

22/03/2002

ASS. REC. BY:

REF:

CS3/E6719001340/Gcd342

Special Instruction:

Surveyor: Chio Giang**ASSIGNMENT (Office)**From (Person): Siti of EGL Date/Time: 21012019 438pm

Estimated Cost: _____ Bill to: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: FBE 3021U Insured: SGL 900Gat Workshop m/s Keng Hock motor Tel: 9695 9080of 188 No. Chu KangPolicy No: _____ Claim No: SGL900G / RH / SA

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 17012019

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

22012019 @ call before go one hour.

H.O.D. Endorsement: _____

Date/Time: 21012019 546pm Person Contacted: Am Hock Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	<u>FBE 3021U - X</u>
	<u>SGL 900G - NBA / 17111300171149/Y</u>
	<u>PLA: 30-11-2018</u>

PRS

REF: E92

ASSIGNMENT

From: Date: 22012019

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:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No

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

Truck / Trailer or

Make:

Colour

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: ☒ M / S/Rim / STD A/Rim or

Tyre Size: F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

(1)

Date/Time, File Return to?

(2)

Report Format:

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

☐

Preli. Report

☐

Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Insp (\$)

☐

Weekend (\$)

Survey Fee:

Transportation

S + RS \$

Photos

Others

TOTAL

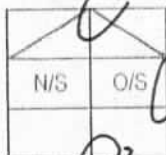
50

50

FBE 3021U
Keng Hock
198 No Chu Kang

Call 9695 9080 (Ah Hock)

before go one hour.



\$2500

Consistent? : Yes or No

Consistent? : Yes or No

3 days Res.: Yes or No

20 % 3 Val.: Yes or No

FBE 3021U 10 Feb 2016

SYM Jayride 200 C.C - 171

Silver A/C: Insured / Std / NI / NA

T/Radio: Insured / Std / NI / NA

RF GLF18WY9S002754

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: ☒ M / S/Rim / STD A/Rim or

Tyre Size: F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

\$2000 - \$3000

PRE

Catherine Chong (LKK Auto)

From: Siti Rahman <Siti.Rahman@ergo.com.sg>
Sent: Monday, 21 January, 2019 4:38 PM
To: admin-d@lkkauto.com
Cc: sur@lkkauto.com; Survey Report (ERGO Insurance Pte. Ltd.)
Subject: PRS IRO FBE3021U | OI : SGL900G | DOA: 17/01/19 | ERGO REF: SGL900G/RH/sa
Attachments: Notice of Accident (Your ref: please advise // Our ref: LWP/KHM/YJH/4183... (69.7 KB); OI SAS.PDF; TP SAS.PDF

Dear LKK,

With reference to the above matter,

We have rejected to their PRS list, please assist to conduct this survey request from Lawrence Lee & Co, their client's vehicle can be survey at the location as per stated in the letter attached.

Attached are the necessary documents for your further actions (Note: Reports not to be released to any Third Party).

Note: To survey on without prejudice basis and inform the repairer in writing, that you are require to conduct a post-repair inspection before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Kindly acknowledge receipt of this email.

NOTE: Please assist to quote our ref as the subject matter, when forwarding the Preliminary Reports / Survey Reports.

Thank you

Siti A'thikah
Claims Department

ERGO Insurance Pte. Ltd.

5 Temasek Boulevard, #04-05 Suntec Tower Five
Singapore 038985
DID: +65 6829 9170
Siti.Rahman@ergo.com.sg

ERGO

www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.



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From: sukmei@lawrencelee.com.sg [mailto:sukmei@lawrencelee.com.sg]
Sent: Monday, 21 January, 2019 4:23 PM
To: Siti Rahman
Cc: ERGO Insurance Pte. Ltd. (Claims Department)
Subject: RE: Notice of Accident (Your ref: please advise // Our ref: LWP/KHM/YJH/4183/19/sm) | ERGO REF: SGL900G/RH/sa

WITHOUT PREJUDICE

Dear Siti,

We refer to your email of even date.

Please be informed that our client objects to the motor surveyors proposed by you.

Our client proposes to use one of the 10 motor surveyors below to conduct the joint pre-repair survey as the single joint expert:

Jayson Liaw	Michael Ee
Sebastian Lim	Teo Liak Hoo
Dave Chang	Danny Ho
Francis Ng	Fong Kok Heng
Michael Yap	Dennis Yap

Kindly revert within two (2) working days by fax 6533 3689 or email to sukmei@lawrencelee.com.sg.

Regards,

Suk Mei (sukmei@lawrencelee.com.sg)
Secretary to Lee Wee Peng Lawrence
Lawrence Lee & Co (UEN: 53159236K)
133 New Bridge Road #13-05 Chinatown Point Singapore 059413
tel. 6533 3680 fax. 6533 3689 email. info@lawrencelee.com.sg

This email is confidential and may be subject to legal privilege. If you are not the intended recipient, please delete this email and its contents/attachments immediately.

From: Siti Rahman <Siti.Rahman@ergo.com.sg>
Sent: Monday, 21 January 2019 4:09 PM
To: sukmei@lawrencelee.com.sg
Cc: ERGO Insurance Pte. Ltd. (Claims Department) <claims@ergo.com.sg>
Subject: RE: Notice of Accident (Your ref: please advise // Our ref: LWP/KHM/YJH/4183/19/sm) | ERGO REF: SGL900G/RH/sa

WITHOUT PREJUDICE

Dear Sir,

We acknowledged receipt of your email below for the PRS request as below.

In compliance with "State Courts Practice Directions Amendment No.1 of 2016", do select an assessor from the list below.

1	AIS	Automobile Inspection Services Pte Ltd
2	FTA	FormTeam Consultancy Pte Ltd
3	IAS	Infiniti Appraisal Service
4	JPK	JP Knights Pte Ltd
5	LBS	L.B.S Auto Consultants Pte Ltd
6	LKK	LKK Auto Consultants Pte Ltd
7	PS	Priority Services
8	VAC	Vicom Ltd

- Your request for inspection does not have your client's cost of repair estimate, kindly forward a copy
- Your request for inspection does not have your client's GIA report, kindly forward a copy

Kindly let us have your reply on the selection of the surveyor.

Thank you

Siti A'thikah
Claims Department

ERGO Insurance Pte. Ltd.

5 Temasek Boulevard, #04-05 Suntec Tower Five
Singapore 038985
DID: +65 6829 9170
Siti.Rahman@ergo.com.sg

ERGO

www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.

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From: sukmei@lawrencelee.com.sg [<mailto:sukmei@lawrencelee.com.sg>]
Sent: Monday, 21 January, 2019 2:09 PM
To: ERGO Insurance Pte. Ltd. (Claims Department)

Subject: Notice of Accident (Your ref: please advise // Our ref: LWP/KHM/YJH/4183/19/sm)
Importance: High

Dear Sirs,

We refer to the above matter.

We enclose herewith our Notice of Accident (NOA) dated 17.01.19 for your attention.

Please be informed that we had faxed the NOA to you on 17.01.19.

Please revert to us within the stipulated timeline, i.e. by today @ 5.11pm.

Regards,

Suk Mei (sukmei@lawrencelee.com.sg)

Secretary to Lee Wee Peng Lawrence

Lawrence Lee & Co (UEN: 53159236K)

133 New Bridge Road #13-05 Chinatown Point Singapore 059413

tel. 6533 3680 fax. 6533 3689 email. info@lawrencelee.com.sg

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[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5287I
Vehicle Details	
Vehicle No.:	FBE3021U
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Jan 2019
Vehicle Make:	SYM
Vehicle Model:	JOYRIDE 200 A
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	KB205865
Chassis No.:	RFGLF18WY9S002754
Maximum Power Output:	-
Open Market Value:	\$2,679.00
Original Registration Date:	10 Feb 2010
First Registration Date:	10 Feb 2010
Transfer Count:	4
Actual ARF Paid:	\$402.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	09 Feb 2020
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$851.00
COE Rebate Amount:	\$89.00
Total Rebate Amount:	\$89.00

The information contained herein is correct as at 23 Jan 2019

OK



(<https://www.singaporebikes.com/bikemart/sg/>)

Get the app

Login

Sign up FREE

SYM Joyride 200

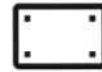
Price S\$3000.00



2009



67537km



FBE-8168-Y



Class 2B



CHAT

(MESSAGES/U/47747)

--	--

Description

COST SAVING PETROL SCOOTER BIKE. LOW FUEL
CONSUMPTION. LOTS OF SPACE FOR STORAGE.
INTERESTED PARTIES DO MSG ME
MOTORBIKE ROAD TAX PAID TILL SEPTEMBER.



COMES ATTACHED WITH STORAGE BOX.

TACIHI RAINCOAT BRQ, **Singapore BIKES.** COE EXPIRY 15 SEP 2020.



(<https://www.singaporebikes.com/bikemart/sg/>)

Get the app | Login | Sign up FREE

Specifications

General Info.

Bike Make	SYM
Bike Model	Joyride 200
Bike Class	Class 2B
Bike Type	Scooters
Transmission	Automatic
Engine Capacity	175 cc
Under Hire Purchase	No

Additional

First Owner	No
Effective Date Ownership	N/A



Additional



Original Reg. Date 16-09-2010
(<https://www.singaporebikes.com/bikemart/sg/>)

Bike Color Get the app Login Sign up FREE

COE Expiry Date 15-09-2020

Quota Premium (QP) 1221.00

Road Tax Expiry Date 15-09-2018

Mileage 67537km

Instalment Details N/A

Accessories
COMES ATTACHED WITH STORAGE BOX. TACIHI RAINCOAT BROWN COLOUR .

Seller Information



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	17/01/2019 14:35
Date Of Accident	16/01/2019 19:40
Exact Location Of Accident	SLIP ROAD TO CTE AYE FROM ANG MO KIO AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE3021U
Insured/Policyholder	
Name Of Registered Owner	AXTON YEO JUN HE
NRIC No	S9275287I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91689534
Alternative Phone No	OTHERS-91689534

Vehicle Particulars

Manufacturer	SYM
Model	JOYRIDE 200A
Exact Purpose for which vehicle was being used at time of accident	LEISURE
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
Fleet Policy	NO
Policy Number	5103057839
Cover Note Number	

Driver

Name of Driver	AXTON YEO JUN HE
NRIC No	S9275287I
Date Of Birth	30/07/1992
Occupation	INDOOR
Date Of Driving Pass	24/06/2015
Driving Experience	3 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91689534
Fax Number	
Contact Number	OTHERS-91689534
Email Address	NOEMAIL

Address	BLK 127 #06-61 SERANGOON NORTH AVENUE 1
Postcode	550127
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 - HEAD TO REAR
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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2849999 - FAX NO: 63431742
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Refer to 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	SGL900G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	UNKNOWN
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name AXTON YEO JUN HE

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBE3021U

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan Pg. 1

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 17-01-2019 / 14:31

Report No: MT/

D.O.A: 16-01-2019

Time: 19:40 hrs

Vehicle No: FBE3021U

Reporting Type:

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.

17-01-19 / 14:31

Policyholder's Signature / Date & Time

17-01-19 / 14:31

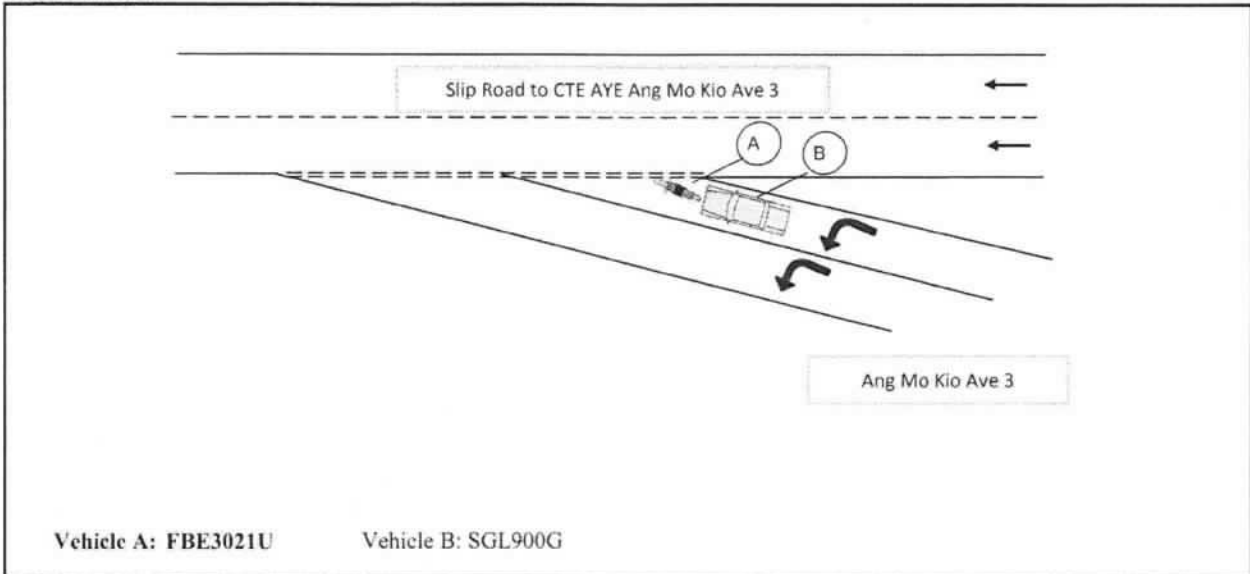
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Declaration

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


17-01-19 / 14:31

Policyholder's Signature / Date & Time

17-01-19 / 14:31

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

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

Police Report Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190117/2060

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

1 of 3

Report No. T/20190117/2060

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/01/2019 12:12	Vide Report No.:	Station Diary No.: 10
--	------------------	--------------------------

Informant's Particulars

Name of Informant: AXTON YEO JUN HE			Address: APT BLK 127 SERANGOON NORTH AVENUE 1 #06-61 SINGAPORE 550127		
ID Type / ID No.: NRIC NO / S92752871			Contact No.: Home/Office: Mobile: 91689534		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 26	Date of Birth: 30/07/1992	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: panda rider			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/01/2019 19:40	Type of Location: Straight Road
Location: Along Road 1 ANG MO KIO AVENUE 3 along the filter lane of ang mo kio avenue 3 towards CTE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE3021U		SYM	JOYRIDE 200 A	Silver		0
SGL900G						0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE3021U	NTUC Income Insurance Co-Operative Limited	5103057839	14/08/2018	13/08/2019

Police Report Pg. 2



**SINGAPORE
POLICE FORCE**



T/20190117/2060

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

2 of 3
Report No. T/20190117/2060

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AXTON YEO JUN HE	ID No.	S9275287I
Related Vehicle	FBE3021U	Contact No.	91689534
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 16.01.2019 at around 1940hrs, I was riding my bike FBE3021U travelling onto the filter lane of Ang Mo Kio avenue 3 towards CTE. As I was travelling, there was a give way line as such I stopped. After I stopped, there was an impact from my rear and caused me to fell on the road resulting an injury to my wrist and leg. I was conscious and able to stand up. I pushed my bike to the road shoulder and approached the driver. I took down the plate number (SGL900G) and took photo. We both agreed to settle via insurance. On 17.01.2019, I went to Stanford medical & surgery, I was given a total of 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20190117/2060

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

3 of 3

Report No. T/20190117/2060

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:
F /
Sgt 3 MUHAMMAD ASYRAF BIN ARIS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/01/2019 12:12

Officer In Charge Of Case:
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No.: 65476404

Classification Of Case:

Authentication Stamp
NP168



**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

ERGO INSURANCE PTE LTD

Ref: CS3/EGI19001340/Gcd3e2

5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER
FIVE SINGAPORE 038985

Date: 25-01-2019



Code: EGI

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SGL 900G	Veh. Inspected	FBE 3021U
Policy No.		Coverage (\$)	0.00
Claim No.	SGL900G/RH/sa	Excess (\$)	0.00
Assign From	SITI	Assign Date	21/01/2019

2. Vehicle Particulars & Condition

Make & Model	SYM JOYRIDE 200	c.c	171
Engine No.	HIDDEN	Year of Reg.	2010
Chassis No.	RFGLF18WY9S002754	Colour	SILVER
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	110/90-13	MICHELIN	4 mm
L/H Front Tyre			mm
R/H Rear Tyre	130/70-12	MICHELIN	4 mm
L/H Rear Tyre			mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.	
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5. General Information

Accident Date	16/01/2019	Inspect Date / Time	22/01/2019 (04:00 PM)
Survey held at	188 YION CHU KANG		
Repairer	KENG HOCK AUTO		

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) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000-\$3,000

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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Report Ref No. CS3/EGI19001340/Gcd3e2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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