

ASS. REC. BY:

REF

CS3/III18022972/Gcd307

Special Instruction:

Surveyor: **Meimen**

Guo Qiang

ASSIGNMENT (Office)

From (Person):

Grubiel wee

of

III

Date/Time:

24/12/2018 @ 9:31am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

FBF 6093L

Insured:

SHA 3314 A

at Workshop m/s:

Gp Motoring

Tel:

6746 4240 / 9061 8091

of

282 Macpherson Road

Policy No.:

Claim No.:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

18/12/2018

CA / REV / REP. / REV 24 HRS

1up

H.O.D. Endorsement:

Date/Time:

9:44am @ 24/12/18

Person Contacted:

Mr. Ken

Vehicle:

IN /  OUT

Date/Time

Action/Instruction ( X ) Estimate

FBF 6093L - X

SHA 3314 A - NA / INC 14019613/d 2

2018/12/19/2014

Demantle: 27/12/2018 @ 2.10pm



## Nivitha (LKK Auto)

---

**From:** Motor Claim - III <motorclaim@iii.com.sg>  
**Sent:** Monday, 24 December 2018 9:34 AM  
**To:** Alfred Ng; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)  
**Cc:** Pooi Chin Han Daniel  
**Subject:** RE: ACCIDENT INVOLVING FBF6093L AND SHA3314A ON 18 DECEMBER 2018.  
**Attachments:** PRI-FBF6093L.PDF

Dear Sir / Mdm

**This Pre-Repair Survey is on Without Prejudice Basis.**

THIRD PARTY VEHICLE NO. : FBF6093L  
III INSURED VEHICLE NO. : SHA3314A  
DATE OF LOSS : 18.12.18

We acknowledge receipt of your email.

**In compliance to Pre-Action Protocol for NIMA cases, we note that**

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor LKK AUTO CONSULTANTS to conduct the pre-repair survey.

This claim is handled by Daniel.

Please let us have your client's accident report and repair estimate for our appointed surveyor to conclude his report.

**\*\*We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.**

**\*\*Surveyor kindly upload this assignment to Merimen.**

Thank You.

*Best Regards,*  
**Gabriel Wee**



64 Cecil Street; #05 - IOB Building  
Singapore 049711  
Tel: 6347 6100, Ext - 248

---

**From:** Alfred Ng [mailto:alfred\_ng@juseq.com.sg]  
**Sent:** 21 December, 2018 4:42 PM  
**To:** Motor Claim - III <motorclaim@iii.com.sg>  
**Subject:** ACCIDENT INVOLVING FBF6093L AND SHA3314A ON 18 DECEMBER 2018.

Your ref: SHA3314A  
Our ref: JEQ/FBF6093L/GP/PI

Dear Sir,

We are instructed that our client is not agreeable to all the surveyors proposed by you.

Pursuant to Appendix C, pre-action protocol for NIMA cases, we are also instructed to furnish you our client's list of motor surveyors for your selection:-

1. Absolute Appraisal Services Pte Ltd;
2. Sincere Appraisal Services;
3. Mc Coy Appraiser Pte Ltd;
4. Delta V Consultant;
5. Prominent Appraisal Services Pte Ltd;
6. Advance Automotive Consultancy Pte Ltd;
7. Pal's Appraiser Pte Ltd;
8. S K Auto Consultants;
9. Oh Appraisal Services;
10. KAAS.

Please be informed that if the above mentioned surveyors is not agreeable by you, our clients' motor vehicle is available for pre-repair inspection at the under-stated workshop:-

**GP Motoring Pte Ltd**

**282 Macpherson Road**

**Singapore 348607**

**Tel: 6746-4240 Mobile: 9061-8091.**

**Fax: 6746-4596**

**Person In charge : Mr. Ken Sim**

\* Further, please remind your appointed surveyor to request for post repair inspection if you wish to do so under NIMA Protocol Appendix C paragraph 2.11

With Regards

Alfred Ng  
Executive  
On behalf of Mr Michael Yap  
M/s JusEquity Law Corporation  
No. 171 Chin Swee Road  
#02-01/02/06 Singapore 169877  
Tel : 6536 9339  
Fax: 6536 5368

**IMPORTANT NOTICE:**

This message is intended only for the attention of the addressee and may contain legally privileged and/or confidential information. Its unauthorised use, disclosure, storage or copying is not permitted. If you are not the intended recipient, please permanently delete the original, destroy all copies and inform the sender.

----- Original Message -----

**From:** Motor Claim - III

**To:** Alfred Ng

**Sent:** Friday, December 21, 2018 4:03 PM

**Subject:** RE: NOTICE OF ACCIDENT

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

*Best Regards,*  
**Gabriel Wee**



64 Cecil Street; #05 - IOB Building  
Singapore 049711  
Tel: 6347 6100, Ext - 248

---

**From:** Alfred Ng [mailto:[alfred\\_ng@juseq.com.sg](mailto:alfred_ng@juseq.com.sg)]

**Sent:** 21 December, 2018 2:53 PM

**To:** Motor Claim - III <[motorclaim@iii.com.sg](mailto:motorclaim@iii.com.sg)>

**Subject:** NOTICE OF ACCIDENT

Your ref: SHA3314A

Our ref: JEQ/FBF6093L/GP

Dear Sirs,

Kindly refer to our attachment

With Regards

Alfred Ng  
Executive

On behalf of Mr Michael Yap  
M/s JusEquity Law Corporation  
No. 171 Chin Swee Road  
#02-01/02/06 Singapore 169877  
Tel : 6536 9339  
Fax: 6536 5368

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

# ApeosPort-IV 6080

## Transmission Report

G3-ID 6536 5368  
Local Name  
Company Logo

Date & Time : 21/12/2018 10:16  
Page : 1 (Last Page)

The job has been sent.  
Original Size: A4



### JusEquity Law Corporation

ADVOCATES & SOLICITORS • COMMISSIONER FOR OATHS

171 Chin Swee Road #01-01, CE5 Centre, Singapore 169877  
Telephone (SG) 6236 9238, Fax: (65) 6236 5358 (Litigation & Conveyancing)  
Email: [clara@juseq.com.sg](mailto:clara@juseq.com.sg) website: [www.juseq.com.sg](http://www.juseq.com.sg)

Our Ref: JEQ\FBF6093L\GP\PI (x)

Your Ref: SHA3314A

21 December 2018

COMFORT TRANSPORTATION PTE LTD By Post Only  
383 Sin Ming Drive  
GAS Building  
Singapore 575717

INDIA INTERNATIONAL INSURANCE PTE LTD By Fax: 6224 4174 Only  
Singapore

Dear Sir

ACCIDENT INVOLVING FBF6093L & SHA3314A ON 18.12.2018

We act for the owner of vehicle no. FBF6093L.

We hereby notify you of a road traffic accident on 18 December 2018 at about 2320 hrs, along Choa Chu Kang Avenue 5 involving our client's vehicle and vehicle registration no. SHA3314A driven by you / your insured at the material time. A copy of our client's accident report is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully

End.

**CONFIDENTIALITY CAUTION**

This message is intended only for the use of the individual or entity to whom it is addressed and contains information that is privileged and confidential. If you, the reader of this message, are not the intended recipient, you should not disseminate, distribute or copy this communication. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our expense. Thank you.

JusEquity Law Corporation (Registration No. 2004072282) is a law corporation with limited liability.

#	Job	Remote Station	Start Date & Time	Duration	Pages	Protocol	Contents	Status
1	2678	67464596	12-21; 10:15	30 Secs	1/1	Super G3		Completed



# JusEquity Law Corporation

**ADVOCATES & SOLICITORS • COMMISSIONER FOR OATHS**

171 Chin Swee Road #02-06, CES Centre, Singapore 169877  
Telephone (65) 6536 9339, Fax : (65) 6536 5368 (Litigation & Conveyancing)  
Email : claims@juseq.com.sg website : www.juseq.com.sg

Our Ref: JEQ/FBF6093L/GP/PI (z)

Your Ref: SHA3314A

21 December 2018

COMFORT TRANSPORTATION PTE LTD  
383 Sin Ming Drive  
GAS Building  
Singapore 575717

By Post Only

INDIA INTERNATIONAL INSURANCE PTE LTD  
Singapore

By Fax: 6224 4174 Only

Dear Sir

**ACCIDENT INVOLVING FBF6093L & SHA3314A ON 18.12.2018**

We act for the owner of vehicle no. FBF6093L.

We hereby notify you of a road traffic accident on **18 December 2018** at about **2320 hrs**, along Choa Chu Kang Avenue 5 involving our client's vehicle and vehicle registration no. **SHA3314A** driven by you / your insured at the material time. A copy of our client's accident report is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know **within 2 working days of your receipt of this notice** whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully

Encl.

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> **Back to OneMotoring**

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	6910H
Vehicle Details	
Vehicle No.:	FBF6093L
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Dec 2018
Vehicle Make:	YAMAHA
Vehicle Model:	RXZ
Primary Colour:	Red
Manufacturing Year:	2010
Engine No.:	5PV033732
Chassis No.:	PMY5PV100A0033732
Maximum Power Output:	-
Open Market Value:	\$2,246.00
Original Registration Date:	23 Sep 2011
First Registration Date:	23 Sep 2011
Transfer Count:	3
Actual ARF Paid:	\$337.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	22 Sep 2021
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$2,109.00
COE Rebate Amount:	\$897.00
<b>Total Rebate Amount:</b>	<b>\$897.00</b>

The information contained herein is correct as at 24 Dec 2018

OK

### 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	20/12/2018 14:17
Date Of Accident	18/12/2018 23:20
Exact Location Of Accident	ALONG CCK AVE 5 NEAR 489B CCK
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF6093L
-----------------------------	----------

#### Insured/Policyholder

Name Of Registered Owner	MUHAMMAD FARIS BIN JUMAT
NRIC No	S9546910H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91750053
Alternative Phone No	OFFICE-91750053

#### Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ-133CC (M)
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	VMO/P2154792
Cover Note Number	

#### Driver

Name of Driver	AKID BIN ABDUL WAHAB
NRIC No	S9745569D
Date Of Birth	24/12/1997
Occupation	INDOOR
Date Of Driving Pass	07/03/2017
Driving Experience	1 YEAR AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94655938
Fax Number	
Contact Number	OFFICE-94655938
EMail Address	AKIDGILA@GMAIL.COM

Address	BLK 801C KEAT HONG CLOSE #04-35
Postcode	683801
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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 (including own vehicle) 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	RIVER VALLEY NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2789999 - FAX NO: 62786427
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT NO: T/20181219/2041. STATEMENT RECORDED BY SOO - PROGRESSIVE CAR CARE PTE LTD (6741 5336)

#### 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	SHA3314A
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)

**DETAILS OF INJURED PERSON 1**

Name AKID BIN ABDUL WAHAB

Approximate Age

Injuries Sustain SLIGHT INJURIES

Injured person in which vehicle? FBF6093L

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

## 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.
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.

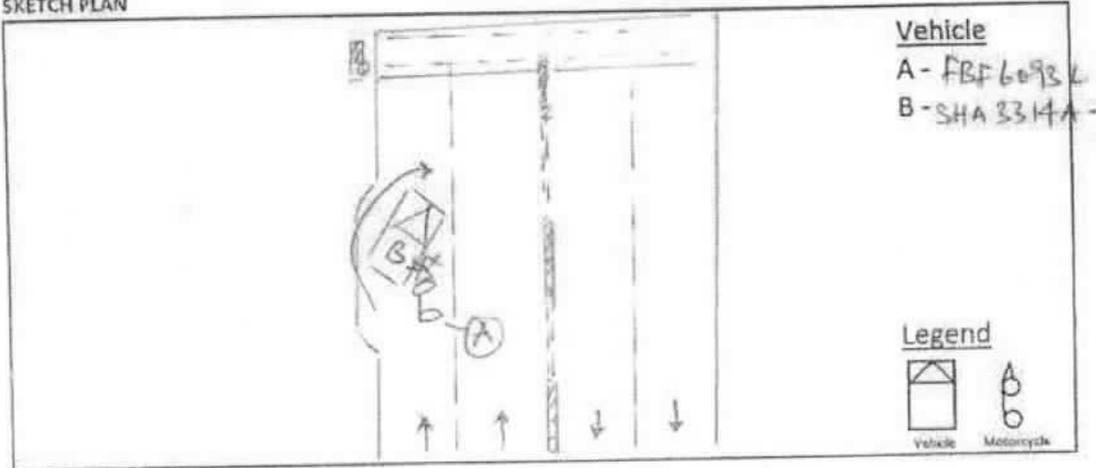
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

  
\_\_\_\_\_  
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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report no: 7/2012(219/2041.

DECLARATION

I/We declare the foregoing particulars are true in every respect.  
Please be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy must be made within the stipulated time frame from the day of occurrence. Kindly check your policy for more details.

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.:



**SINGAPORE  
POLICE FORCE**



T/20181219/2041

1 of 3

Police Station Of Origin:  
River Valley NPP  
4 Delta Avenue #01-02 SINGAPORE 161004  
Tel No: 1800-2789999

Report No. T/20181219/2041

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2018 12:31		Vide Report No.:		Station Diary No.: 10.	
<b>Informant's Particulars</b>					
Name of Informant: AKID BIN ABDUL WAHAB			Address: APT BLK 801C KEAT HONG CLOSE #04-35 SINGAPORE 683801		
ID Type / ID No.: NRIC NO / S9745569D			Contact No.:		Mobile: 94655938
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 20	Date of Birth: 24/12/1997	Type of Informant: Rider		
Race: Malay		Language: English		Institution / School Name:	
Occupation: Delivery Rider		Driving Licence Information: Class: 2B		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others:	Drink Drive: No	Date/Time of Accident: 18/12/2018 23:20	Type of Location: Straight Road
Location: Along Road 1 CHOA CHU KANG AVENUE 5  Along Choa Chu Kang Avenue 5 towards Choa Chu Kang Avenue 4 near Blk 489B Choa Chu Kang Avenue 5				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBF6093L	Motorcycle	YAMAHA	RXZ	Blue	Seriously Damaged	0
SHA3314A	Car	HYUNDAI	140 CRDI	Blue	Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20181219/2041

Police Station Of Origin:  
River Valley NPP  
4 Delta Avenue #01-02 SINGAPORE 161004  
Tel No: 1800-2789999

2 of 3

Report No. T/20181219/2041

## CONTINUATION OF REPORT

Rider			
Name	AKID BIN ABDUL WAHAB		ID No. S9745569D
Related Vehicle	FBF6093L (Motorcycle)		Contact No. 94655938
Hospital/Clinic	NATIONAL HEALTHCARE GROUP POLYCLINICS (CHOA CHU KANG)		Class of Driving Licence & Expiry Date Class: 2B Date of Expiry: NIL
Date Treatment	19/12/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	HO KEE KIEN		ID No. S2041876A
Related Vehicle	SHA3314A (Car)		Contact No. 83810998
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 18/12/2018 at about 11:20pm, I was riding my motorbike (FBF6093L) along Choa Chu Kang Avenue 5 on the extreme right lane near Blk 489B Choa Chu Kang Avenue 5 towards Choa Chu Kang Avenue 4. The traffic light was green, as such I crossed the traffic light junction. Suddenly, I noticed a taxi (SHA3314A), which had been driving on the second lane from the right, filtered onto my lane in an attempt to make an illegal U-turn. As such, I could not stop my motorbike in time and subsequently collided with the right passenger door of the taxi. The collision caused me to fall off on the ground. The taxi stopped after the collision, however moved off and stopped by the roadside. The driver then alighted and approached me, accusing me of speeding. Three passers-by came to assist me and subsequently called for ambulance and traffic police. The taxi driver and myself had a statement recorded from traffic police, however they did not provide me any report number. Thereafter I exchanged particulars with the taxi driver and took photos of the taxi. I am lodging this report for record and insurance claims purposes.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20181219/2041

Police Station Of Origin:  
River Valley NPP  
4 Delta Avenue #01-02 SINGAPORE 161004  
Tel No: 1800-2789999

3 of 3

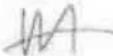
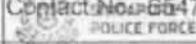
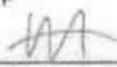
Report No. T/20181219/2041

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: E / Sgt 2 LAM YU FEI, DARYL 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 19/12/2018 12:31
Officer In Charge Of Case: TP / AEIT / SIANG YLTING, STEPHANIE Contact No: 65476414 SN 069 	Classification Of Case:
Authentication Stamp NP158  SIGNATURE	

**...CLAIM SUBFOLDER...(Pending for Survey Report)**

PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	07 Jan 2019 16:52 <a href="#">Edit Reg</a>		24 Dec 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>		<b>[Created by adjuster]</b>							
Insured:	-, Co. Reg. No.: -								
Main Claimant:	<b>MUHAMMAD FARIS BIN JUMAT</b> , ID: S9546910H								
Vehicle Reg. No.:	<b>FBF6093L</b>	Date of Loss:	18/12/2018 23:00 - :59 <b>[86 Months and 25 Days From LTA Reg Date (Man Yr)]</b>						
Claim Type:	<b>TP</b>	Policy/Cover Note No.:							
Vehicle Reg. No. (Insured):	<b>SHA3314A</b>	Policy No. (Claimant):							
		Excess:							
Repairer:	<b>GP MOTORING PTE LTD (HQ)</b> 282 Macpherson Road, 348607 Macpherson - Tel: 67464240								
Handling Insurer:	<b>India International Insurance Pte Ltd (HQ)</b> - Tel: 63476100 ... [Handled by <b>Pooi Chin Han Daniel</b> ]								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>XING GUO QIANG</b> ] ... <b>[Final Rpt due 04/01/2019]</b>								
<b>ASSOCIATED MAIL RECEIVED</b>		<a href="#">View All</a>	<a href="#">Compose Case Mail</a>						
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <input type="checkbox"/>		<a href="#">View All</a>	<a href="#">Search Tasks</a>	<a href="#">Create New Task</a>	<a href="#">Complete</a>				
<b>Due Date</b>	<b>Priority</b>	<b>Type</b>	<b>Task Group</b>	<b>Subject</b>	<b>Handler</b>	<b>Assigned By</b>	<b>Completed On</b>	<b>Created On</b>	<b>Done?</b>
No results.									

## Claim Documents

\*FBF6093L  
[SHA3314A]  
TP  
MUHAMMAD FARIS BIN JUMAT  
Dec 18 2018 11:00PM  
[-]  
GP MOTORING PTE LTD

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>			View <input type="button" value="View in Browser"/>
<b>Photos/Images</b>			3 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail Print
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2	26/12/18 09:36	General View	 Load JPG <input checked="" type="checkbox"/>
3	26/12/18 09:36	General View	 Load JPG <input checked="" type="checkbox"/>
4	26/12/18 09:36	General View	 Load JPG <input checked="" type="checkbox"/>
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37	26/12/18 09:36	General View	 Load JPG <input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	26/12/18 09:36	General View	 Load JPG	<input checked="" type="checkbox"/>
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Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	27/12/18 09:17	Singapore Accident Statement	 Load PDF	

## Documents Checklist

### DOCUMENTS CHECKLIST

[Reset](#)
[Save](#)
[Print](#)

There are no document checklists configured.

**Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**

**Show Remarks To:**  Handling Insurer

Note: Remarks are private unless you show it to other parties.

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

**VEHICLE DAMAGE INSPECTION REPORT**

Our File No: CS3/III18022972/GCD3E2

Date: 07/01/2019

REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

Claimant Vehicle No : FBF6093L

Insured Vehicle No : SHA3314A

Date of Loss: 18/12/2018

Nature of Claim: TP

Claim No: N/A

DESCRIPTION & IDENTIFICATION OF VEHICLEReg No: **FBF6093L**

Make &amp; Model: YAMAHA RXZ, 133cc (M)

Engine No: 5PV033732

Reg. Date: 23/09/2011 (Man. Year: 2010)

Chassis No: PMY5PV100A0033732

Colour: Blue

Odometer: 97902 km

Engine Capacity: 133 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): **Market Value/New Car Price**CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 80/80-18

Rear Tyre Size: 80/80-18

Front Left Side: Dunlop 5 mm

Rear Left Side: Dunlop 5 mm

Front Right Side: 0 mm

Rear Right Side: 0 mm

*The above values represent the remaining tyre treads depth*

<b>COST OF CLAIMS</b>	<b>Repairer's</b>	<b>Adjuster's</b>	<b>Difference</b>	<b>Diff %</b>
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

INSPECTION

Date of Assignment: 24/12/2018

Date Inspected: 24/12/2018 Inspected At: GP MOTORING PTE LTD (HQ)  
282 Macpherson Road  
Singapore 348607

Estimated Period of Repair: 3.0 days

Adjuster: XING GUO QIANG

Manager: CELINE FONG

*NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.*

- 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.

## REPAIR DETAILS

### Reference

**Part Source:** (Last Synchronised: 07 Jan 2019)

**Parts:** N/A YAMAHA RXZ 133cc (M) (Model not available in database)

**Labour:** Repairer's (Price-denominated Standard List)

**Print Code:** (Unsubmitted, no print-code for FBF6093L)

**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk \*.

### Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >