
Contact Number	96660435
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	SUHAIL AHAMED S/O MOHAMED ANEES
Approximate Age	21
Injuries Sustain	
Injured person in which vehicle?	FQ5664R
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 641 #10-48 ROWELL ROAD
Postcode	200641

Accident 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.


13 APR 2018



Policyholder's Signature
Date & Time:

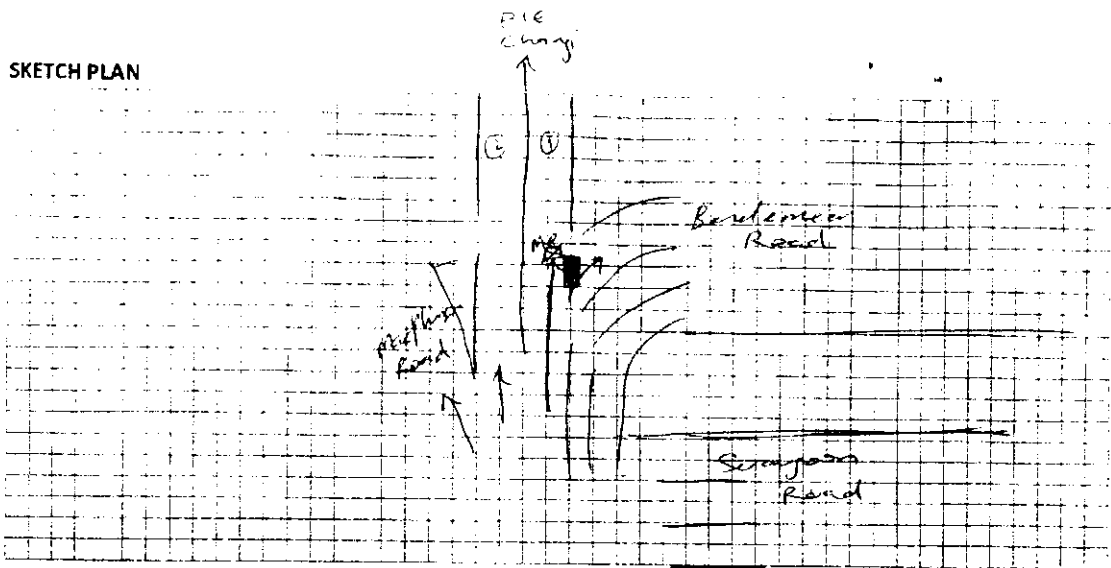


Driver's Signature
(If driver is not the policyholder)
Date & Time:

IDAC KAKI BUKIT(VAC)
23 KAKI BUKIT AVE 4
Singapore 411933
Reporting Centre Person(s) Signature
Name: 
Tel: 67416697
Fax: 67492305
NRIC/FIN No. _____
Email: vackb@singnet.com.sg

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police Report NO T/20180412/2078

DECLARATION

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

13 APR 2018

Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT(VAC)
23 KAKI BUKIT AVE 4
Singapore 415933
Tel: 67416607
Fax: 67492305
Reporting Centre Person's Signature
Name: Email: vackb@singnet.com.sg
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180412/2078

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapor Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20180412/2078

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/04/2018 13:36	Vide Report No.:	Station Diary No.: 85
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Informant's Particulars

Name of Informant: SUHAIL AHAMED S/O MOHAMED ANEES			Address: APT BLK 641 ROWELL ROAD #10-48 SINGAPORE 200641	
ID Type / ID No.: NRIC NO / S9633699C			Contact No.: Home/Office: Mobile: 82334979	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 21	Date of Birth: 26/09/1996	Type of Informant: Rider	
Race: Indian			Language:	Institution / School Name:
Occupation: NS MEN			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/04/2018 14:30	Type of Location: Straight Road
Location: Along Road 1 PAN-ISLAND EXPRESSWAY (JALAN TOA PAYOH) Before entry to PIE at lane 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FQ5664R	Motorcycle	YAMAHA	RXZ	Blue	Slightly Damaged	0
SJW6104E	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
FQ5664R	NTUC Income Insurance Co-Operative Limited	5091160374-01	09/04/2018	08/01/2019



**SINGAPORE
POLICE FORCE**



T/20180412/2078

2 of 3

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20180412/2078

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	SUHAIL AHAMED S/O MOHAMED ANEES	ID No.	S9633699C
Related Vehicle	FQ5664R (Motorcycle)	Contact No.	82334979
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	11/04/2018	Date Discharge	11/04/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	HAMSA BIN RAMLI	ID No.	S0122875G
Related Vehicle	SJW6104E (Car)	Contact No.	96660435
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 the above date, time and location, I was riding my motorcycle, FQ5664R, along lane 1 at Jalan Toa Payoh whereby a car, SJW6104E hit onto me on my right. I did not notice where the car came from. Ambulance came and I was conveyed to Tan Tock Seng Hospital on the same day and discharged at 2000hrs on the same day. I was given 5 days of MC.

I wish to state that there is a witness when the accident happened however I do not have his NRIC number.

Details as follows:

Name: Asradiq

Contact number: 81989672

Motorcycle car plate number: FBJ3488E


I am making this report for insurance claim.

REPUBLIC OF SINGAPORE DRIVING LICENCE

AHAMED

Date: 26 Sep 1996
Date: 06 Jun 2015

002435858G



MINISTRY OF HOME AFFAIRS

**HOME TEAM
NATIONAL SERVICE IDENTITY CARD**

SUHAN AHAMED S/O MOHAMED ANEES

S9633699C

SINGAPORE POLICE FORCE

THIS IS NOT A WARRANT CARD

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES


Class 2B	Motorcycles =< 200 CC	06 Jun 2015
Class 2A	Motorcycles between 201 CC and 400 CC	21 Jul 2016
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	05 Apr 2018

S / No. 9000306222

S9633699C

NP 428A


Licence No: S9633699C



Unauthorized possession, use, retention, alteration, destruction or transfer of this card is strictly prohibited. This card must be returned to the nearest SPF SCDF station if found.

Date of Birth	Race	Date of Enlistment
26/09/1996	INDIAN	11/10/2016

Address
BLK 641 ROWELL ROAD
#10-48 SINGAPORE 200641



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5091160374-01

- | | |
|---|-----------------------------------|
| 1. Index mark and Registration Number of Vehicle | Cover : Third Party |
| Chassis Number | : FQ5664R |
| 2. Name of Policyholder | : ZMC240252 |
| 3. Effective Date of Insurance | : SUHAIL AHAMED S/O MOHAMED ANEES |
| 4. Expiry Date of Insurance | : 09 Apr 2018 |
| 5. Persons or Classes of Persons entitled to drive# | : 08 Jan 2019 |
| (a) Named Driver(s) Only. | |

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: SUHAIL AHAMED S/O MOHAMED ANEES
NAMED DRIVER (2)	: MUHAMMAD SHAFEE S/O MOHAMED ANEES
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : TAY YEE TENG (00000602444)
Date of Issue : 09 Apr 2018 15:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:Singapore NRIC

Owner ID:3699C

Vehicle Details

Vehicle No.:FQ5664R

Vehicle to be Exported:No

Intended De-registration Date:20 Apr 2018

Vehicle Make:YAMAHA

Vehicle Model:RXZ

Primary Colour:Blue

Manufacturing Year:1998

Engine No.:3BS240252

Chassis No.:ZMC240252

Maximum Power Output:-

Open Market Value:\$3,525.00

Original Registration Date:28 Oct 1998

First Registration Date:28 Oct 1998

Transfer Count:10

Actual ARF Paid:\$529.00

Intended PARF Rebate Details

PARF Eligibility:No

PARF Eligibility Expiry Date:-

PARF Rebate Amount:\$0.00

Intended COE Rebate Details

COE Expiry Date:31 Aug 2018

COE Category:D - Motorcycle

COE Period(Years):10

PQP Paid:\$1,271.00

COE Rebate Amount:\$46.00

Total Rebate Amount:\$46.00

Message

Please note that the National Environment Agency (NEA) is offering an incentive of up to \$3,500 for owners of older, more pollutive motorcycles which were registered before 1 July 2003, to de-register their motorcycles on or before 5 April 2023.

The last registered owner of this motorcycle will receive \$2,000 if it is de-registered on or before 5 April 2023. If this motorcycle's COE is not renewed on or after 7 April 2018, the last registered owner will receive an additional \$1,500 upon its de-registration on or before 5 April 2023.

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




































CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 May 2018 16:03 Edit Reg		20 Apr 2018 00:00 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case








Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS		[Created by adjuster]							
Insured:	SUHAIL AHAMED S/O MOHAMED ANEES , ID: S9633699C, Email: NOEMAIL@GMAIL.COM								
Main Claimant:	-								
Vehicle Reg. No.:	FQ5664R	Date of Loss:	11/04/2018 14:00 - :59 [233 Months and 14 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP	Policy/Cover Note No.:							
Vehicle Reg. No. (Insured):	SJW6104R	Policy No. (Claimant):							
		Excess:							
Repairer:	Erofla Motor Trading Pte Ltd - (kaki Bukit) (HQ) 1 Kaki Bukit Avenue 6, #02-62 AutoBay @ Kaki Bukit, 417883 Kaki Bukit - Tel: 67527740 / 90696165								
Handling Insurer:	ECICS Limited (HQ) - Tel: 63374779 / 6303 0178								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 02/05/2018]								
ASSOCIATED MAIL RECEIVED		View All Compose Case Mail							
There are no mail for this case.									
ALL ASSOCIATED TASKS <input type="checkbox"/>		View All Search Tasks Create New Task Complete							
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*FQ5664R
[SJW6104R]
TP
-

Apr 11 2018 2:00PM
[SUHAIL AHAMED S/O MOHAMED ANEES]
Erofia Motor Trading Pte Ltd - (kaki Bukit)

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print					
1	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
2	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
3	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
4	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
5	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
6	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
7	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
8	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
9	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
10	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
11	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
12	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
13	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
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17	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
18	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
19	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
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31	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
32	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
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35	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
36	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					
37	21/04/18 11:34	General View		Load JPG	<input checked="" type="checkbox"/>					

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	21/04/18 11:34	General View	 Load JPG	<input checked="" type="checkbox"/>
39	21/04/18 11:34	General View	 Load JPG	<input checked="" type="checkbox"/>
40	21/04/18 11:34	General View	 Load JPG	<input checked="" type="checkbox"/>
41	21/04/18 11:34	General View	 Load JPG	<input checked="" type="checkbox"/>
42	21/04/18 11:34	General View	 Load JPG	<input checked="" type="checkbox"/>
43	21/04/18 11:35	General View	 Load JPG	<input checked="" type="checkbox"/>
44	21/04/18 11:35	General View	 Load JPG	<input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/ICS18007345/URBE2

Date: 14/05/2018

REFERENCE

Handling Insurer: ECICS Limited

Policy No:

Claimant Vehicle
No : FQ5664R

Insured Vehicle No : SJW6104R

Date of Loss: 11/04/2018

Nature of Claim:

TP

Claim No: DMPC1800139H

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: FQ5664R

Make & Model: YAMAHA RXZ, 133cc (M)

Engine No: 3BS240252

Reg. Date: 28/10/1998 (Man. Year: 1998)

Chassis No: ZMC240252

Colour: Blue

Odometer: 98090 km

Engine Capacity: 133 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable): Yes Engine Modification:

No

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 80/80-18

Rear Tyre Size:

80/90-18

Front Left Side: Dunlop 5 mm

Rear Left Side:

Dunlop 5 mm

Front Right Side: 0 mm

Rear Right Side:

0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 20/04/2018

Date Inspected: 20/04/2018 Inspected At:

Erofia Motor Trading Pte Ltd - (kaki Bukit)
(HQ)1 Kaki Bukit Avenue 6, #02-62 AutoBay @
Kaki Bukit

Singapore 417883

Estimated Period of Repair: 0.0 days

Adjuster: MARCUS CHUA

Manager: Janice Lee Si Hua

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

TOTAL LOSS ASPECT

Market Value : \$500.00
OMV : \$3,525.00
PARF Rebate (1) : \$0.00
Quota Premium Paid : \$1,271.00
COE Rebate (2) : \$46.00
Total Rebate (1) + (2) = : \$46.00

The total amount incurred will be Market Value \$500.00 minus Total Rebate \$46.00 = \$454.00 before excess.

In view of the above, the vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 10 May 2018)
Parts: N/A YAMAHA RXZ 133cc (M) (Model not available in database)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for FQ5664R)
Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >