

ASS. REC. BY:

REF:

CS / AM18007884 / Rltbest

Special Instruction:

Surveyor:

Rasul

ASSIGNMENT (Office)

From (Person):

Rachel Tan

of

GAL

Date/Time:

30/04/2018 9:46am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FU 800B

Insured:

at Workshop m/s

De Xing Motor

Tel:

6746 8582.

of

Blk 3006 Ubi Rd (#0-356

Policy No:

Claim No:

CLM0MVM000000252

Sum Insured:

Excess:

500/-

Make of Veh:

D.O.A.

25/04/2018

(Client's Record)

CA / KEY / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

30/04/2018 11:17am

Person Contacted:

Wai Wai

Vehicle

IN/OUT

Date/Time

Action/Instruction (✓) Estimate

estimate not yet done. will arrange survey

FU 800B - x

10/5-

Revert via email.

10/5 @ 2:

34pm inform by Sharon authorise repair excess 500/-

10/5

inform authorise repair, wai wai excess \$500/-

24mm

REF:

GAI

54244

ASSIGNMENT

From: _____ Date: 9/5

Estimated Cost: _____

OD / TP / NS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: FU 800B

at Workshop m/s De Xing

of Blk 3006 Ubi Rd 1 #01-356

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.

Bal. or Market Value: 26k

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ 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: _____ Vehicle: IN / OUT

Veh No: Fu 800B Yr Regn: 2017 SGP

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

Make: YAMAHA TMAX 530 (OX) c.c. 530

Colour: MULTI A/C: Insured / Std / NI / NA

Sp. Reading: 3931 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JYAS3145000010091

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Order / Jammed / Leaked / Burnt or

Brake: Order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 120/70R15
R: 160/60R15

BS / PUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

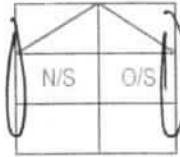
Front	Rear
R/Bal. 3 mm	R/Bal. 4 mm
L/Bal. mm	L/Bal. mm

D.O.A. 25/04/18 D.O.I. 09/05/18

Survey held at DE XING

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

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



Date / Time	Action / Instruction
-------------	----------------------

Part by part 3687.20, 4 days
 Cred: 1109.80, 23%

RECEIVED 20 FEB 2019

Date/Time File Pass to? : Preli. Report
 : Final Report

1) 20/2 Typist

Date/Time File Return to? _____

Days Of Repair: 4
 Resurvey No. of Trip: 1

Survey Fee:	250
Transportation:	
Other:	
TOTAL	250

Add Fee: Site Insp (\$)
 Interview (\$)
 Tech. Invs (\$)
 Weekend (\$)

Report Format: OD

Lump Sum / I.S. (\$) 3687.20

Catherine Chong (LKK Auto)

From: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Sent: Monday, 30 April, 2018 9:46 AM
To: WAIWAI DEXING
Cc: LKK Assignments
Subject: RE: FU800B OD claims DOA 25/04/18
Attachments: FU800B_25042018.pdf

Resend, copying in LKK

From: Tan, Rachel
Sent: Monday, April 30, 2018 9:22 AM
To: 'WAIWAI DEXING' <waiwaidx@gmail.com>
Cc: Andy Tan Tena <andytan@tenarisk.com>
Subject: RE: [External] FU800B OD claims DOA 25/04/18

Hi Wai Wai

Noted on your request for OD survey. We will arrange for LKK to conduct survey.

Please provide estimates to surveyor, and send me a clearer picture of driver's license.

Hi LKK

Please accept assignment for OD survey. Attached GIA report for reference.

Regards

Rachel Tan

Executive, Motor Claims, Great American Insurance Company

Tel: 6804 7846

From: WAIWAI DEXING <waiwaidx@gmail.com>
Sent: Friday, April 27, 2018 6:26 PM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Cc: Ng, Sharon <Sharon.Ng@sg.gaig.com>; Andy Tan Tena <andytan@tenarisk.com>
Subject: [External] FU800B OD claims DOA 25/04/18

Dear Sir,

Refer to the above matter.

Insured involved in the accident on 25/04/18 and wanted to do OD claim.

We will inform you once the estimated repair bill is done.

Thank you.

Best regards,

Wai Wai

De Xing Motor

The content of this e-mail message and any attachments are confidential and may be legally privileged, intended solely for the addressee. If you are not the intended recipient, be advised that any use, dissemination, distribution, or copying of this e-mail is strictly prohibited. If you receive this message in error, please notify the sender immediately by reply email and destroy the message and its attachments.

Denise Tay (LKKAuto)

From: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Sent: Thursday, 10 May 2018 2:34 PM
To: Denise Tay (LKKAuto)
Cc: SUR
Subject: RE: FU800B OD claims DOA 25/04/18 || GAIC ref: CLMOMVM000000252

Dear Denise

Please proceed to authorize repair at \$3,338.00 and check items \$420.00.

OD excess of \$500.00 is applicable.

Regards
Sharon Ng
Great American

From: Denise Tay (LKKAuto) <denisetay@lkkauto.com>
Sent: Thursday, May 10, 2018 2:08 PM
To: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Cc: SUR <sur@lkkauto.com>
Subject: [External] RE: FU800B OD claims DOA 25/04/18 || GAIC ref: CLMOMVM000000252

Dear Sharon,

Sorry miss out

Best Regards,
Denise Tay | Case Handler
LKK Auto Consultants Pte Ltd
Phone: 6256-3561 | email: denisetay@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ng, Sharon [<mailto:Sharon.Ng@sg.gaig.com>]
Sent: Thursday, 10 May 2018 2:06 PM
To: Denise Tay (LKKAuto) <denisetay@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: FU800B OD claims DOA 25/04/18 || GAIC ref: CLMOMVM000000252

Dear Denise – No attachment.

From: Denise Tay (LKKAuto) <denisetay@lkkauto.com>
Sent: Thursday, May 10, 2018 2:01 PM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Cc: Ng, Sharon <Sharon.Ng@sg.gaig.com>; Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>; General Claims <GeneralClaims@sg.gaig.com>; SUR <sur@lkkauto.com>
Subject: [External] RE: FU800B OD claims DOA 25/04/18

Denise Tay (LKKAuto)

From: Denise Tay (LKKAuto)
Sent: Thursday, 10 May 2018 12:30 PM
To: Admin-D (LKKAuto); 'Tan, Rachel'; SUR
Cc: assignments
Subject: RE: FU800B OD claims DOA 25/04/18
Attachments: PRELI ADVISED FU 800B.pdf; photo.pdf; surveypor marking_0001.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **FU 800B**

We have not authorise

Repair on part by part.

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto)
Sent: Monday, 30 April 2018 11:19 AM
To: 'Tan, Rachel' <Rachel.Tan@sg.gaig.com>; SUR <sur@lkkauto.com>
Cc: assignments <assignments@lkkauto.com>
Subject: RE: FU800B OD claims DOA 25/04/18

Dear Rachel,

Thank you for the assignment.

Please be informed that repairer will arrange survey when estimate done.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Tan, Rachel [<mailto:Rachel.Tan@sg.gaig.com>]
Sent: Monday, 30 April, 2018 9:46 AM
To: WAIWAI DEXING <waiwaidx@gmail.com>
Cc: LKK Assignments <assignments@lkkauto.com>
Subject: RE: FU800B OD claims DOA 25/04/18

Resend, copying in LKK

Denise Tay (LKKAuto)

From: WAIWAI DEXING <waiwaidx@gmail.com>
Sent: Wednesday, 20 February 2019 10:22 AM
To: Denise Tay (LKKAuto)
Cc: Mrs Loo; lim gh
Subject: Re: FU800B Driver's Driving License

Dear Denise,
We confirm to accept your finalization.

Thanks & best regards,
Wai Wai
De Xing Motor

On Wed, Jan 2, 2019 at 11:45 AM Denise Tay (LKKAuto) <denisetay@lkkauto.com> wrote:

Dear Wai Wai,

Part by part \$3687.20 with 4days, before GST and Excess

Please check and get back

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Denise Tay (LKKAuto)
Sent: Friday, 30 November 2018 11:47 AM



Auto
Consultants
Pte Ltd

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

Your Ref: TBA

Date: 10/5/2018

Our Ref: CS/GAI18007884/R1tb

The Motor Claims Department
GREAT AMERICAN INSURANCE COMPANY

Dear Sirs/Mdm

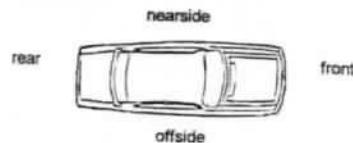
PRELIMINARY ADVICE OF VEHICLE NO. FU 800B

Please be informed that we had conducted the inspection of the above mentioned vehicle on 10/5/2018 at the premises of M/s De Xing and have the following to report:

Workshop Estimate Amount	: <u>S\$ 4,287.00</u>
Revised Estimate Amount	: <u>S\$ 3,338.00</u>
Check" Items Amount	: <u>S\$ 420.00</u>
Market Value	: <u>S\$ 26,000.00</u>
LTA Reimbursement Value	: <u>S\$ 5,316.00</u>
Nett Value	: <u>S\$ 20,684.00</u>

Description of Damage:

The vehicle sustained at the front portion.



Comments/ Present Status:

Damage consistent
Repair cost Economical

We have not authorize repair

Yours faithfully
Rasul
Motor Surveyor

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5424G
Vehicle Details	
Vehicle No.:	FU800B
Vehicle to be Exported:	No
Intended De-registration Date:	10 May 2018
Vehicle Make:	YAMAHA
Vehicle Model:	TMAX530(DX)
Primary Colour:	Black
Manufacturing Year:	2017
Engine No.:	J415E019245
Chassis No.:	JYASJ145000010091
Maximum Power Output:	-
Open Market Value:	\$9,687.00
Original Registration Date:	08 Sep 2017
First Registration Date:	08 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$3,094.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	07 Sep 2027
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$5,701.00
COE Rebate Amount:	\$5,316.00
Total Rebate Amount:	\$5,316.00

The information contained herein is correct as at 10 May 2018

OK

26000
 5316

 20,684
 /

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	27/04/2018 17:33
Date Of Accident	25/04/2018 17:15
Exact Location Of Accident	ALONG PIONEER ROAD TOWARDS PIONEER CIRCLE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FU800B
Insured/Policyholder	
Name Of Registered Owner	TOH WAN KOON
NRIC No	S7805424G
Email Address	TOHWANK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98000900
Alternative Phone No	OFFICE-98000900

Vehicle Particulars

Manufacturer	YAMAHA
Model	TMAX530 (DX)
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?	YES
If No, Please state action to be taken	
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVM000001833-00-000
Cover Note Number	

Driver

Name of Driver	TOH WAN KOON
NRIC No	S7805424G
Date Of Birth	23/02/1978
Occupation	INDOOR
Date Of Driving Pass	10/11/2003
Driving Experience	14 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98000900
Fax Number	
Contact Number	OFFICE-98000900
EMail Address	TOHWANK@GMAIL.COM

Address * BLK 115 JURONG EAST ST 13
 #02-374
 Postcode 600115
 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 COLLISION - HEAD ON COLLISION
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles involved in the accident
 Was any body injured in the Accident? YES
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

AS PER SKETCH

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

DETAILS OF INJURED PERSON 1

Name TOH WAN KOON

Approximate Age	40
Injuries Sustain	PARTS OF LIMBS
Injured person in which vehicle?	FU800B
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 115 JURONG EAST ST 13 #02-374
Postcode	600115

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature

Date & Time: 27/04/18

1630hrs

Driver's Signature

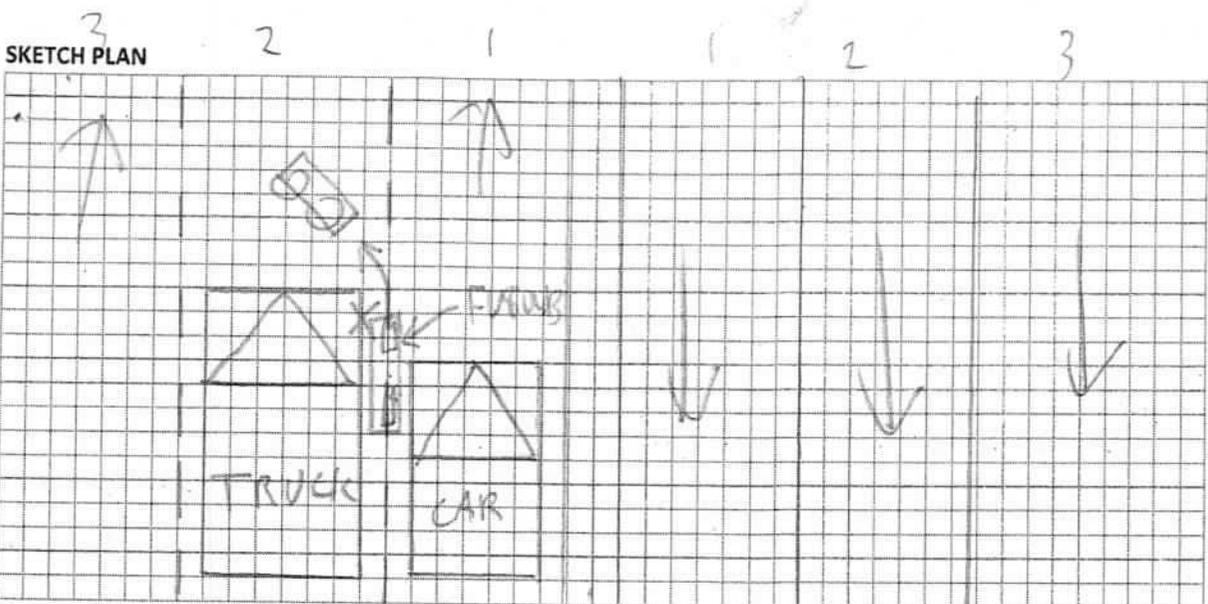
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 25/04/18 at 1715hrs, I was travelling on Pioneer Road towards Pioneer Circle. 20M to the circle I accidentally hit a truck front bumper on lane 2. I fell and skidded in front of the truck.

weather - clear

road surface - dry

tohwanke@gmail.com.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 27/04/18
 1630hrs

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

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



GREAT AMERICAN INSURANCE COMPANY R1034

UEN: T15FC0029B GST REG. NO.: M90370081T
3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER
SINGAPORE 039190
TEL: +65 6804 6000
FAX: +65 6235 2616

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)

Policy Details

Certificate Number	: MOMVM000001833-00-000	Cover	: Motor Cycle (Comprehensive)
Policyholder Name	: Toh Wan Koon	Chassis Number	: JYASJ145000010091
NCD Entitlement	: 20% No Claim Discount	Engine Number	: J415E019245
Hire Purchase	: DE XING MOTOR PTE. LTD.	Registration Number	: FU800B
Period of Insurance	: From 08/09/2017 (00:00) To 07/09/2018 (23:59) (Both Dates Inclusive)		

Persons or Classes of Persons entitled to Drive

- a) The Primary Rider
- b) Any Named Rider as stated in the policy

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor or so has been Vehicle 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

Limitations as to Use

Use only for social, domestic and pleasure purposes and for Policyholder's business

This Policy does not cover:

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

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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)	: SGD 500.00 - including Fire & Theft outside Singapore
Excess (Section 2)	: N/A

Driver Details

Primary Rider	: Toh Wan Koon
Named Rider 1	: Wong Wee Ang (Huang Weian)
Named Rider 2	: N/A
Name of Intermediary	: Tena Risk Solutions Pte Ltd
Date of Issue	: 14/11/2017

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

Signed for and on behalf of

Great American Insurance Company

Authorised Signatory

m1ow



德興摩哆私人有限公司 DE XING MOTOR PTE. LTD.

Blk 3006 Ubi Road 1 #01-356 Singapore 408700
Tel : (65) 67468582 (4 Lines) Fax : (65) 67439525
Email : dxmotor@singnet.com.sg
Website : www.dxmotor.com
Co. Reg. No.: 198303312R



CERT Reg No.: 2005-2-1439
ISO 9001: 2008

() Third-Party (X) Own Damage () List Price - 10% () Cost Price

Bike No : FU800B

Date of Acc : 25/04/2018

Make/ Model : YAMAHA TMAX530 (DX)

Chassis No : JYASJ145000010091

Year : 2017

Requested by : TIONG

S/ NO	Parts Description	Quantity	Unit Price	Total	Remarks
1	FRONT FENDER	1	\$24.00	\$24.00	X nn
2	COVER FRONT	1	\$150.00	\$150.00	cut /
3	BODY COWLING 1	1	\$240.00	\$240.00	scr /
4	BODY COWLING 2	1	\$290.00	\$290.00	scr /
5	PANEL INNER	1	\$70.00	\$70.00	? cut /
6	LH/ MIRROR	1	\$120.00	\$120.00	mis /
7	MIRROR DAMPER	1	\$6.00	\$6.00	rel /
8	RH/ MIRROR	1	\$120.00	\$120.00	scr /
9	DAMPER	2	\$6.00	\$12.00	rel /
10	R/H LEVER	1	\$70.00	\$70.00	scr /
11	L/H LEVER	1	\$70.00	\$70.00	scr /
12	LH/ FRONT FLASHER	1	\$130.00	\$130.00	? cut /
13	RH/ FRONT FLASHER	1	\$130.00	\$130.00	? cut /
14	EMBLEM	1	\$30.00	\$30.00	rel /
15	FENDER INNER	1	\$70.00	\$70.00	scr /
16	PANEL INNER 1	1	\$130.00	\$130.00	scr /
17	PANEL INNER 2	1	\$130.00	\$130.00	scr /
18	EXHAUST PROTECTOR 2	1	\$160.00	\$160.00	scr /
19	EXHAUST PROTECTOR 1	1	\$90.00	\$90.00	scr /
20	L/H CORNER SIDE	1	\$140.00	\$140.00	scr /
21	R/H CORNER SIDE	1	\$140.00	\$140.00	scr /
22	EMBLEM	1	\$80.00	\$80.00	rel /
23	EMBLEM	1	\$80.00	\$80.00	rel /
24	BOARD FOOTREST	1	\$130.00	\$130.00	scr /
25	HANDLEBAR	1	\$90.00	\$90.00	? PA /
26	HANDLEBAR BALANCER	1	\$120.00	\$120.00	scr /
27	KAPPA BOX	1	\$450.00	\$450.00	scr /
28	FORK ALIGNMENT	1	\$180.00	\$180.00	80
29	STEERING CONE	1	\$185.00	\$185.00	80
30	LABOUR	1	\$650.00	\$650.00	3 300
31					

2798
102
2518.20

? price? 200
350 } 510

Rasul
Hp 90010068
4 days
P/P
Revert
09/05/18 @ 1500
Resurvey by part

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:



德興摩哆私人有限公司 DE XING MOTOR PTE. LTD.

Blk 3006 Ubi Road 1 #01-356 Singapore 408700
 Tel : (65) 67468582 (4 Lines) Fax : (65) 67439525
 Email : dxmotor@singnet.com.sg
 Website : www.dxmotor.com
 Co. Reg. No.: 198303312R



32					
33					
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35					
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38					
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40					

Sub Total	\$4,287.00
ADD7%GST	\$300.09
Grand Total	<u>\$4,587.09</u>

4797

PLEASE NOTE THAT THE ABOVE IS ONLY AN ESTIMATE. THEREFORE, SHOULD THERE BE ANY ADDITIONAL PARTS REQUIRED OR DAMAGED DURING OUR COURSE OF REPAIRS, WE WILL INFORM YOU ACCORDINGLY FOR NECESSARY ACTION. PRICES OF PARTS QUOTED ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE.

APPROVING OFFICER'S SIGNATURE & COMPANY'S STAMP _____



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CERT Reg No.: 2005-2-1439
ISO 9001: 2008

() Third-Party (X) Own Damage () List Price - 10% () Cost Price

Bike No : FU800B

Date of Acc : 25/04/2018

Make/ Model : YAMAHA TMAX530 (DX)

Chassis No : JYASJ145000010091

Year : 2017

Requested by : TIONG

S/ NO	Parts Description	Quantity	Unit Price	Total	Remarks
1	EMBLEM 3D <i>MSC</i>	1	\$64.00	\$64.00	
2	MOLE, SIDE COVER 1 (14)	1	\$88.00	\$88.00	} 510 } 1070 } 459
3	MOLE, SIDE COVER 2 (15)	1	\$88.00	\$88.00	
4	COVER SIDE 3 (12)	1	\$128.00	\$128.00	
5	COVER SIDE 4 (13)	1	\$128.00	\$128.00	
6	PLATE, WINDWIELD <i>MSC</i>	1	\$14.00	\$14.00	

(SUPPLEMENTARY BILL)

Eric Ong
29/6/18

Sub Total
ADD7%GST
Grand Total

\$510.00
\$35.70
\$545.70

P - 2518.20
Suppl - 459.00
S/N - 2000
L - 510
3687.20

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CERT Reg No.: 2005-3-1439
ISO 9001: 2008

() Third-Party (X) Own Damage () List Price - 10% () Cost Price

Bike No : FU800B Date of Acc : 25/04/2018
Make/ Model : YAMAHA TMAX530 (DX) Chassis No : JYASJ145000010091
Year : 2017 Requested by : TIONG

S/ NO	Parts Description	Quantity	Unit Price	Total	Remarks
1	FRONT FENDER	1	\$24.00	\$24.00	X
2	COVER FRONT	1	\$150.00	\$150.00	cut /
3	BODY COWLING 1	1	\$240.00	\$240.00	scr /
4	BODY COWLING 2	1	\$290.00	\$290.00	scr /
5	PANEL INNER	1	\$70.00	\$70.00	3 / cut
6	LH/ MIRROR	1	\$120.00	\$120.00	mis /
7	MIRROR DAMPER	1	\$6.00	\$6.00	neu /
8	RH/ MIRROR	1	\$120.00	\$120.00	scr /
9	DAMPER	2	\$6.00	\$12.00	neu /
10	R/H LEVER	1	\$70.00	\$70.00	scr /
11	L/H LEVER	1	\$70.00	\$70.00	scr /
12	LH/ FRONT FLASHER	1	\$130.00	\$130.00	3 / cut
13	RH/ FRONT FLASHER	1	\$130.00	\$130.00	3 / cut
14	EMBLEM	1	\$30.00	\$30.00	neu /
15	FENDER INNER	1	\$70.00	\$70.00	scr /
16	PANEL INNER 1	1	\$130.00	\$130.00	scr /
17	PANEL INNER 2	1	\$130.00	\$130.00	scr /
18	EXHAUST PROTECTOR 2	1	\$160.00	\$160.00	scr /
19	EXHAUST PROTECTOR 1	1	\$90.00	\$90.00	scr /
20	L/H CORNER SIDE	1	\$140.00	\$140.00	scr /
21	R/H CORNER SIDE	1	\$140.00	\$140.00	scr /
22	EMBLEM	1	\$80.00	\$80.00	neu /
23	EMBLEM	1	\$80.00	\$80.00	neu /
24	BOARD FOOTREST	1	\$130.00	\$130.00	scr /
25	HANDLEBAR	1	\$90.00	\$90.00	3 / B
26	HANDLEBAR BALANCER	1	\$120.00	\$120.00	scr /
27	KAPPA BOX	1	\$450.00	\$450.00	scr / ? price?
28	FORK ALIGNMENT	1	\$180.00	\$180.00	80
29	STEERING CONE	1	\$185.00	\$185.00	80
30	LABOUR	1	\$650.00	\$650.00	3 300 350
31					

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- Parts prices are subject to confirmation
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- 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:

Rasul
Hp 90010068
4 days
P/P
Revert
09/05/18 @ 1500
Resurvey b4 part



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Sub Total	\$4,287.00
ADD7%GST	\$300.09
Grand Total	<u>\$4,587.09</u>

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APPROVING OFFICER'S SIGNATURE & COMPANY'S STAMP _____



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile			
GREAT AMERICAN INSURANCE COMPANY		Ref : CS/GAI18007884/R1tbe2	
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190		Date : 20-02-2019	
		Code : GAI	
1. Policy Particulars :- OWN DAMAGE			
Insured Veh.		Veh. Inspected	FU 800B
Policy No.	MOMVM000001833-00-000	Coverage (\$)	0.00
Claim No.	CLMOMVM0000000252	Excess (\$)	500.00
Assign From	RACHEL TAN	Assign Date	30/04/2018
2. Vehicle Particulars & Condition			
Make & Model	YAMAHA TMAX530(DX)	c.c	530
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JYASJ145000010091	Colour	MULTI COLOUR
Odometer	3931	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	120/70 R15	DUNLOP	3 mm
L/H Front Tyre			mm
R/H Rear Tyre	160/60 R15	DUNLOP	4 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S AND N/S BODY. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	25/04/2018	Inspection Date	09/05/2018
Survey held at	DE XING MOTOR PTE LTD BLK 3006 UBI ROAD 1 #01-356 SINGAPORE 408700		
5a. Remarks			
A)THE MARKET VALUE IS S\$26,000.00(EST. AVERAGE) B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days	



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FU 800B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT FENDER	NOT NECESSARY	24.00	-
1	COVER FRONT	CUT	150.00	150.00
1	BODY COWLING 1	SCRATCHED	240.00	240.00
1	BODY COWLING 2	SCRATCHED	290.00	290.00
1	PANEL INNER	CUT	70.00	70.00
1	LH / MIRROR	MISSING	120.00	120.00
1	MIRROR DAMPER	NECESSARY	6.00	6.00
1	RH / MIRROR	SCRATCHED	120.00	120.00
2	DAMPER @\$6.00	NECESSARY	12.00	12.00
1	R/H LEVER	SCRATCHED	70.00	70.00
1	L/H LEVER	SCRATCHED	70.00	70.00
1	LH/ FRONT FLASHER	CUT	130.00	130.00
1	RH/ FRONT FLASHER	CUT	130.00	130.00
1	EMBLEM	NECESSARY	30.00	30.00
1	FENDER INNER	SCRATCHED	70.00	70.00
1	PANEL INNER 1	SCRATCHED	130.00	130.00
1	PANEL INNER 2	SCRATCHED	130.00	130.00
1	EXHAUST PROTECTOR 2	SCRATCHED	160.00	160.00
1	EXHAUST PROTECTOR 1	SCRATCHED	90.00	90.00
1	L/H CORNER SIDE	CRACKED	140.00	140.00
1	R/H CORNER SIDE	SCRATCHED	140.00	140.00
1	EMBLEM	NECESSARY	80.00	80.00
1	EMBLEM	NECESSARY	80.00	80.00
1	BOARD FOOTREST	SCRATCHED	130.00	130.00
1	HANDLEBAR	BENT	90.00	90.00
1	HANDLEBAR BALANCER	SCRATCHED	120.00	120.00
1	EMBLEM 3D (ADDITIONAL)	NECESSARY	64.00	64.00
1	MOLE, SIDE COVER 1 (14) (ADDITIONAL)	CUT	88.00	88.00
1	MOLE, SIDE COVER 2 (15) (ADDITIONAL)	CUT	88.00	88.00
1	COVER SIDE 3 (12) (ADDITIONAL)	CUT	128.00	128.00
1	COVER SIDE 4 (13) (ADDITIONAL)	CUT	128.00	128.00

Report Ref No. CS/GAI18007884/R1tbe2



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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	PLATE, WINDWHEILD (ADDITIONAL)	NECESSARY	14.00	14.00
	LESS 10% DISCOUNT		-	-330.80
			3,332.00	2,977.20
	<u>SPECIAL NETT ITEMS</u>			
1	KAPPA BOX (SN)	SCRATCHED	450.00	200.00
			450.00	200.00
	<u>LABOUR</u>			
	FORK ALIGNMENT.		180.00	80.00
	STEERING CONE.		185.00	80.00
	LABOUR.		650.00	350.00
			1,015.00	510.00
	GRAND TOTAL		4,797.00	3,687.20
	RECOMMENDED COST OF REPAIRS			3,687.20
	LESS EXCESS			-500.00
	NETT LIABILITY			3,187.20

Report Ref No. CS/GAI18007884/R1tbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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