

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	FBK8381R		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	YAMAHA		
Vehicle Model :	YBR125		
Chassis No. :	LBPRE101000055822		
Propellant :	Petrol		
Engine No. :	E3F5E040813		
Engine Capacity :	124 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	320 kg		
Unladen Weight :	114 kg		
Year Of Manufacture :	2015		
Original Registration Date :	17 Feb 2016		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$6,503.00		
COE Expiry Date :	16 Feb 2026		
Road Tax Expiry Date :	16 Feb 2019		
Inspection Due Date :	16 Feb 2019		
Intended Transfer Date :	29 Aug 2018		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

CERTIFICATE OF INSURANCETHE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE
THE ROAD TRANSPORT ACT 1987 OF MALAYSIATHE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968
ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

CERTIFICATE No. AVFMSB0000591803 ChaNo: LBPREF101000055822

1. Index Mark and Registration Number of Vehicle FBK 8381 R

2. Name of Policyholder BAN HOCK HIN CO PTE LTD

3. Effective Date of Commencement of Insurance 10 April 2018
for the purposes of the Ordinance

09 April 2019

4. Date of Expiry of Insurance

5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf)

ANY PERSON WHO IS UNDER THE POLICYHOLDER &/OR HIRER'S EMPLOYMENT AND IS DRIVING ON THEIR ORDER OR WITH THEIR PERMISSION.

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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to Use* (For certificate reference MX1, see overleaf)

USE ONLY FOR THE POLICYHOLDER &/OR HIRER'S BUSINESS OR PROFESSION.

THE POLICY DOES NOT COVER:

1. USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
2. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING (OTHER THAN FOR REWARD) OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.
3. USE FOR THE CARRIAGE OF PASSENGERS FOR HIRE OR REWARD BY ANY PERSON TO WHOM THE VEHICLE IS HIRED.

Type of Cover : Third Party

* Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore)



A handwritten signature in dark ink, appearing to be 'Jm' or similar, located at the bottom right of the page.

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	16/08/2018 17:27
Date Of Accident	13/08/2018 17:00
Exact Location Of Accident	448 ANG MO KIO AVENUE 10 (OPEN CP)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK8381R
Insured/Policyholder	
Name Of Registered Owner	BAN HOCK HIN CO PTE LTD
Co Reg No	197000288K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64568781

Vehicle Particulars

Manufacturer	YAMAHA
Model	YBR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	AVFMSB0000621700
Cover Note Number	

Driver

Name of Driver	ZHU MING
Passport No/FIN	G2733879N
Date Of Birth	11/01/1987
Occupation	OUTDOOR
Date Of Driving Pass	14/01/2016
Driving Experience	2 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84237362
Fax Number	
Contact Number	OFFICE-84237362
Email Address	AM10@SG.MCD.COM

Address	NA
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	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

My motorbike was parked in the parking lot a open carpark Blk448 ANG MO KIO ave 10 was a lorry YN9912P reverse & hit onto my motorbike FBK8381R, due to that my motorbike FBK8381R fall onto other vehicle PA4981Y that was parked beside me. No injuries were reported.

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	YN9912P
Vehicle Make/Model/Colour	MITSUBISHI/CANTER
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	BAO BAI DUO
NRIC/Passport Number	
Contact Number	67897035
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

IMPORTANT NOTICE

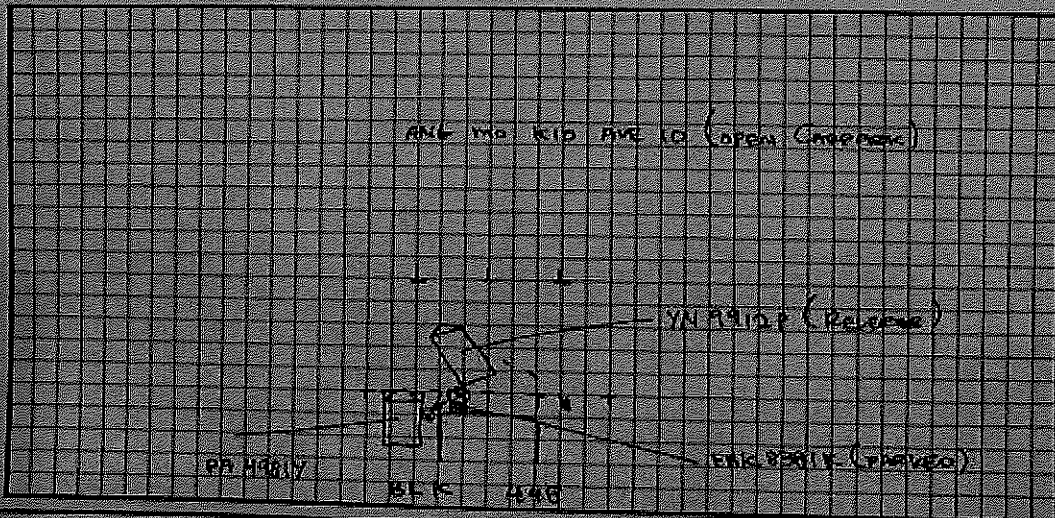
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 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 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.
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 be 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 purposes 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 making 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/postal packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may be 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 also 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 used outside of Singapore, for one or more of the above purposes.

**VERIFIED BY AJAX MARS
REPORTING OFFICER
MOHD FADZY BIN ISMAIL**
Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date & Time

Zhu Ming
Driver's Signature (If driver is not the policyholder) / Date & Time

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

My motorbike was parked in the parking lot a open carpark Blk448 ANG MO KIO ave 10 was a lorry YN9912P reverse & hit onto my motorbike FBK8381R, due to that my motorbike FBK8381R fall onto other vehicle PA4981Y that was parked beside me. No injuries were reported.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHD FADZLY BIN ISMAIL

MARS Officer

Zhu

172125

Registered Owner or Driver's Signature

Job Complete Date/Time

16 August 2018 4:20 pm

Date/Time:

16 August 2018 4:20 pm



QUOTATION

Customer :

NO. : 32925

AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way,
#27-01 AXA Tower
Singapore 068811

DATE : 18/08/2018
CLAIM NO. : 11178
POLICY NO. : AVFMSB0000591803
FROM : RAYMOND

VEHICLE NO. : FBK8381R
MAKE/MODEL : YAM / YBR125

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	ALIGNMENT BODY P/N: 29561		1.00	\$350.00	350.00
2	BAR HANDLE P/N: 42062	REPLACE	1.00	\$68.00	68.00
3	COWLING FRONT (BLACK) P/N: 57992	REPLACE	1.00	\$282.00	282.00
4	CRASH BAR P/N: 35878	REPLACE	1.00	\$195.00	195.00
5	GRIP HANDLE SET (GPR) F2 P/N: 45347	REPLACE	1.00	\$15.00	15.00
6	LABOUR P/N: 06766	Supply/Install	3.00	\$35.00	105.00
7	PROTECTOR EXHAUST P/N: 50024	REPLACE	1.00	\$119.00	119.00
8	PROTECTOR EXHAUST CAP P/N: 50006	REPLACE	1.00	\$56.00	56.00
9	RUBBER FOOTREST FRONT P/N: 26136	REPLACE	1.00	\$14.00	14.00
10	STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT P/N: 32921	REPLACE	1.00	\$12.00	12.00
11	TRANSPORT CHARGES P/N: 07169		1.00	\$35.00	35.00
12	VISOR P/N: 42004	REPLACE	1.00	\$67.00	67.00

SUB TOTAL
GST @ 7 %

\$1,318.00
\$92.26



CERT NO: 2002-1-0383
ISO 9001 : 2015

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
GRAND TOTAL					\$1,410.26

Validity: 30 days

For & on Behalf of
BAN HOCK HIN CO PTE LTD

Acknowledge & Accepted By



RAYMOND

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



CERT NO.: 2002-1-0383
ISO 9001 : 2015



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-132227
Date of Request: 28/08/2018

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 28/08/2018
Enquiry By Tan Chok Lok
TP Vehicle No. YN9912P
Accident Date 13/08/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YN9912P	AXA Insurance Pte Ltd	30/10/2017-29/10/2018	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
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TAX INVOICE

Our Ref No: GR-18-132227
Date of Request: 28/08/2018

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 28/08/2018
Enquiry By Tan Chok Lok
TP Vehicle No. YN9912P
Accident Date 13/08/2018

DESCRIPTION	AMOUNT (\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque