

ASSIGNMENT

REF: CS3/CTI17023735 / B.vd37

Meinen

Alfred Toh

ASSIGNMENT (Office)

CTI

28/12/2018

OD (H) WS / TP RES / OD RES / EVA / INV / MVTC

To Expect Vehicle No. FBK 4139B

Insured: SKH 8593E

at Workshop no. Eng Soon painting

To: 6760 6271

at 393 Woodlands Road, 677978

Police No. DMPCSN 3110871600

Chassis No. SNM17D07054C02

State of Veh

9/12/2017

CA REV REP REV 24 HRS

Time: 11:55am

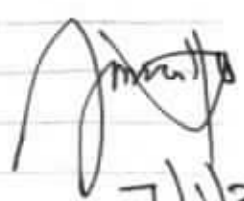
IN OUT

Time: Administration (X) Estimate

FBK 4139B

SKH 8593E

Dismantle: 21/12/2017



7/1/2019

11/1/19 Submit LS \$3850, 5 days (Red 7400, 65%)

Repair done 5

RECEIVED 11 JAN 2019

TGim
Lia

28/12/18

REF: CTL

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

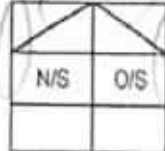
Claims No. _____

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 Soon: _____ Consistent?: Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Date / Time | Action / Instruction

Veh No: FBK 4139B Yr Regn: 15

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

Truck / Trailer or

Make: Honda C.C. 399Colour: White & Red A/C: Insured / Std / NI / NASp. Reading: No Display T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NC 41-405666

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or 81Brake: In order / Jammed / Leaked / Burnt orModi: NI / S/Rim / STD A/Rim orTyre Size: F: 120/60 ER17R: 160/60 ER17

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

TOYO / YOKO or Met Zeler

Front

Rear

R/Bal: 6 mm R/Bal: 6 mmL/Bal: 6 mm L/Bal: 6 mmD.O.A. 9/12/17 D.O.I. 14/12/2017Survey held at Eng SoonDes. of Damages Fr Rear O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

Range
* Repair Estimate: \$6,500 - \$8,000

* 5 days

6/6/2018

RECEIVED

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 5

1) _____

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

Survey Fee: 150

2) _____

Transportation:

Add Fee: ☐ : Site Insp (\$

) \$ + RS \$

☐ : Interview (\$

) Photos

☐ : Tech Invs (\$

) Colors

☐ : Weekend (\$

)

Report Format: PR2Lump Sum / I.B.I: (\$) 1

TOTAL

150

Nivitha (LKK Auto)

From: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Sent: Friday, 28 December 2018 12:35 PM
To: assignments@lkkauto.com; SUR
Cc: Ong Chin Kiat; 'Ambrose'; Chee So Chow; Brij Raj Rai; Rina; Shabbir; Alfred Toh
Subject: ACCIDENT INVOLVING SKH8593E & FBK4139B ON 9 DECEMBER 2017 (SNM17D07054C02/3)
Attachments: PRE REPAIR SURVEY REPORT ON FBK4139B.htm; SURVEY BY AUTOMAX SURVEY.pdf; SURVEY PHOTOS OF FBK4139B.pdf

Your Ref: CS/CTI17023735/SDE2
JL Ref: BRR/AL/7905/18
Our Ref: SNM17D07054C01/3 (SKH8593E)

Dear Sirs

We refer to the above matter.

Please assist to notify the attending surveyor to issue re-inspection report on FBK4139B based on M/s Automax Survey's report at your earliest convenience.

Aside to Chin Kiat, please assist to keep track on the matter.

Best Regards

Alfred Toh
Senior Executive
Claims Department
China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: +65 6389 6183
FAX: +65 6224 7478/6224 7175
Email: claimsdept@sg.cntaiping.com
alfred.toh@sg.cntaiping.com
www.sg.cntaiping.com



Disclaimer :

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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 CS/CTI17023735/SD3E2
No:
Date: 12/06/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3110871600
Claimant Vehicle No :	FBK4139B	Insured Vehicle No :	SKH8593E
Date of Loss:	09/12/2017	Nature of Claim:	TP
		Claim No:	SNM17D07054C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	FBK4139B	
Make & Model:	HONDA CB400, 399cc Super Four STD	Engine No: NC42E1203673
Reg. Date:	24/08/2015 (Man. Year: 2015)	Chassis No: NC421603666
Colour:	White/Red	Odometer: 0 km
Engine Capacity:	399 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:

CONDITION OF TYRES

Front Tyre Size:	120/60Z R17	Rear Tyre Size:	160/60Z R17
Front Left Side:	Metzeler 6 mm	Rear Left Side:	Metzeler 6 mm
Front Right Side:	0 mm	Rear Right Side:	0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
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
Nett Amount (S\$)	0.00	0.00	0.00

INSPECTION

Date of Assignment: 14/12/2017
 Date Inspected: 14/12/2017 Inspected At: Eng Soon Painting Services (HQ)
 393J WOODLANDS ROAD
 Singapore 677978
 Estimated Period of Repair: 5.0 days

Adjuster: Sebastian Yeang Wai Keen

Manager: Nivitha Govindasamy

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$6,800.00 - \$8,000.00

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 07 Jun 2018)	
Parts:	N/A	HONDA CB400 399cc Super Four STD (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)

Print Code:	LKK Auto Consultants Pte Ltd/FBK4139B/12/06/2018 09:13
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

LKK Auto Consultants Pte Ltd/FBK4139B/12/06/2018 09:13. Not valid without Reference section.

There are no new parts selected.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

LKK Auto Consultants Pte Ltd/FBK4139B/12/06/2018 09:13. Not valid without Reference section.

There are no labour items selected.

< END OF ESTIMATES >

AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road , #07-280, Singapore 470110
Mobile 9855 8879 Email automaxsurvey@gmail.com
Registration No 53110052J

Report Ref TP17120031

Date 23 MAY 2018

Koh ChenMing Rickson
c/o Eng Soon Painting SVC
Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677969

THIRD PARTY SURVEY

ACCIDENT OCCURED ON 09 Decemebr 2017

Workshop Name and Address

Eng Soon Painting SVC
Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677969

As per your instruction dated 13 December 2017 with regard to the above matter
We have carried out a physical inspection on the said FBK 4139 B
We enclosed herewith our report and findings as follows

1. VEHICLE PARTICULARS

Registration No FBK 4139 B
Model HONDA CB400 SUPER FOUR
Year / Capacity 2015 / 399 cc
Chassis No NC421603666

Engine No NC42E1203673
Mileage n a km
Colour Multi colour

2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>	<u>Rim</u>
FRONT O/S	80/90/R17	Bridgestone	7 00 mm	Sport
REAR O/S	80/90/R17	Bridgestone	7 00 mm	Sport
FRONT N/S				
REAR N/S				

AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road , #07-280, Singapore 470110
Mobile: 9855 6879 Email: automaxsurvey@gmail.com
Registration No: 53110062J

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the ALI portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair 30 working days to complete
5. In accordance to your instruction, we have Not Authorised repair to the vehicle and the survey done on a "Without Prejudice" basis. We hope that this report will be of assistance to you in dealing with the matter.
6. Should you discover any discrepancy in the report, please kindly notify us within 1 week, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle Number: FBK 4139 B

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$\$)	Our Revised Estimation (\$\$)
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List Items

1 set	Side mirror	damaged	\$ 170.00	\$ 170.00 BR✓
1 pc	Brake lever assembly	bent/distorted	\$ 206.78	\$ 206.78 NN X
1 pc	Brake lever kunckle	deformed	\$ 54.83	\$ 54.83 NN X
1 pc	Brake master cylinder assy	deformed	\$ 109.16	\$ 109.16 NN X
1 pc	Brake lever cable	grazed/distorted	\$ 208.40	\$ 208.40 NN X
2	Clutch lever assembly	bent/deformed	\$ 206.78	\$ 206.78 BT✓
1	Clutch lever kunckle	distorted	\$ 54.83	\$ 54.83 NN X
2 pcs	Balancer @ 25.00	grazed/deformed	\$ 100.00	\$ 100.00 CUT✓
2 pcs	Dual compound grip	grazed	\$ 53.60	\$ 53.60 CUT✓
1	Sport front footpeg	distorted	\$ 107.54	\$ 107.54 } NN X
1 set	Sport front footpeg mounts	dent/deformed	\$ 44.91	\$ 44.91 } NN X
1 pc	Adventure handle bar	bent/distorted	\$ 132.25	\$ 132.25 BT✓
1 pc	Handle bar holder	distorted	\$ 34.92	\$ 34.92 BT✓
1 pc	Handle bar bridge	damaged	\$ 92.80	\$ 92.80 NN X
1 pc	Switch assy combination & lock	malfunction	\$ 238.52	\$ 238.52 NN X
1 pc	Pressure shift sensor	shocked	\$ 284.04	\$ 284.04 NN X
1 pc	Switch assy (engine stop/start)	malfunction	\$ 57.54	\$ 57.54 CUT✓
1 pc	Switch assy (turn signal)	deformed	\$ 60.72	\$ 60.72 CUT✓
1 set	Bar end slider	distorted	\$ 268.25	\$ 268.25 CUT✓
1 pc	Spin on oil filter	dent/deformed	\$ 20.88	\$ 20.88 NN X
1 pc	Spark plug	damaged	\$ 12.00	\$ 12.00 NN X
1 set	Engine guard	deformed/distorted	\$ 278.00	\$ 278.00 BT✓
1 pc	Rear tyre hugger	distorted	\$ 174.95	\$ 174.95 NN X
1	Front fender	deformed/grazed	\$ 103.30	\$ 103.30 BR✓
1	Front fender extension	grazed/distorted	\$ 75.17	\$ 75.17 CUT✓
1	Passenger seat cowl	deformed/dent	\$ 195.69	\$ 195.69 CUT✓
1 pc	Fuel tank grp pads	missing	\$ 90.34	\$ 90.34 MIS✓
1	Side stand	distorted	\$ 102.50	\$ 102.50 NN X
1 pc	Front windshield	grazed/deformed	\$ 275.10	\$ 275.10 NN X
1 set	Handguards	dent/deformed	\$ 93.25	\$ 93.25 NN X
1 set	Sprocket & chain kit	distorted/misalign	\$ 205.32	\$ 205.32 NN X
1 pc	Fuel tank assy	dent/deformed	\$ 556.67	\$ 556.67 DD✓
1 pc	Headlamp unit	malfunction	\$ 222.60	\$ 222.60 NN X
2 pcs	Headlight front cover	grazed/deformed	\$ 68.00	\$ 68.00 CUT✓
1 set	Front fork assy	wrapped/distorted	\$ 815.00	\$ 815.00 BT✓
1 pc	Gear shift pedal	bent/distorted	\$ 20.50	\$ 20.50 NN X
1 pc	Brake pedal	bent/distorted	\$ 20.50	\$ 20.50 NN X
2 pcs	Rear fender cover	grazed/deformed	\$ 130.00	\$ 130.00 NN X
2 pcs	Rear shock absorber	distorted/misalign	\$ 583.00	\$ 583.00 NN X
2 pcs	Rear sub rod assy connecting	bent/distorted	\$ 150.00	\$ 150.00 BT✓
2 pcs	Rear shock absorber plate	dent/deformed	\$ 16.00	\$ 16.00 NN X
1 pc	Meter assy	malfunction	\$ 245.10	\$ 245.10 CUT✓
1 pc	Steering stem assy	bent/distorted	\$ 200.50	\$ 200.50 BT✓
1 pc	Swingarm assy	wrapped/distorted	\$ 548.65	\$ 548.65 NN X
1 pc	Rear tail lamp	malfunction	\$ 62.27	\$ 62.27 NN X

Vehicle Number FBK 4139 B

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$)	Our Revised Estimation (\$)
-----	-------------------	-----------	--------------------------	-----------------------------

List Items

2 pcs	Front signal lamp	grazed/deformed	\$ 65 00	\$ 65 00 BR ✓
1 set	Wire harness	cut/open circuit	\$ 411 47	\$ 411 47 R X
1 set	Frame assy	bent/distorted	\$ 318 60	\$ 318 60 R X
1 pc	Front brake caliper	malfunction	\$ 163 73	\$ 163.73 NN X
1 pc	Front brake caliper bracket	distorted/dent	\$ 108 50	\$ 108.50 NN X
1 pcs	Side cover	dent/distorted	\$ 45.00	\$ 45.00 SCR ✓

	Parts Sub-Total	\$ 8,863.44	\$ 8,863 44
Discount	10 00%	\$ 886 34	\$ 886 34
		\$ 7,977 10	\$ 7,977 10

Vehicle Number FBK 4139 B

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (\$)	Our Revised Estimation (\$)
-----	-------------------	-----------	--------------------------	-----------------------------

Special Nett Items

1 pcs	Number plate	Bent	\$ 90.00	\$ 90.00 BT ✓
1 pc	Box assy	Damaged	\$ 256 00	\$ 256.00 CUT ✓
2 blts	Fork oil	Necessary	\$ 30 00	\$ 30.00 NEC ✓
2 blts	Brake oil	Necessary	\$ 30 00	\$ 30.00 NEC ✓
1 pc	Box bracket	bent/distorted	\$ 120 00	\$ 120 00 BT ✓
1 pc	Radiator hose	cut/wraped	\$ 45 00	\$ 45 00 NN X
2 pcs	Horn assy	maulfunction	\$ 150 00	\$ 150.00 NN X
2 pcs	Brake pad	Damaged	\$ 90 00	\$ 90.00 NN X

Special Nett Sub-Total \$ 811 00 \$ 811.00

Spare Parts Total \$ 8,788 10 \$ 8,788.10

LABOUR COST

S/No	JOB DESCRIPTIONS	Workshop Estimation (\$)	Our Revised Estimation (\$)
	Spare Parts Total c/f	\$ 8,788 10	\$ 8 788 10
1	Towing charges (2x)	\$ 150 00	\$ 150 00 60 450
2	Labour charges	\$ 2,000 00	\$ 1,800 00 600 00
	Body frame repair charges (labour charges)	\$ 1,400 00	\$ 1,200 00 1150
	To putty, apply primer & spray-paint the affected areas	\$ 1,600 00	\$ 1,400 00 400 00
5	To apply rust-proofing on repaired/replaced panels	\$ 180 00	\$ 150 00 40 00
6	To remove/replace suspension and undercarriage parts	\$ 400 00	\$ 300 00 111X
7	To press in & out wheel bearing	\$ 180 00	\$ 150 00 111X
8	To conduct wheel alignment	\$ 150 00	\$ 120 00 60 00
9	To remove & replace fuel tank incl drainage	\$ 200 00	\$ 180 00 111X
	Total	\$ 14,848 10	\$ 14,058 10

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair of

\$ 11,250 00

Fong Kok Heng
Qualified Appraiser

Repair days # 5

150 00 8 10

TGLM

Vive

28/12/18

ENG SOON PAINTING SERVICES

Blk 4 Yew Tee Ind Est 393 - J
Woodlands Road
Singapore 677978
Tel: 6760 6271 Fax: 6764 6676

KOH CHENMING, RICKSON
BLK 802C KEAT HONG CLOSE
#13-61
SINGAPORE 683802

DATE: 23/05/18

DEAR SIRs

ACCIDENT DATE: 09/12/17
FINAL REPAIR BILL TO FBK 4139 B

LUMP SUM REPAIRS RECOMMENDED
BY THE SURVEYOR-----\$ 11,250.00

DOLLARS· ELEVEN THOUSAND, TWO HUNDRED AND FIFTY ONLY

[> Back to OneMotoring](#)

O.A.A. 9/12/2017
Bal: 7yrs 8.5mths

Enquire PARF/COE Rebate for Registered Vehicle**Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 4032D

Vehicle Details

Vehicle No.: FBK4139B
Vehicle to be Exported: No
Intended Deregistration Date: 09 Jan 2019
Vehicle Make: HONDA
Vehicle Model: CB400 SUPER FOUR STD MANUAL
Primary Colour: White
Manufacturing Year: 2015
Engine No.: NC42E1203673
Chassis No.: NC421603666
Maximum Power Output: -
Open Market Value: \$6,994.00
Original Registration Date: 24 Aug 2015
First Registration Date: 24 Aug 2015
Transfer Count: 1
Actual ARF Paid: \$1,050.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 23 Aug 2025 ✓
COE Category: D - Motorcycle
COE Period(Years): 10
QP Paid: \$6,112.00
COE Rebate Amount: \$4,046.00
Total Rebate Amount: \$4,046.00

\$4,685

The information contained herein is correct as at 07 Jan 2019

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 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 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	14/12/2017 11:16
Date Of Accident	09/12/2017 12:45
Exact Location Of Accident	JURONG EAST STREET 11
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK4139B
Insured/Policyholder	
Name Of Registered Owner	KOH CHENMING, RICKSON
NRIC No	S8434032D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98563780
Alternative Phone No	OFFICE-98563780
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400 SUPER FOUR STD MANUAL
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	5092304763
Cover Note Number	

Driver

Name of Driver	KOH CHENMING, RICKSON
NRIC No	S8434032D
Date Of Birth	18/10/1984
Occupation	INDOOR
Date Of Driving Pass	16/06/2017
Driving Experience	0 YEAR AND 5 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98563780
Fax Number	
Contact Number	OFFICE-98563780
Email Address	NOEMAIL

Address	BLK 802C KEAT HONG CLOSE #13-61
Postcode	683802
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	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	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SKH8593E
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	

Email Address

DETAILS OF INJURED PERSON 1

Name KOH CHENMING, RICKSON

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBK4139B

Were seat belts worn?

Was injured conveyed to hospital by ambulance? YES

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/TIN No.:

Sketch Plan #2

SKETCH PLAN

SEE ATTACHMENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

DECLARATION

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



Policyholder's Signature

Date & Time:

16 Dec 17



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

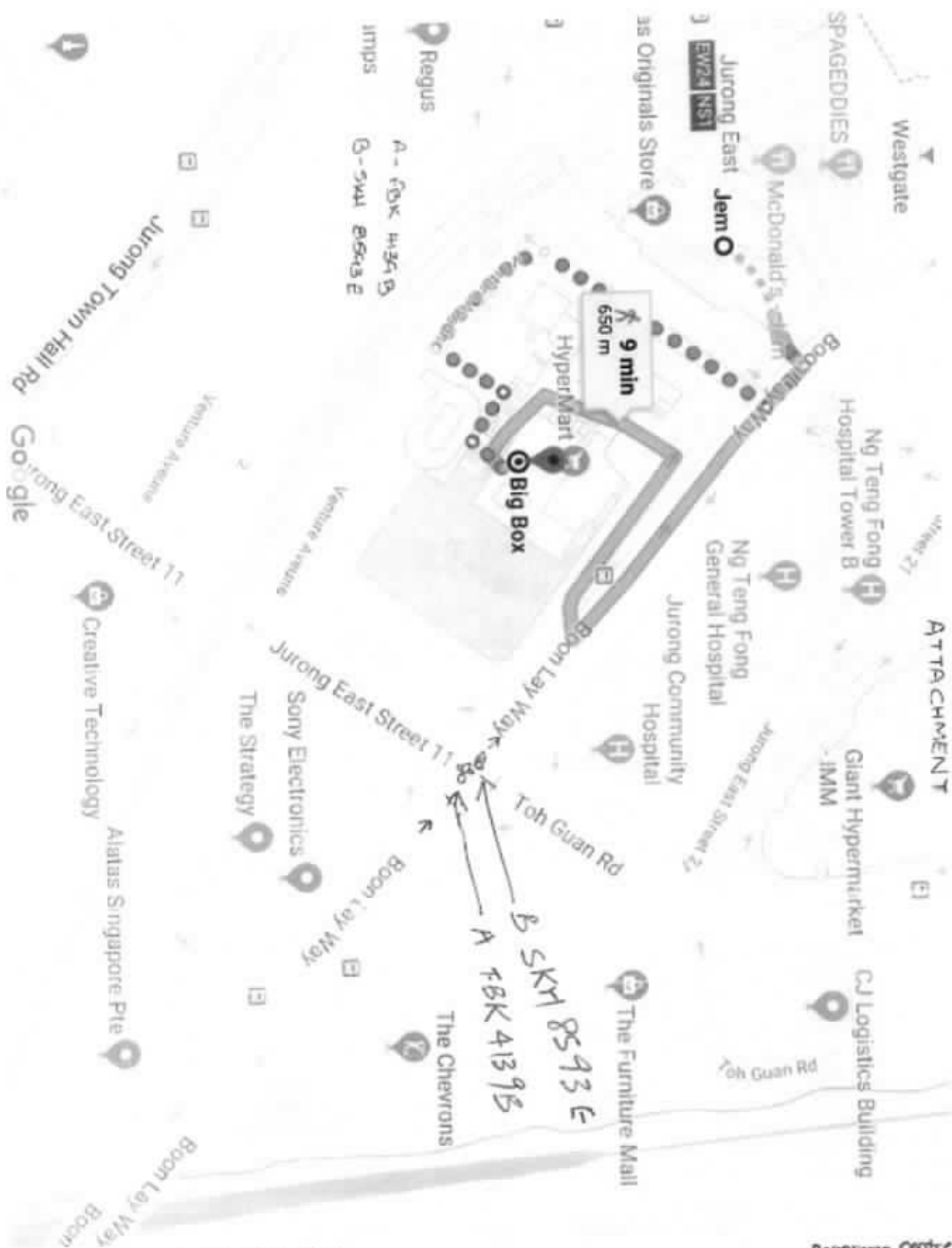


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #3



ATTACHMENT

Policyholder's Signature
 Koh Chee Ming
 584340320

Reporting Centre
 Personnel's Signature

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20171211/7003

1 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20171211/7003

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2017 14:12	Video Report No.:	Station Diary No.:
--	-------------------	--------------------

Informant's Particulars

Name of Informant: KOH CHIENMING, RICKSON			Address: APT BLK 0020 KEAT HOONG CLOSE #10-01 SINGAPORE 683802	
ID Type / ID No.: NRIC NO / S8434032D			Contact No.: Home/Office:	Mobile: 98563780
Nationality: SINGAPORE CITIZEN			Email: x-ahqii@hotmail.com	
Sex: Male	Age: 33	Date of Birth: 18/10/1984	Type of Informant: Rider	
Race: Chinese			Language: English	Institution / School Name:
Occupation: FIELD DIVISION			Driving Licence Information: Class: 2B,2A,3,4	
			Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/12/2017 12:45	Type of Location:
Location: JURONG EAST STREET 11				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK4139B	Motorcycle	HONDA	CB400 SUPER FOUR STD MANUAL	White		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK4139B	NTUC Income Insurance Co-Operative Limited	5092304763	30/06/2017	29/06/2018

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20171211/7003

2 of 3

Report No. T/20171211/7003

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408885
Tel No: 65470000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	KOH CHENMING, RICKSON	ID No.	S8434032D
Related Vehicle	FBK4139B (Motorcycle)	Contact No.	98563780
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	10/12/2017
No. of Days granted Medical Leave	07	Degree of Injury	Serious

Brief Details.

the last image that i remember was exiting jurong town hall other than that i am unable to recall what had happened and i was awake from accident i was already at hospital

Sketch Plan #6



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408855
Tel No: 65470000



T/20171211/7003

3 of 3

Report No: T/20171211/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
11/12/2017 14:12

Classification Of Case:

Authentication Stamp
12*168

Accident Photo



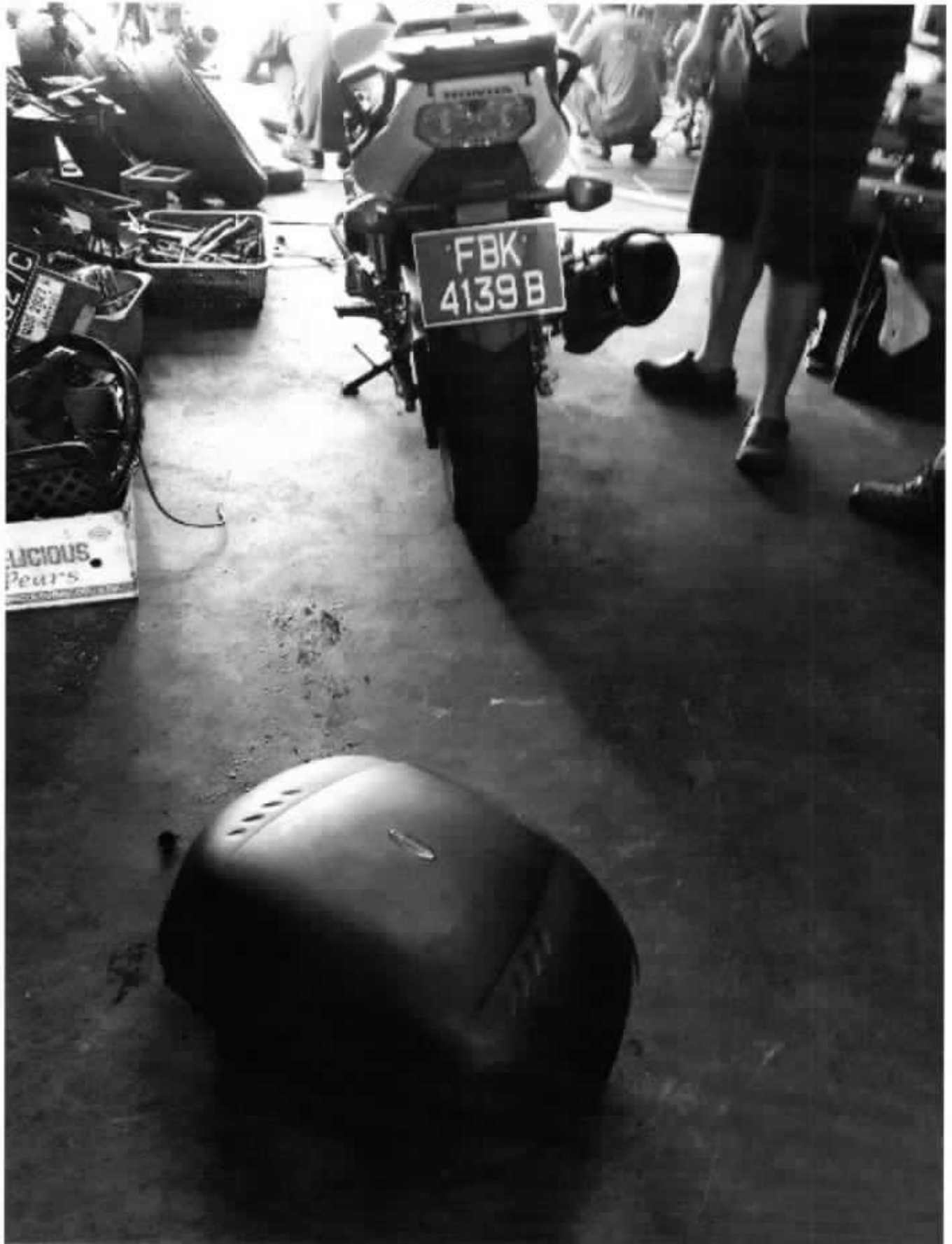
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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 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	11/12/2017 15:31
Date Of Accident	09/12/2017 13:00
Exact Location Of Accident	ALONG BOON LAY WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH8593E
Insured/Policyholder	
Name Of Registered Owner	WOO MIN HAO KENNETH
NRIC No	S8330539H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94793685
Alternative Phone No	OFFICE-94793685

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	-
Exact Purpose for which vehicle was being used at time of accident	
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3110871600
Cover Note Number	

Driver

Name of Driver	WOO MIN HAO KENNETH
NRIC No	S8330539H
Date Of Birth	04/10/1983
Occupation	INDOOR
Date Of Driving Pass	26/03/2003
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94793685
Fax Number	
Contact Number	OFFICE-94793685
Email Address	NOEMAIL

Address

Postcode

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 SIDE SWIPE

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? 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) 2

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name ORCHARD NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-7359999 - FAX NO: 67331934

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED POLICE REPORT.

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 FBK4139B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBK4139B

Were seat belts worn?

Was injured conveyed to hospital by ambulance? YES

Address

Postcode

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

SEE ATTACHED

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:

Driver's Signature

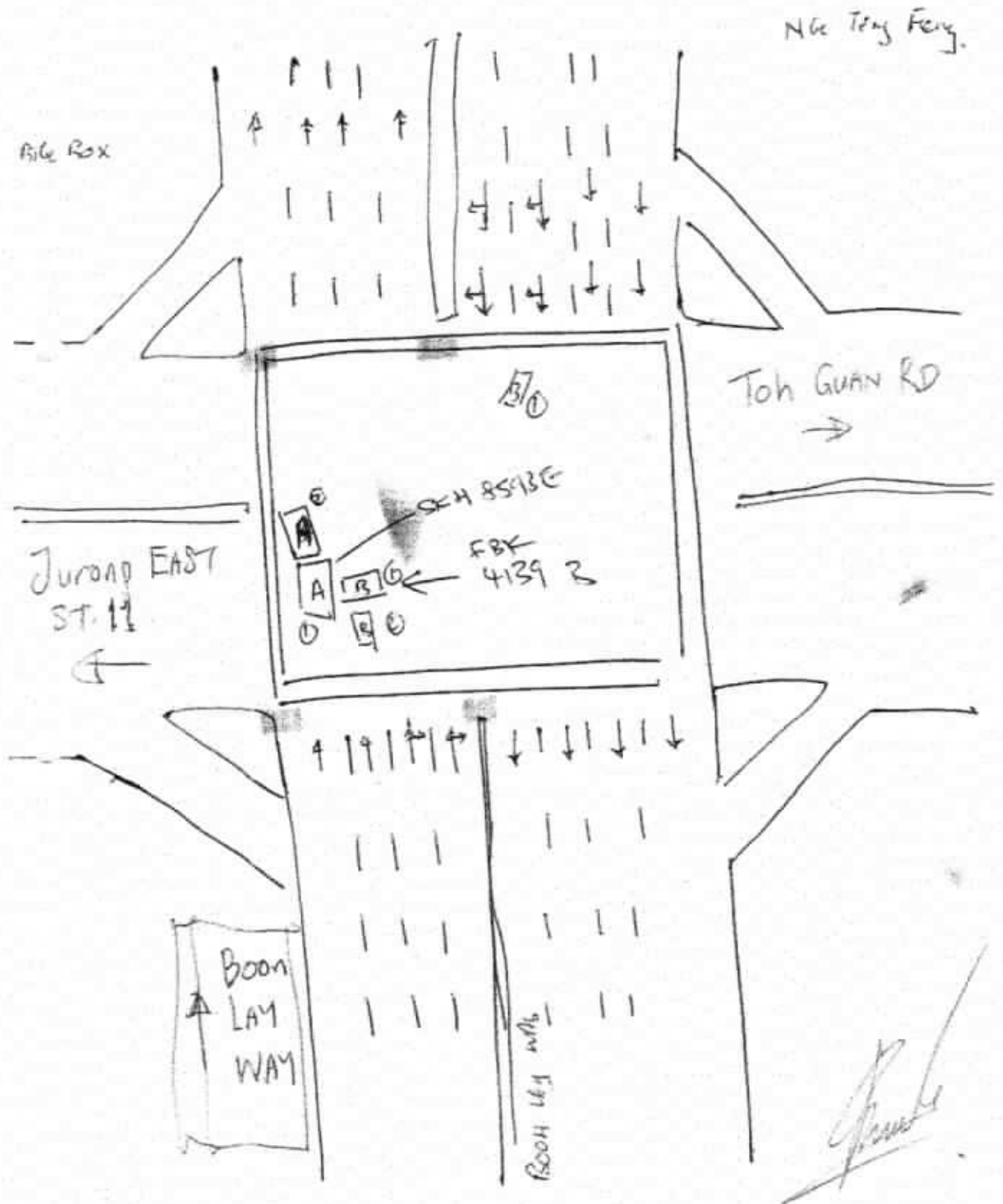
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





**SINGAPORE
POLICE FORCE**



T/20171211/2092

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

1 of 3

Report No. T/20171211/2092

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2017 14:27		Vide Report No.: D/20171209/0068		Station Diary No.: 92	
Informant's Particulars					
Name of Informant: WOO MIN HAO, KENNETH			Address: 87 TAMPINES AVENUE 1 #11-32 SINGAPORE 528688		
ID Type / ID No.: NRIC NO / S8330539H			Contact No.: Home/Office: Mobile: 94793685		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 04/10/1983	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Retail/Shop sales manager			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 09/12/2017 13:00	Type of Location: Straight Road
Location: BOON LAY WAY Along boon lay way towards jurong town hall near the junction of Jurong East St Lamp Post Number: 14				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK4139B	Motorcycle				Seriously Damaged	0
SKH8593E	Car	MERCEDES BENZ	C180K	White	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SKH8593E	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN31108716 00	08/11/2016	21/12/2017



**SINGAPORE
POLICE FORCE**



T/20171211/2092

2 of 3

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20171211/2092

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	CHEW CHEE WAY	ID No.	NIL
Related Vehicle	SKH8593E (Car)	Contact No.	90034316
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
Driver			
Name	WOO MIN HAO, KENNETH	ID No.	S8330539H
Related Vehicle	NIL	Contact No.	94793685
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 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 09/12/2017 at about 1301hrs while I was traveling along Boon Lay way towards Jurong town hall at lane 6, one motorcycle (FBK4139B) who was travelling along lane 5 had hit onto my front right passenger door. The impact caused the rider to fall.

I then stopped my vehicle to render assistance, and the witnesses at the scene called for police assistance. The rider was then conveyed by ambulance, and I was instructed by the traffic police office to lodge a report. My vehicle suffer some dents on the right passenger door, and was towed away at scene.



**SINGAPORE
POLICE FORCE**

Sketch Plan #6 Pg. 1



T/20171211/2092

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

3 of 3

Report No. T/20171211/2092

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 1 TAY MING WEI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

11/12/2017 14:27

Officer In Charge Of Case:

TP / GIT /

Classification Of Case:

Contact No.:

Authentication Stamp

NP168

Accident Sketch Plan Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD
S8330539H



WOO MIN HAO, KENNETH
(HU MINHAO, KENNETH)
胡氏豪
Race: CHINESE
Date of Birth: 04-10-1983 M
Place of Birth: SINGAPORE

REPUBLIC OF SINGAPORE
DRIVER'S LICENCE



WOO MIN HAO, KENNETH
(HU MINHAO, KENNETH)
Date of Birth: 04 Oct 1983
Issue Date: 08 Mar 2011
Barcode: 901944032C

Barcode: 8899285

88330539H

09-03-2011

87 TAMPINES AVENUE #11-02
SINGAPORE 528888

NRIC No: S8330539H 28/02/2014

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

EFFECTIVE DATE: 28 Mar 2003

Class 2: Motor Cars < 3000kg with not more than 7 passengers, excluding the driver, and other motor vehicles < 2500kg

JP 425A





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





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				
CHINA TAIPING INSURANCE (S) PTE LTD			Ref : CS3/CTI17023735/Bvd3e2-1	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909			Date : 14-01-2019	
			Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SKH 8593E	Veh. Inspected	FBK 4139B	
Policy No.	DMPCSN3110871600	Coverage (\$)	0.00	
Claim No.	SNM17D07054C02	Excess (\$)	0.00	
Assign From	ALFRED TOH	Assign Date	28/12/2018	
2. Vehicle Particulars & Condition				
Make & Model	HONDA CB400	c.c	399	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	NC421603666	Colour	WHITE / RED	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	120/60Z R17	METZELER	6 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	160/60Z R17	METZELER	6 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S, N/S BODY AND FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	09/12/2017	Inspection Date	14/12/2017	
Survey held at	ENG SOON PAINTING SVC BLK 4 YEW TEE IND EST 393 - J WOODLANDS ROAD SINGAPORE 677969			
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:		5 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 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBK 4139B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	SET SIDE MIRROR	BROKEN	170.00	170.00
1	BRAKE LEVER ASSEMBLY	NOT NECESSARY	206.78	-
1	BRAKE LEVER KNUCKLE	NOT NECESSARY	54.83	-
1	BRAKE MASTER CYLINDER ASSY	NOT NECESSARY	109.16	-
1	BRAKE LEVER CABLE	NOT NECESSARY	208.40	-
1	CLUTCH LEVER ASSEMBLY	BENT	206.78	87.00
1	CLUTCH LEVER KNUCKLE	NOT NECESSARY	54.83	-
2	BALANCER	CUT	100.00	50.00
2	DUAL COMPOUND GRIP	CUT	53.60	53.60
1	SET SPORT FRONT FOOTPEG	NOT NECESSARY	107.54	-
1	SET SPORT FRONT FOOTPEG MOUNTS	NOT NECESSARY	44.91	-
1	ADVENTURE HANDLE BAR	BENT	132.25	132.25
1	HANDLE BAR HOLDER	BENT	34.92	34.92
1	HANDLE BAR BRIDGE	NOT NECESSARY	92.80	-
1	SWITCH ASSY COMBINATION & LOCK	NOT NECESSARY	238.52	-
1	PRESSURE SHIFT SENSOR	NOT NECESSARY	284.04	-
1	SWITCH ASSY (ENGINE STOP / START)	CUT	57.54	57.54
1	SWITCH ASSY (TURN SIGNAL)	CUT	60.72	60.72
1	SET BAR END SLIDER	CUT	268.25	150.00
1	SPIN ON OIL FILTER	NOT NECESSARY	20.86	-
1	SPARK PLUG	NOT NECESSARY	12.00	-
1	SET ENGINE GUARD	BENT	278.00	220.00
1	REAR TYRE HUGGER	NOT NECESSARY	174.95	-
1	FRONT FENDER	BROKEN	103.30	103.30
1	FRONT FENDER EXTENSION	CUT	75.17	75.17
1	PASSENGER SEAT COWL	CUT	195.69	195.69
1	FUEL TANK GRIP PADS	MISSING	90.34	90.34
1	SIDE STAND	NOT NECESSARY	102.50	-
1	FRONT WINDSHIELD	NOT NECESSARY	275.10	-
1	SET HANDGUARDS	NOT NECESSARY	93.25	-
1	SET SPROCKET & CHAIN KIT	NOT NECESSARY	205.32	-

Report Ref No. CS3/CTI17023735/Bvd3e2-1



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.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FUEL TANK ASSY	DENTED	556.67	556.67
1	HEADLAMP UNIT	NOT NECESSARY	222.60	-
2	HEADLIGHT FORK ASSY	CUT	68.00	68.00
1	SET FRONT FORK ASSY	BENT	815.00	815.00
1	GEAR SHIFT PEDAL	NOT NECESSARY	20.50	-
1	BRAKE PEDAL	NOT NECESSARY	20.50	-
2	REAR FENDER COVER	NOT NECESSARY	130.00	-
2	REAR SHOCK ABSORBER	NOT NECESSARY	583.00	-
2	REAR SUB ROD ASSY CONNECTING	BENT	150.00	150.00
2	REAR SHOCK ABSORBER PLATE	NOT NECESSARY	16.00	-
1	METER ASSY	CUT	245.10	245.10
1	STEERING STEM ASSY	BENT	200.50	200.50
1	SWINGARM ASSY	NOT NECESSARY	548.65	-
1	REAR TAIL LAMP	NOT NECESSARY	62.27	-
2	FRONT SIGNAL LAMP	BROKEN	65.00	65.00
1	SET WIRE HARNESS	TO REPAIR SEE LABOUR	411.47	-
1	SET FRAME ASSY	TO REPAIR SEE LABOUR	318.60	-
1	FRONT BRAKE CALIPER	NOT NECESSARY	163.73	-
1	FRONT BRAKE CALIPER BRACKET	NOT NECESSARY	108.50	-
2	SIDE COVER	SCRATCHED	45.00	45.00
	LESS 10% DISCOUNT		-886.34	-362.58
			7,977.10	3,263.22
	SPECIAL NETT ITEMS			
2	NUMBER PLATE (SN)	BENT	90.00	30.00
1	BOX ASSY (SN)	CUT	256.00	180.00
2	BLTS FORK OIL (SN)	NECESSARY	30.00	30.00
2	BLTS BRAKE OIL (SN)	NECESSARY	30.00	30.00
1	BOX BRACKET (SN)	BENT	120.00	120.00
1	RADIATOR HOSE (SN)	NOT NECESSARY	45.00	-
2	HORN ASSY (SN)	NOT NECESSARY	150.00	-

Report Ref No. CS3/CT117023735/Bvd3e2-1

**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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	BRAKE PAD (SN)	NOT NECESSARY	90.00	-
			811.00	390.00
	LABOUR			
	TOWING CHARGES.		150.00	60.00
	LABOUR CHARGES. INCLUSIVE OF THE REPAIR OF WIRE HARNESS AND FRAME ASSY.		2,000.00	450.00
	BODY FRAME REPAIR CHARGES.		1,400.00	150.00
	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS.		1,600.00	400.00
	TO APPLY RUST-PROOFING ON REPAIRED / REPLACED PANELS.		180.00	40.00
	TO REMOVE / REPLACE SUSPENSION AND UNDERCARRIAGE PARTS.	NOT NECESSARY	400.00	-
	TO PRESS IN & OUT WHEEL BEARING.	NOT NECESSARY	180.00	-
	TO CONDUCT WHEEL ALIGNMENT.		150.00	60.00
	TO REMOVE & REPLACE FUEL TANK INCL DRAINAGE.	NOT NECESSARY	200.00	-
			6,260.00	1,160.00
GRAND TOTAL			15,048.10	4,813.22
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,850.00

Report Ref No. CS3/CTI17023735/Bvd3e2-1

LIM TEOW GUAN

Asst. Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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