

ASS. REC. BY:

REF:

CS3/FCI18021238/JCD30

Special Instruction:

Surveyor:

Hillier

ASSIGNMENT (Office)

From (Person):

CWS
Screener

of

FCI

Date/Time:

23/11/18 12:57pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBN 1965L

Insured:

SHC 1689X

at Workshop m/s

Gp Motoring

Tel:

91686744

of

282 Macpherson Road

Policy No:

Claim No:

D1800824SMFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

17/11/18

(Client's Record)

CA / REV / REP. / REV 24 HRS

Cup

H.O.D. Endorsement:

Date/Time:

3:08pm 23/11/18

Person Contacted:

Markus

Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (x) Estimate
	FBN 1965L - X
	SHC 1689X - CC3/AIG 10008052 / Fn 172k2 DOA: 23/4/2010
	Dismantle: 29/11/2018

PRS

REF:

FCI

ASSIGNMENT

From: Date: 26/11/2018

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 (up)

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: FBN1965L Yr Regn: 11 Aug 2018

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

Truck / Trailer or

Make: Yamaha Xmax C.C. 292

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

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

Eng/No:

C/No: MH3SH0844JK003849

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ Order / Jammed / Leaked / Burnt orBrake: ☒ Order / Jammed / Leaked / Burnt orModi: Nil / ☒ Rrim / STD A/Rim or

Tyre Size: F: 120/70 R15

R: 140/70 R14

BS: ☒ BUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 17/11/18 D.O.I. 26/11/18 @ 0952Am

Survey held at @ 1000

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

N/S, O/S

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

Date / Time Action / Instruction

MV - \$15,300

PV - \$5,352

NV - \$9,948

[Signature]
28/11/2018

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip: 1

Survey Fee:

Transportation

) \$ + RS. \$

) Photos

) Others

TOTAL

Report Format : PRS

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

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

150

MOTOR SURVEY ASSIGNMENT

Date	20-11-2018	Our Ref No. D18008245MFSH
Accident Date	17-11-2018	Claim Type. Third Party
Insured Vehicle	SHC1689X	Third Party Vehicle. FBN1965L
Survey Location	282 MACPHERSON ROAD	
Contact Person.	MARCUS	
Contact No.	67464240/ 91686744	Fax No. 67464596
Survey Type	WITHOUT PREJUDICE: NO EST. *	
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	GP MOTORING PTE LTD	Attention. NIL
Cc : TP Solicitor	JUSEQUITY LAW CORPORATION	TP Solicitor Fax No. NA
Officer Incharge	SERENE	

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.



PRI Header Details

Claim No	D18008245MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & JUSEQUIT MOTORING PT
Workshop Name	GP MOTORING PTE LTD (Contact Person : MARCUS)	Survey Location & Contact Details	282 MACPHERSON ROAD Mobile: 91686744 , Phone: 67464240 , Fax: 67464590 EmailId: ALFRED_NG@JUSEQ.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: NO EST. *		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC1689X	TP Vehicle No	FBN1965L
PRI Recieved Date	22-11-2018 10:23:10 PM	Surveyor Appointed Date	23-11-2018 12:56:16 PM	Surveyor Accept Date	26-11-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	26-11-2018	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

Date	Job Remarks	Action
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FINAL SUMMARY

Surveyor Final Adjusted Amount	Surveyor Fees	Remarks

Submit Assessment

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	7553F
Vehicle Details	
Vehicle No.:	FBN1965L
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Nov 2018
Vehicle Make:	YAMAHA
Vehicle Model:	CZD300A / XMAX300
Primary Colour:	Brown
Manufacturing Year:	2018
Engine No.:	H336E0031634
Chassis No.:	MH3SH0849JK003849
Maximum Power Output:	-
Open Market Value:	\$4,284.00
Original Registration Date:	11 Aug 2018
First Registration Date:	11 Aug 2018
Transfer Count:	0
Actual ARF Paid:	\$643.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	10 Aug 2028
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$5,514.00
COE Rebate Amount:	\$5,352.00
Total Rebate Amount:	\$5,352.00

The information contained herein is correct as at 26 Nov 2018


OK




Share This Listing




Yamaha Xmax 300

 3 weeks ago by
11111111111111111111111111111111
(/11111111111111111111111111111111)

 S\$13,800

 55 Likes

 Used

 In Class 2A (/categories/class-2a-1594)



read more

Make

Yamaha

 **Type**

Registered date: July 2017

- Been riding it for 1 year and 3 months, and everything is working as expected. Condition is good.
 - Never drop my bike or accident.
 - All stock condition except change of battery in Aug 2018.
 - Always park under shelter carpark.
 - low mileage of 12k+ km.
- Equivalent to 9.6k km per year as I only use it to travel to work.
- Average 37km per litre as shown in photo(due to discipline bike run-in)
 - well maintain and always service on time.
 - COE worth 6k.

Reason for selling is because I'm changing to car.

Make

Yamaha

Type

Scooter



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 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. 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	19/11/2018 14:30
Date Of Accident	17/11/2018 16:50
Exact Location Of Accident	ALONG PANDAN LOOP ROAD NEAR TO PANTECH BUILDING
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN1965L
Insured/Policyholder	
Name Of Registered Owner	AZMAN BIN ABDUL RAHMAN
NRIC No	S8417553F
Email Address	SURAYA_YACOB@MOE.EDU.SG
Mobile Phone No	(LOCAL) +65-84884535
Alternative Phone No	OFFICE-84884535

Vehicle Particulars

Manufacturer	YAMAHA
Model	CZD300A / XMAX300-292CC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	D18MTMC01004807
Cover Note Number	

Driver

Name of Driver	AZMAN BIN ABDUL RAHMAN
NRIC No	S8417553F
Date Of Birth	21/06/1984
Occupation	INDOOR
Date Of Driving Pass	17/03/2003
Driving Experience	15 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84884535
Fax Number	
Contact Number	OFFICE-84884535
EMail Address	SURAYA_YACOB@MOE.EDU.SG

Address	BLOCK 487A CHOA CHU KANG AVENUE 5 #04-83
Postcode	681487
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 - U-TURN
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 [OTHER]	CHOA CHU KANG NPC - PLEASE REFER TO THE ATTACHED POLICE REPORT
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Please refer to the attached Sketch Plan and Police Report for the accident details

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC1689X
Vehicle Make/Model/Colour	SONATA BLUE TAXI
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)	1

DETAILS OF INJURED PERSON 1

Name	AZMAN BIN ABDUL RAHMAN
Approximate Age	34
Injuries Sustain	LEFT ELBOW CONFUSION, CONFUSION OF LEFT HIP & LEFT FOOT
Injured person in which vehicle?	FBN1965L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	BLOCK 487A CHOA CHU KANG AVENUE 5 #04-83
Postcode	681487


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)**

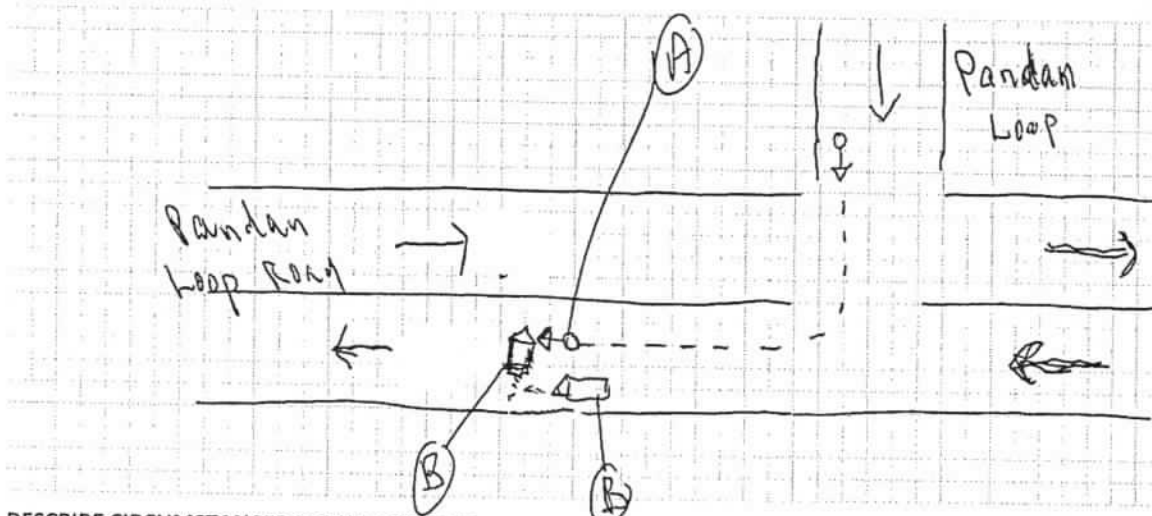
I understand, acknowledge, agree and consent that:

- (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.


 19/11/18 @ 1410 hrs.
 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.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

*Motorcycle is still in active compound.

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

19/11/18 @ 1410 hrs.

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



**SINGAPORE
POLICE FORCE**



T/20181118/2060

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 3

Report No. T/20181118/2060

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/11/2018 17:06		Vide Report No.:		Station Diary No.: 105	
Informant's Particulars					
Name of Informant: AZMAN BIN ABDUL RAHMAN			Address: APT BLK 487A CHOA CHU KANG AVENUE 5 #04-83 SINGAPORE 681487		
ID Type / ID No.: NRIC NO / S8417553F			Contact No.: Home/Office: Mobile: 84884535		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 21/06/1984	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: TECHNICIAN			Driving Licence Information: Class: 2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 17/11/2018 16:50	Type of Location:
Location: Along Road 1 PANDAN LOOP near to Pantech building				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN1965L	Motorcycle	YAMAHA	CZD300A / XMAX300	Brown	Seriously Damaged	0
SHC1689X	Car	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20181118/2060

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

2 of 3

Report No. T/20181118/2060

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBN1965L	TENET SOMPO INSURANCE PTE. LTD.	D18MTMC01004807	11/08/2018	10/08/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AZMAN BIN ABDUL RAHMAN		ID No. S8417553F
Related Vehicle	FBN1965L (Motorcycle)		Contact No. 84884535
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: 2A,2,3 Date of Expiry: NIL
Date Treatment	17/11/2018		Date Discharge 18/11/2018
No. of Days granted Medical Leave	05		Degree of Injury Serious

Brief Details.

On 17/11/2018 at about 1645hrs I was riding my vehicle bearing the plate number of FBN1965L. I exited the carpark of 207B Pandan Loop. I then check for any incoming traffic. As it was safe, I made a right turn. I then observed One Taxi bearing the plate number of SHC1689X on the left kerb stationary. I then inch to the right. Out of a sudden, the taxi made an abrupt U-turn. I didn't managed to stop in time and hit onto the right side of the taxi. The taxi driver then alighted. i then called my colleague to assist me. The ambulance and traffic police came to the scene. I was conveyed by ambulance and was sent to NTFH. I then suffered left elbow contusion, contusion of left hip, Contusion of foot, left. I did not have any video recording. I am lodging this report for the police to investigate.



**SINGAPORE
POLICE FORCE**



T/20181118/2060

3 of 3

Report No. T/20181118/2060

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

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:

J/

Staff Sgt AHMAD ADHA BIN SAHARI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP 2171

SI YEOU CHUN JIAN

Contact No: 65476213

Signature:

Authentication Stamp

NP168

Singapore Police Force

Signature Of Informant:

Date/Time:

18/11/2018 17:06

Classification Of Case:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8417553F



Name

AZMAN BIN ABDUL RAHMAN

Race

MALAY

Date of birth

21-06-1984

Sex

M

S8417553F

Country of birth

SINGAPORE

4 6 1 6 8 1 1



NRIC No. S8417553F

Date of Issue


16-08-2010

APT BLK 487A CHO A CHU KANG AVENUE 5 #04-83
SINGAPORE 681487


NRIC No: S8417553F

Date: 22/06/2015

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S 8417553 F**
 Name: **AZMAN BIN ABDUL RAHMAN**
 Birth Date: **21 Jun 1984**
 Issue Date: **26 Jul 2018**

002828205D



H/p 84884535

Email : Guraya_yacob@moe.edu.sg

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	17 Mar 2003
Class 2A	Motorcycles between 201 cc and 400 cc	26 Jul 2018
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	05 Jul 2008

NP 428A



Certificate of Insurance Pg. 1



Sompo Insurance Singapore Pte. Ltd.
50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623
Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg
Co. Reg. No.: 106005480E | GST Reg. No.: M200903196

G.P. Motor
Ken. /

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)

Cert No./Policy No. : D18MTMC01004807
Insured : AZMAN BIN ABDUL RAHMAN
Motor Vehicle (Regn No.) : FBN1965L
Cover : Third Party, Fire & Theft
Policy Commencement Date : 11 AUGUST 2018 00:00
Policy Expiry Date : 10 AUGUST 2019 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$500 - Section I
Named Driver 1 : AZMAN BIN ABDUL RAHMAN
HIRE PURCHASE OWNER : YEW HENG CREDIT ENTERPRISE PTE LTD

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*
AZMAN BIN ABDUL RAHMAN

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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purposes and
(a) by the Insured in person in connection with his business or profession or
(b) in connection with the Insured's business or profession

The Policy does not cover

- (i) Use for hire or reward
- (ii) Use for racing pacemaking, reliability trial or speed-testing
- (iii) Use for the carriage of goods (other than samples) in connection with any trade or business
- (iv) Use for any purpose in connection with the Motor Trade

Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

For list of Accident Reporting Centres, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6461 6555.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Transport Act, 1987 (Malaysia), and (2) the policy terms, conditions and exceptions of the Motorcycle Policy (Ref MCY-MTMC 01)

Sompo Insurance Singapore Pte. Ltd.

Stella

Authorised Signatory

Date/Time of Issue : 08 AUGUST 2018 17:11

IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11E07901 & ENSURE PTE. LTD. (MOTORCYCLE) CI Code: MY3 4JDLZ5444J0MMZAJ

**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

MS FIRST CAPITAL INSURANCE LTD
36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Ref: CS3/FCI18021238/Jcd3e2

Date: 13-12-2018



Code: FCI2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SHC 1689X	Veh. Inspected	FBN 1965L
Policy No.	D-18088936MFSH	Coverage (\$)	0.00
Claim No.	D18008245MFSH	Excess (\$)	0.00
Assign From	SERENE LER	Assign Date	23/11/2018


2. Vehicle Particulars & Condition

Make & Model	YAMAHA XMAX300	c.c	292
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	MH3SH0849JK003849	Colour	BLUE
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	120/70 R15	DUNLOP	6 mm
L/H Front Tyre			mm
R/H Rear Tyre	140/70 R14	DUNLOP	6 mm
L/H Rear Tyre			mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S AND O/S BODY.	
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5. General Information

Accident Date	17/11/2018	Inspect Date / Time	26/11/2018 (09:52 AM)
Survey held at	GP MOTORING PTE LTD 282 MACPHERSON ROAD SINGAPORE 348607		

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: \$15,300.00
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Report Ref No. CS3/FCI18021238/Jcd3e2

Inspected By

ONG HWE E JIE

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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