

22/03/2002

ASS. REC. BY:

REF: CS/SPF18008073/TIsbn2 Special Instruction:

Supervisor:

Taufiq

ASSIGNMENT (Office)

From (Person): Abdul Rahman of SPF Date/Time: 13/05/2018

Estimated Cost: Bill to:

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

To Inspect Vehicle No: FG 8333 Insured: QX 575E

at Workshop m/s: Pong Sauters Tel: 6271 4618

of: Blk 1006 Bukit Merah Lane 2 # 01-06

Policy No: Claim No: AEMD/105/009/2018/050

Sum Insured: Excess:

Make of Veh: D.O.A. 10-01-2018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp' H.O.D. Endorsement:

Date/Time: 13/05/2018 1:07pm Person Contacted: Izah Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate	Don't Finalize
	ES 8333 - NGA / MSH 13001081/Y	Don: 10/01/2018
	QX 575E - X	

Surveyor

Tanji

REF:

SPF

ASSIGNMENT

WE 2019 Dec

From: Date: 08/05/2018

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

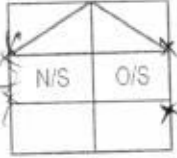
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

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

WP
Vehicle: IN / OUT

Date: Person Contacted:

Veh No: FS 8339 Yr Regn: 2000 April

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

Truck / Trailer or

Make: Honda CM/25 C.C. 124

Colour: Black / Red A/C Insured / Std / NI / NA

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

Eng/No:

C/No: 5C 0557 20855

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 3.60-18

R: 110 90R16

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

TOYO / YOKO or

Front Shinko Rear IRC
R/Bal. 5 mm R/Bal. S mm

L/Bal. mm L/Bal. mm

D.O.A. D.O.I. 8/5/18 0915

Survey held at Pang Sooter

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

#1914, 3 days

(\$476. Red - 20%)

RECEIVED 20 JUL 2018

Date/Time, File Pass to?

20/07/18

1) Typist Date/Time, File Return to?

2)

☐ : Preli. Report

☒ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

____ S + RS ____ \$

) Photos

) Others

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$

Report Format :

Lump Sum / I.B.I: (\$ 1,914.00 P/P

TOTAL

280



SINGAPORE POLICE FORCE

SPF Accidents Claims Section
Automotive Engg & Mgmt Div
Police Logistics Department
No. 1 Mount Pleasant Road
Block 8 Old Police Academy
#02-12 Singapore 298333

Your Ref : FS833S

Our Ref : AEMD/105/009/2018/052

Date : 3 May 2018

Tel: 64784840

Fax: 64784848

M/s LKK Auto Consultants Pte Ltd
Paya Ubi Industrial Park
51 Ubi Avenue 1 #01/02-25
Singapore 408933

Via Fax only: 62564315

Dear Sir/Madam,

ACCIDENT ON 10 JANUARY 2018 INVOLVING GOVT VEH QX575E AND OTHER VEH FS833S

We refer to the above matter.

- 2 Please arrange for an Pre Repair Inspection of vehicle no. FS833S at M/s Pang Scooter Service of Blk 1006 Bt Merah Lane 2 #01-06 Singapore 159762.
- 3 For appointment, please contact Izah at Tel : 62714618.
- 4 Estimates were not provided by the workshop.
- 5 Thank you.

Yours sincerely,

Abdul Rahman
Accident Claims Officer
for Assistant Director

A FORCE FOR THE NATION



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/02001/2018
Date : 19 February, 2018

TAN CHOON QUI
APT BLK 110 COMMONWEALTH CRESCENT
#04-274
SINGAPORE 140110

Dear Sir/Madam

**ACCIDENT INVOLVING FS833S AND QX575E ON 10 JANUARY 2018 AT 2050 HRS, ALONG
OSCP OF BLK 110 COMMONWEALTH CREST**

I refer to the above accident.

2. Please be informed that we have completed our investigations which shows that the driver of QX575E had committed an offence of Careless Driving under Rule 29 Road Traffic Rules. Action has been initiated against the said driver for the said offence.

Yours faithfully

TANG SIEW PING, SSGT
FOR HEAD, TRAFFIC INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE

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	12/01/2018 18:08
Date Of Accident	10/01/2018 21:45
Exact Location Of Accident	BLK 111 COMMONWEALTH CRESCENT OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FS833S
Insured/Policyholder	
Name Of Registered Owner	TAN CHOON QUI
NRIC No	S1337255A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96374037
Alternative Phone No	OTHERS-96374037

Vehicle Particulars

Manufacturer	HONDA
Model	CM 125 CR-124CC (M)
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/17-363081-CA
Cover Note Number	

Driver

Name of Driver	TAN CHOON QUI
NRIC No	S1337255A
Date Of Birth	11/01/1958
Occupation	INDOOR
Date Of Driving Pass	24/11/1978
Driving Experience	39 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96374037
Fax Number	
Contact Number	OTHERS-96374037
Email Address	NOEMAIL

Address	BLK 110 COMMONWEALTH CRESCENT #04-274
Postcode	140110
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	RAINING
Road Surface	WET

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?	NO
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)	0
---	---

Details of Police Action

Was the accident reported to the police?	YES
--	-----

If Yes, Please state which Police Station	
---	--

Police Station Name	COMMONWEALTH NEIGHBOURHOOD POLICE POST
---------------------	--

Police Station Address	ROAD: BLK 111 COMMONWEALTH CRESCENT (ANNEX) , POSTCODE: 140111 , COUNTRY: SINGAPORE
------------------------	---

Police Station Contact	TEL NO: 1800-4749999 - FAX NO: 64715297
------------------------	---

Was notice of intended Prosecution given?	NO
---	----

If Yes, against whom?	
-----------------------	--

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180111/2171	
---	--

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	QX575E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

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.

B. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature
Date & Time

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

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

Sketch Plan #2

SKETCH PLAN

UNKNOWN
BIKE WAS PARKED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PCS PARKED 70 Police REPORT
7/2018 01/12/17

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

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

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180111/2171

1 of 3

Police Station Of Origin:
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No 1800-4749999

Report No T/20180111/2171

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 11/01/2018 17:33	Vide Report No D/20180111/0013	Station Diary No 16
---	-----------------------------------	------------------------

Informant's Particulars

Name of Informant TAN CHOON QUI			Address: APT BLK 110 COMMONWEALTH CRESCENT #04-274 SINGAPORE 140110	
ID Type / ID No NRIC NO / S1337255A			Contact No Home/Office	Mobile: 96374037
Nationality SINGAPORE CITIZEN			Email:	
Sex Male	Age 60	Date of Birth 11/01/1958	Type of Informant Rider	
Race Chinese			Language	Institution / School Name
Occupation HAKWER			Driving Licence Information: Class Date of Expiry	

General Information of the Accident

Type of Accident	Non-Injury	Drink Drive: No	Date/Time of Accident 10/01/2018 21:45	Type of Location Car Park
Location: Along Road 1 COMMONWEALTH CRESCENT				
Blk 111 Commonwealth Crescent Open Car Carpark				
Weather:	Road Surface		Road Speed Limit	
Traffic Flow:	Traffic Control		Traffic Volume	
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FS833S	Motorcycle	HONDA	CM 125 CR	Black		0
QX575E	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FS833S	MSIG INSURANCE (SINGAPORE) PTE LTD	MSDTMT17363081	18/05/2017	17/05/2018

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180111/2171

Police Station Of Origin
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No. 1800-4749999

2 of 3

Report No. T/20180111/2171

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	TAN CHOON QUI	ID No	S1337255A
Related Vehicle	FS833S (Motorcycle)	Contact No	96374037
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 10/01/2018 at about 2145hrs, I came to the carpark and discovered that motorcycle was abit slunt and it was not on the actual lot that I parked earlier. I saw that my helmet was on the side of the road. I tried motorcycle and it was still working and I shifted to another lot. At about 11/01/2018 at about 0345hrs, two officers came to my unit and informed that earlier they had reversed and had hit my motorcycle.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180111/2171

3 of 3

Police Station Of Origin:
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No: 1800-4749999

Report No: T/20180111/2171

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report
D /
Staff Sgt FIRDAUS BIN NOR SIMAN

Signature Of Interpreter
Not applicable

Officer In Charge Of Case
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No : 65476430

Authentication Stamp
NP159

Signature Of Informant.

Date/Time
11/01/2018 17:33

Classification Of Case.

Blk 1006 Bukit Merah Lane 2 #01-06 Singapore 159762
Tel : 6271 4618 Fax : 6273 2632

Tel : 6271 4618 Fax : 6273 2632

ESTIMATE REPAIR

MAKE / MODEL : HONDA/CM 125CR

2390

Blk 1006 Bukit Merah Lane 2 #01-06 Singapore 159762
Tel : 6271 4618 Fax : 6273 2632

Tel : 6271 4618 Fax : 6273 2632

BIKE NO.: FS 833S

MAKE / MODEL : HONDA/CM 125CR

[illegible]



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

AUTOMOTIVE ENGINEERING & MGT DIVISION Ref : CS/SPF18008073/T1sbn2

ACCIDENT CLAIM SECTION (SINGAPORE POLICE
FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD
POLICE ACADEMY SINGAPORE 298333

Date : 20-07-2018



ATTN: ABDUL RAHMAN

Code : SPF

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	QX 575E	Veh. Inspected	FS 833S
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2018/052	Excess (\$)	0.00
Assign From	ABDUL RAHMAN	Assign Date	03/05/2018

2. Vehicle Particulars & Condition

Make & Model	HONDA CM 125	c.c	124
Engine No.	HIDDEN	Year of Reg.	2000
Chassis No.	JC055720855	Colour	BLACK / RED
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	3.60-18	SHINKO	5 mm
L/H Front Tyre			mm
R/H Rear Tyre	110/90 R16	IRC	5 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	10/01/2018	Inspection Date	08/05/2018
Survey held at	PANG SCOOTER SERVICE BLK 1006 BUKIT MERAH LANE 2 #01-06 SINGAPORE 159762		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
-------------------------------------	----------------



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FS 833S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	HANDLER BAR	BENT	125.00	125.00
1	HEAD LIGHT ASSY	CRACKED	185.00	185.00
1	HEAD LIGHT COVER	DISTORTED	95.00	95.00
1	WINDSHIELD	CRACKED	320.00	320.00
1	METER ASSY	DENTED	285.00	285.00
1	L/H MIRROR	DENTED	85.00	85.00
1	LH SIGNAL	CUT	75.00	75.00
1	L/H LAMP STAY	BENT	95.00	95.00
1	SEAT COVER	TO REPAIR SEE LABOUR	85.00	85.00
1	REAR BOX (GIV BRAND)	CUT	265.00	265.00
1	STEERING CON	NOT NECESSARY	120.00	-
1	REAR MUD GUARD (ADDITIONAL)	BENT	120.00	120.00
1	REAR (N) PLATE (ADDITIONAL)	BENT	25.00	25.00
	LESS 10% DISCOUNT		-	-176.00
			1,880.00	1,584.00
LABOUR				
	PRESS FORK		200.00	120.00
	TRANSPORT.		60.00	60.00
	LABOUR INCLUSIVE OF THE REPAIR OF SEAT COVER.		250.00	150.00
			510.00	330.00
GRAND TOTAL			2,390.00	1,914.00
RECOMMENDED COST OF REPAIRS				1,914.00

Report Ref No. CS/SPF18008073/T1sbn2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report. No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.