

ASS. REC BY:

REF: CS3/FCI18012185/V24d3⁵⁷

Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)

From (Person):

Lurene jaw

of

FCI

Date/Time:

4/7/18 @

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBG 1132K

Insured:

SHC0329S

at Workshop m/s

Tune In Motor

Tel:

67534818

of

81K 1016 - Yishun Ind. park A #01-214

Policy No:

Claim No:

D18005177 MFSH

Sum Insured:

Excess:

Make of Veh.
(Client's Record)

D.O.A.

28/06/2018

05/07/2018

H.O.D. Endorsement:

CA / REV / REP. / REV 24 HRS

lup

Date/Time:

4:04pm @ 4/7/18

Person Contacted:

Linda

Vehicle:

IN OUT

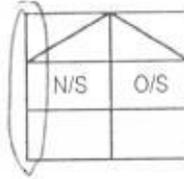
Date/Time	Action/Instruction (X) Estimate
	FBG1132K - X
	SHC0329S-CS/FCI18012146/Kvd3
	DOA: 28/06/2018

ASSIGNMENT

From: _____ Date: 5/7/2018
 Estimated Cost: _____
 OD: TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FBG 1132K
 at Workshop m/s: Tune In Motor
 of: Blk 1016, Yishun Ind. Park A #01-214
 Insured: _____
 Policy No.: _____
 Claims No.: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: Linda @ 67534818

Veh No: FBG 1132K Yr Regn: Apr, 2012
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Suzuki c.c. 749
 Colour: ~~Black~~ White A/C: Insured / Std / NI / NA
 Sp. Reading: 4431.4 T/Radio: Insured / Std / NI / NA
 Eng/No: R749113153
 C/No: JS1C5112100102224
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 120/70 R17
 R: 180/55 R17

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.
 Bal. or Market Value: \$ 10,000
 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 ^(up)
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT



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

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. _____ mm	L/Bal. _____ mm
D.O.A. <u>28/6/2018</u>	D.O.I. <u>5/7/2018 8:53am</u>
Survey held at <u>Tune In Motor</u>	
Des. of Damages: Frt / Rear / O/S / <input checked="" type="checkbox"/> N/S / U/C / Rooftop or _____	
The U/C / Chassis frame / Body Structure affected due to collision.	

Date / Time	Action / Instruction
<u>12/7/18</u>	<u>submit PRS report</u>

Date/Time, File Pass to? : Preli. Report
 : Final Report
 1) _____
 Date/Time, File Return to?
 2) _____

Days Of Repair: _____
 Resurvey No. of Trip: _____

Report Format : _____
 Lump Sum / I.B.I. (\$) _____

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

Survey Fee: _____
 Transportation: _____
 S + RS, SI _____
 Photos _____
 Others _____
 TOTAL _____

MOTOR SURVEY ASSIGNMENT

Date	03-07-2018	Our Ref No. D18005177MFSH
Accident Date	28-06-2018	Claim Type. Third Party
Insured Vehicle	SHC0329S	Third Party Vehicle. FBG1132K
Survey Location	Blk 1016 Yishun Industrial Park A #01-214	
Contact Person.	LINDA	
Contact No.	67534818/ 0	Fax No. 67535850
Survey Type	WITHOUT PREJUDICE:	
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	TUNE IN MOTOR COMPANY	Attention. NIL
Cc : TP Solicitor	C YOGARAJAH LLC	TP Solicitor Fax No. NA
Officer Incharge	LURENE	

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/242037)



PRI Documents



Close



PRI Header Details

Claim No	D18005177MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	2 & C YOGARU
Workshop Name	TUNE IN MOTOR COMPANY (Contact Person : LINDA)	Survey Location & Contact Details	Blk 1016 Yishun Industrial Park A #01-214 Mobile: 0 , Phone: 67534818 , Fax: 67535850 EmailId: LHENY@YOGA-LEGAL.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC0329S	TP Vehicle No	FBG1132K
PRI Recieved Date	03-07-2018 08:12:17 PM	Surveyor Appointed Date	04-07-2018 03:32:13 PM	Surveyor Accept Date	04-07-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	04-07-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks

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.

Date Of Report	29/06/2018 16:07
Date Of Accident	28/06/2018 22:15
Exact Location Of Accident	BLK 92 LOR 4 TOA PAYOH CARPARK
Country/State of Loss	SINGAPORE

Vehicle Registration Number	FBG1132K
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Insured/Policyholder

Name Of Registered Owner	MUHAMMAD RAZALI BIN KLAMON
NRIC No	S7136397Z
Email Address	ZALI131071@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96999369
Alternative Phone No	OTHERS-96999369

Vehicle Particulars

Manufacturer	SUZUKI
Model	GSR750AL2
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5097474742
Cover Note Number	

Driver

Name of Driver	MUHAMMAD RAZALI BIN KLAMON
NRIC No	S7136397Z
Date Of Birth	13/10/1971
Occupation	INDOOR
Date Of Driving Pass	30/11/1992
Driving Experience	25 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96999369
Fax Number	
Contact Number	OTHERS-96999369
Email Address	ZALI131071@GMAIL.COM

Address	BLK 346 YISHUN AVENUE 11 #11-111
Postcode	760346
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , POSTCODE: 319194 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2519999 - FAX NO: 63548749
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Vehicle Registration Number	SHC329S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MR CHONG
NRIC/Passport Number	
Contact Number	91002188
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

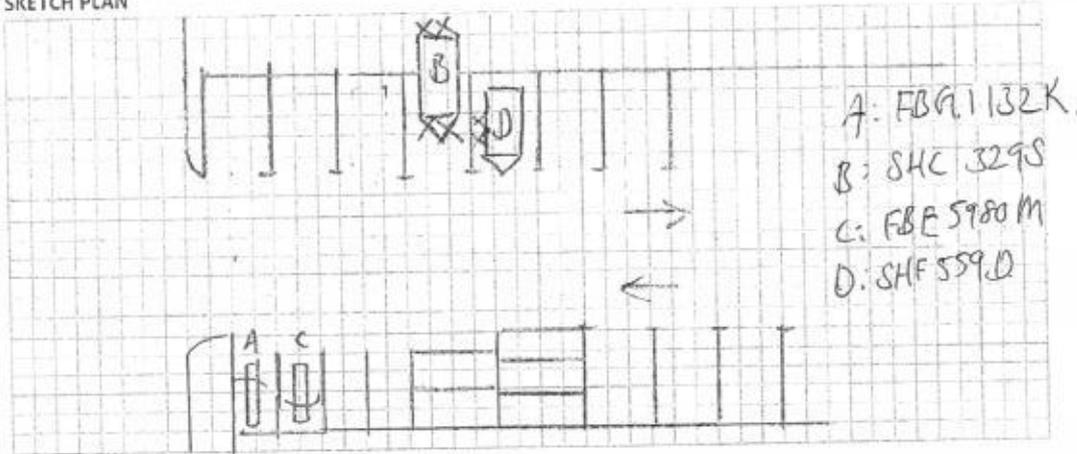
No. Of Passenger (Including Driver)

Vehicle Registration Number FBE5980M
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Vehicle Registration Number SHF559D
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report.

DECLARATION

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

Policyholder's Signature
Date & Time:

29/6/18
1450

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

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

Common Statement Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180629/2010

2 of 4

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20180629/2010

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHF559D	Car	RENAULT	LATITUDE 2.0L DCI AUTO D/AB 4DR	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBG1132K	NTUC Income Insurance Co-Operative Limited	5097474742	16/01/2018	15/01/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	MUHAMMAD RAZALI BIN KLAMON	ID No.	S7136397Z
Related Vehicle	NIL	Contact No.	96999369
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHONG	ID No.	NIL
Related Vehicle	NIL	Contact No.	91002188
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 28/06/2018 at 1830hrs, I parked my motorbike at Lot 375A of Carpark No. TP8A located at Blk 92 Lorong 4 Toa Payoh. At about 2215hrs, I received a phone call from TP to ask me to assist the police officers at the carpark as my motorbike (FBG 1132K) was knocked down by a Citycab taxi driver, Mr Chong (91002188) driving vehicle SHC329S. As such, I went to the scene and was given a report number by the police officer - E/20180628/0192. Other vehicles, namely SHF559D and FBE5980M were affected as well.



**SINGAPORE
POLICE FORCE**



T/20180629/2010

1 of 4

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

Report No. T/20180629/2010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2018 01:33	Vide Report No.: E/20180628/0192	Station Diary No.: 28
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Informant's Particulars

Name of Informant: MUHAMMAD RAZALI BIN KLAMON		Address: APT BLK 346 YISHUN AVENUE 11 #11-111 SINGAPORE 760346	
ID Type / ID No.: NRIC NO / S7136397Z		Contact No.: Home/Office:	Mobile: 96999369
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 46	Date of Birth: 13/10/1971	Type of Informant: Vehicle Owner
Race: Javanese		Language:	Institution / School Name:
Occupation: Private security officer		Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 28/06/2018 22:15	Type of Location: Car Park
Location: LORONG 4 TOA PAYOH Block 92 Lorong 4 Toa Payoh Carpark				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE5980M	Motorcycle	YAMAHA	YBR125	White	Slightly Damaged	0
FBG1132K	Motorcycle	SUZUKI	GSR750AL2	White	Slightly Damaged	0
SHC329S	Car	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Yellow	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180629/2010

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

3 of 4

Report No. T/20180629/2010

CONTINUATION OF REPORT

I am making this report as recommended by TP IO Muhd Noor (65476201) for record and insurance claim purposes.



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

PRE-REPAIR INSPECTION REPORT			
FIRST CAPITAL INSURANCE LTD 36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Ref: CS3/FCI18012185/Vz4d3s2 Date: 13-07-2018 Code: FC12	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SHC 329S	Veh. Inspected	FBG 1132K
Policy No.	D-18088937MFSH	Coverage (\$)	0.00
Claim No.	D18005177MFSH	Excess (\$)	0.00
Assign From	LURENE JAW	Assign Date	04/07/2018
2. Vehicle Particulars & Condition			
Make & Model	SUZUKI	c.c	749
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	JS1C5112100102224	Colour	WHITE
Odometer	49314 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	120/70 R17	BRIDGESTONE	6 mm
L/H Front Tyre			mm
R/H Rear Tyre	180/55 R17	BRIDGESTONE	6 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.			
5. General Information			
Accident Date	28/06/2018	Inspect Date / Time	05/07/2018 (08:53 AM)
Survey held at	TUNE IN MOTOR BLK 1016 YISHUN PARK A #01-214 SINGAPORE 768758		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) MARKET VALUE:\$10,000.00			

Report Ref No. CS3/FCI18012185/Vz4d3s2

Inspected By

SATHYA SAI KATHIRASEN

Asst. Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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