

2/10/2009

ASS. REC. BY:

REF:

CS/EQI19002217/71vd3

Special Instruction:

Surveyor:

Taufikah

ASSIGNMENT (Office)

From (Person):

Joel Goh

of

EQI

Date/Time: 7/2/19 @ 5:03pm

Estimated Cost:

Bill to:

① TP/WS/TP RES/OD RES/EVA/INV/MVICS

To Inspect Vehicle No:

FBN19A

Insured:

at Workshop m/s:

Pan Euro Dikes

Tel:

9731 7133

of

21 Moonstone Lane #01-01

Policy No:

Claim No:

DM19HD00272-JG

Sum Insured:

Excess:

\$1250.00

Make of Veh:

D.O.A. 13/01/2019

(Client's Record)

CA / (REV) / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

5:06pm @ 7/2/19

Person Contacted:

Kin wah

Vehicle:

IN OUT

Date/Time

Action/Instruction (✓) Estimate

Repairer arrange on 11/2/19, as wksp is closed for CNY. They will only open back on 11-2/19.

FBN19A-X

13/2/19

Revert to Joel by email, pending repair cost from repairer

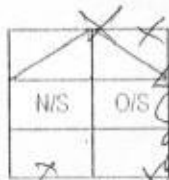
14/2/19

Taufikah said vehicle recommended T/L

REF: EQ1

INSURANCE

From: Date: 11/2/19
 Estimated Cost:
 () TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FBN19A
 at Workshop n/s: Pan Euro Bikes
 of: 21 Moonstone Lane #01-01
 Insured:
 Policy No:
 Claims No:
 Sum Insured: Excess: \$1250.00
 (Client's Record)
 Make of Veh:



(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.
 Bal. or Market Value: \$25K
 IDAC Accident Rpt: Consistent? : Yes or No
 GIA / PR. Seen: Consistent? : Yes or No
 Est. Repairs: days Res.: Yes or No
 Lum Sum: % 3 Val: Yes or No

CA / (REV) / REP. / 24 HRS
 Date: Person Contacted: Vehicle: IN / OUT

Veh No: FBN19A Yr Regn: 2018 June
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Triumph Street Triple RS - 765
 Colour: white A/C Insured / Std / NI / NA
 Sp. Reading: — T/Radio: Insured / Std / NI / NA
 Eng/No:
 C/No: SMTH017464 ZK 905396
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / STD Rim / STD A/Rim or
 Tyre Size: F: 120/70R17
 R: 180/55R17
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU (PIR) SUMI /
 TOYO / YOKO or

Front Rear
 R/Bal. 7 mm R/Bal. 7 mm
 L/Bal. mm L/Bal. mm
 D.O.A. D.O.I B/2/19
 Survey held at Pan Euro Bikes
 Des. of Damages: (Frt) (Rear) (O/S) (N/S) (UIC) (Rooftop) or

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

Date / Time Action / Instruction
 * New bike \$30K w/o insurance.

14/2/19 Informed Joel vehicle recommended TL by email
 14/2/19 Submit uneconomical TL - mv: \$25K (est) LTA: \$6549 NV: \$18,451
 Revised \$15,081.79 Chak: \$4729.30

RECEIVED 15 FEB 2019

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

1) 15/2 - typist

Report Format:
 Lump Sum / L.B.F. (\$)

Days Of Repair:
 Resurvey No. of Trip:

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

Survey Fee
 Transportation
 TOTAL

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Thursday, 14 February 2019 11:10 AM
To: 'eqiprs@eqinsurance.com.sg'; 'Joel Goh'
Cc: SUR
Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)
Attachments: FBN 19A PRELI ADVISED.pdf (INCL.SUPP).pdf

Dear Joel,

Please be informed that vehicle recommended Total Loss.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Veron Chen (LKKAUTO)
Sent: Wednesday, 13 February 2019 2:12 PM
To: 'eqiprs@eqinsurance.com.sg' <eqiprs@eqinsurance.com.sg>; 'Joel Goh' <joel.goh@eqinsurance.com.sg>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)

Dear Joel,

Enclosed preliminary revised (incl.supplementary) of vehicle FBN 19A
Date of survey: 11/2/2019
Number of days : 10 days

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We have Not authorise repair.

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Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)
Sent: Thursday, 7 February 2019 5:07 PM
To: 'Joel Goh' <joel.goh@eqinsurance.com.sg>; assignments@lkkauto.com>
Cc: 'PanEuroBikes' <paneurobikes@singnet.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed repairer arrange survey on 11/02/2019.



BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



From: Joel Goh [mailto:joel.goh@eqinsurance.com.sg]
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To: assignments <assignments@lkkauto.com>
Cc: PanEuroBikes <paneurobikes@singnet.com.sg>
Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)

Dear LKK

Please assist on the following OD assignment.
Survey and revert.
Excess: S\$1,250.00

Best Regards,

Joel Goh
Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6500 6772 | tel 65 6223 9433 ext 772 | fax 65 6223 4190
www.eqinsurance.com.sg

 A Member of Citystate



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify

From: PanEuroBikes [mailto:paneurobikes@singnet.com.sg]
Sent: Thursday, January 31, 2019 5:11 PM
To: Joel Goh
Subject: RE: Request for survey for FBN19A - OD Claim

Hi Joel,

Noted, and I have relayed the information to the client. He reiterates he indicated he is claiming his own insurance and he didn't notice this after getting the report, but he will check with MARS again.

Many thanks, & an advanced Happy Lunar New Year.

Best Regards,
Kin Wah
Pan Euro Bikes Pte Ltd
Tel : +65 6299-4929
Fax : +65 6299-4430
Mobil : +65 9731-7133, +65 8121-2173
Email : paneurobikes@singnet.com.sg

From: Joel Goh [<mailto:joel.goh@eqinsurance.com.sg>]
Sent: Thursday, January 31, 2019 3:54 PM
To: PanEuroBikes
Subject: RE: Request for survey for FBN19A - OD Claim

Dear Kin Wah

Based on our record, insured's statement indicated that he is reporting only.
Please assist arrange for insured to do the necessary addendum in order for us process this OD claim.

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Executive | Claims



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From: PanEuroBikes [<mailto:paneurobikes@singnet.com.sg>]
Sent: Wednesday, January 30, 2019 7:45 PM
To: EQI PRS
Subject: Request for survey for FBN 19A - OD Claim

Dear EQIPRS,

Kindly arrange for an OD Comprehensive insurance claim survey for vehicle FBN 19A,
please find estimate and GIA report attached.

Thank You, & Best Regards,

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Fax : +65 6299-4430
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Email : paneurobikes@singnet.com.sg



AVG

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www.avg.com

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Date of survey: 11/2/2019
Number of days : 10 days

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Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)

Dear Sir/Mdm,

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Please be informed repairer arrange survey on 11/02/2019.



BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

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Dear LKK

Please assist on the following OD assignment.

Survey and revert.

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Executive | Claims



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Many thanks, & an advanced Happy Lunar New Year.

Best Regards,

Kin Wah

Pan Euro Bikes Pte Ltd

Tel : +65 6299-4929

Fax : +65 6299-4430

Mobil : +65 9731-7133, +65 8121-2173

Email : paneurobikes@singnet.com.sg

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To: PanEuroBikes

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Dear Kin Wah

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Please assist arrange for insured to do the necessary addendum in order for us process this OD claim.

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Executive | Claims

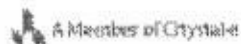


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To: EQI PRS

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Email : paneurobikes@singnet.com.sg



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www.avg.com



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: DM19HO00272-JG

Our ref: CS/EQI19002217/T1vd3

Date: 13/2/2019

The Motor Claims Department
M/s EQ INSURANCE COMPANY LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. FBN 19A

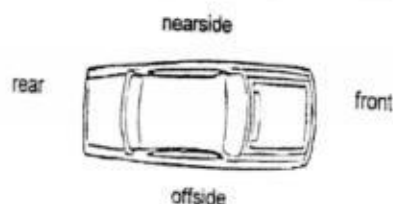
We thank you for your instruction on 7/2/2019

Please be informed that we had conducted the inspection of the above mentioned vehicle on 11/2/2019 at the premises of M/s PAN EURO BIKES PTE LTD and have the following to report:-

| | |
|--------------------------|--------------------------------------|
| Workshop Estimate Amount | : S\$20,231.09 (incl.supp \$1671.10) |
| Revised Estimate Amount | : S\$15,081.79 (incl.supp \$1671.10) |
| "Check" Items Amount | : S\$4,729.30 |
| Market Value | : S\$25,000.00 |
| LTA Reimbursement Value | : S\$6,549.00 |
| Nett Value | : S\$18,451.00 |

Description of Damage:

The vehicle sustained damages at the front, rear portion and o/s body.



Comments/Present Status:
Damages Consistent

Pending repair cost from repairer

Yours faithfully,

MOHAMAD TAUFIKH
M.MATAI, AMSAE-A
Automobile Assessor

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Wednesday, 13 February 2019 10:01 AM
To: 'eqiprs@eqinsurance.com.sg'; 'Joel Goh'
Cc: SUR
Subject: FW: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)
Attachments: FBN 19A PRELI ADVISED.pdf

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G.Nivitha | Admin

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Dear LKK

Please assist on the following OD assignment.
Survey and revert.
Excess: S\$1,250.00

Best Regards,

Joel Goh
Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6500 6772 | tel 65 6223 9433 ext 772 | fax 65 6223 4190
www.eqinsurance.com.sg

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AVG

This email has been checked for viruses by AVG antivirus software.

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Auto
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Company Registration No. 109607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

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Our ref: CS/EQI19002217/T1vd3

Date: 13/2/2019

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M/s EQ INSURANCE COMPANY LTD

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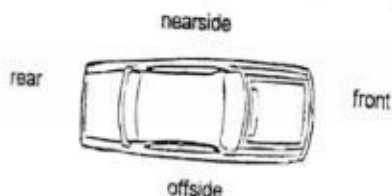
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Automobile Assessor

Nivitha (LKK Auto)

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Subject: RE: Request for survey for FBN19A - OD Claim (DM19HO00272-JG)
Attachments: CCF01302019.pdf; FBN19A (AMENDED).pdf

Dear LKK

Please assist on the following OD assignment.
Survey and revert.
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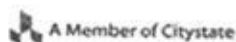
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Email : paneurobikes@singnet.com.sg

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|-------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 3292G |
| Vehicle Details | |
| Vehicle No.: | FBN19A |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 12 Feb 2019 |
| Vehicle Make: | TRIUMPH |
| Vehicle Model: | STREET TRIPLE RS |
| Primary Colour: | White |
| Manufacturing Year: | 2018 |
| Engine No.: | 4907307 |
| Chassis No.: | SMTHDA464ZK905396 |
| Maximum Power Output: | - |
| Open Market Value: | \$10,553.00 |
| Original Registration Date: | 21 Jun 2018 |
| First Registration Date: | 21 Jun 2018 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$3,803.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 20 Jun 2028 |
| COE Category: | D - Motorcycle |
| COE Period(Years): | 10 |
| QP Paid: | \$7,001.00 |
| COE Rebate Amount: | \$6,549.00 |
| Total Rebate Amount: | \$6,549.00 |

The information contained herein is correct as at 12 Feb 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 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 as aforesaid.

ACCIDENT STATEMENT

| | |
|----------------------------|------------------------------------|
| Date Of Report | 25/01/2019 10:55 |
| Date Of Accident | 13/01/2019 09:00 |
| Exact Location Of Accident | JALAN LADANG PEKAN - LAYANG LAYANG |
| Country/State of Loss | MALAYSIA/JOHOR DARUL TAKZIM |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | FBN19A |
| Insured/Policyholder | |
| Name Of Registered Owner | ANG HSING (HONG XIN) |
| NRIC No | S7503292G |
| Email Address | ANGHSING@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-96605622 |
| Alternative Phone No | OFFICE-96605622 |

Vehicle Particulars

| | |
|--|---------------|
| Manufacturer | TRIUMPH |
| Model | STREET TRIPLE |
| Exact Purpose for which vehicle was being used at time of accident | MOTORCYCLE |

| | |
|--|----------------|
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | REPORTING ONLY |
| Vehicle Category | MOTORCYCLE |

Insurance Company

| | |
|---------------------------|--------------------------|
| Name of Insurance Company | EQ INSURANCE COMPANY LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | DMMPHQ18-000453 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | ANG HSING (HONG XIN) |
| NRIC No | S7503292G |
| Date Of Birth | 19/01/1975 |
| Occupation | INDOOR |
| Date Of Driving Pass | 12/06/2013 |
| Driving Experience | 5 YEARS AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96605622 |
| Fax Number | |
| Contact Number | OFFICE-96605622 |
| Email Address | ANGHSING@GMAIL.COM |

Address NIL
 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? YES
 Foreign Vehicle Registration Number UNKNOWN (PRIVATE CAR)
 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 [OTHER] ANG MO KIO DIVISION HQ
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO: F/20190124/7030 (LODGED AT ANG MO KIO DIVISION HQ) I WENT RIDING ON MY MOTORBIKE (FBN19A) WITH 4 OTHER FRIENDS AND WE WERE HEADING TOWARDS OUR BREAKFAST POINT. I WAS APPROACHING A LEFT BEND ON A 2-WAY ROAD WHEN I SAW GRAVEL ON THE ROAD. AS A REFLEX ACTION, I BRAKED AND STRAIGHTENED THE BIKE. UNFORTUNATELY, A MAYALSIAN CAR WAS APPROACHING ON THE OTHER SIDE AND I HIT THE REAR RIGHT OF THAT VEHICLE CAUSING ME TO FALL OFF THE BIKE AND ROLLED TO THE SIDE OF THE ROAD. NO ONE ELSE WAS HURT AND AN AMBULANCE ARRIVED TO SEND ME TO THE KULAI HOSPITAL WHERE ARRANGEMENTS WERE MADE TO SEND ME BACK TO SINGAPORE FOR MEDICAL TREATMENT.

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
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver UNKNOWN DRIVER
 NRIC/Passport Number
 Contact Number
 Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

ANG HSING (HONG XIN)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBN19A

Were seat belts worn?

NO

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

Sketch Plan

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may void insurance coverage or repudiate policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Reports Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available application by interested parties.
7. By the acceptance of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA):
(I understand, acknowledge, agree and consent that:
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be permitted to collect, use, disclose and/or process my personal data (personal information set out in this form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers who have insured vehicles involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purposes of:
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
(ii) investigating the accident and/or my claims;
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
(iv) administering my claim (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 to the external cover of environmental packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
(b) all insurers who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
(c) my Personal Information may 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 situated outside of Singapore, for one or more of the above Purposes.

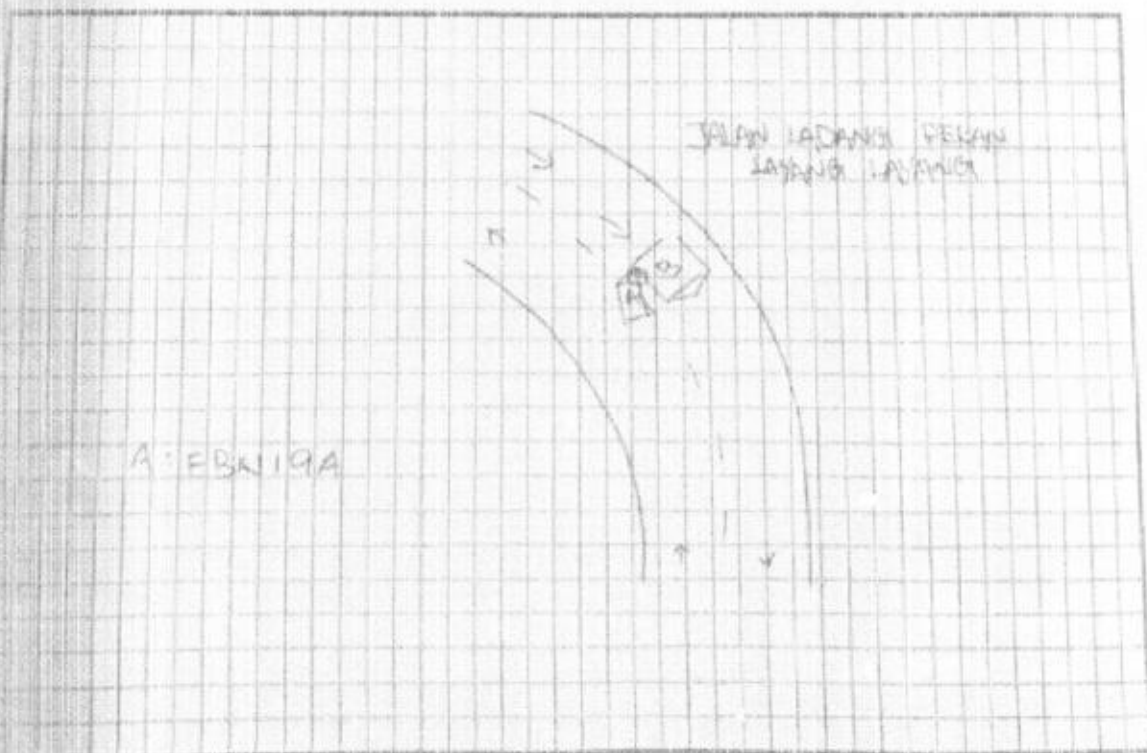
VERIFIED BY AJAX MARS
REPORTING OFFICER
JUN KEAT

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





**SINGAPORE
POLICE FORCE**



F/20190124/7030

1 of 2

POLICE REPORT (NP299)

Report No: F/20190124/7030

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-2180000

| | | | | | |
|--|--|---|-----------|-----------------------------|-----------------|
| Date/Time Report Made 24/01/2019 18:39 | | Vide Report No. | | Station Diary No. | |
| Name Of Informant ANG HSING | | Address 38 JALAN JAMBU AYER SINGAPORE 538788 | | | |
| ID Type / ID No. NRIC NO / S7503292G | | Contact No. Home/Office: Mobile: 96605522 | | | |
| Nationality SINGAPORE CITIZEN | | Email Address anghsing@gmail.com | | | |
| Occupation IT service manager | | Sex Male | Age 44 | Date of Birth 19/01/1975 | Race Chinese |
| Institution/School Name | | Language English | | | |
| Date/Time Of Incident 13/01/2019 09:00 - 13/01/2019 09:00 | | Location Of Incident Malaysia | | | |

Brief details:

I went riding on my motorbike (FBN19A) with 4 other friends and we were heading towards our breakfast point. I was approaching a left bend on a 2-way road when I saw gravel on the road. As a reflex action, I braked and straightened the bike. Unfortunately, a Malaysian car was approaching on the other side and I hit the rear right of that vehicle causing me to fall off the bike and rolled to the side of the road. No one else was hurt and an ambulance arrived to send me to the Kulai hospital where arrangements were made to send me back to Singapore for medical treatment.

I was eventually sent back via a private Malaysian ambulance to Mount Elizabeth Novena and was

| | |
|--|--|
| Signature Of Officer Recording The Report: Not applicable | Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter: Not applicable | Date/Time: 24/01/2019 18:39 |
| Officer In-Charge Of Case: | Classification Of Case: |

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20190124/7030

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190124/7030

warded until the 18th of January.

| | | | |
|-----------------------------------|---------------------|-----------|--------------|
| Subjects Involved | | | |
| Victim | | | |
| Person Name | ANG HSING | | |
| ID Type | NRIC NO | ID No | S7503292G |
| Gender | Male | Age | 44 |
| Race | Chinese | Language | English |
| Occupation | IT service manager | | Address Type |
| Address | 33 JALAN JAMBU AYER | Mobile No | 96605622 |
| | SINGAPORE 538788 | | |
| Is Informant A | Yes | | |
| Victim? | | | |
| Person Name ANG HSING (Informant) | | | |

| | |
|--|---|
| Signature Of Officer Recording The Report: | Signature Of Informant: |
| Not applicable | The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter: | Date/Time: |
| Not applicable | 24/01/2019 18:39 |
| Officer In-Charge Of Case: | Classification Of Case: |
| Authentication Stamp | |

PAN EURO BII

21 Moonstone Lane #01-01 Poh Le
Tel: 62994929 Fax: 62994430 Email:

Biz/GST Reg: 20

PAGE

TO: MOTOR CLAIMS DEPARTMENT
EQ INSURANCE CO. LTD

ESTIMATED COST OF REPAIRS TO TRIUMPH S

ENGINE NO : CHA2
VEHICLE NO : FBN 19A
INSURED : ANG HSING

| | | | |
|-----------|---------------------------------------|--------|-----|
| 1 PC | HANDLEBAR | 190.00 | bro |
| 1 PC | HANDLEBAR TOP CLAMP, SILVER | 59.00 | ? |
| 1 PC | STEERING BRIDGE, MATT BLACK | 402.00 | ? |
| 1 PC | IGNITION SWITCH/KEY ASSY | 668.00 | cut |
| 1 PC | BRAKE RESERVOIR ASSY | 149.00 | cut |
| 1 PC | BRACKET, BRAKE RESERVOIR | 22.00 | bt |
| 1 PC | HOSE, BRAKE RESERVOIR to MASTER PUM | 34.00 | ? |
| 1 PC | FRONT BRAKE MASTER PUMP | 430.00 | ? |
| 1 PC | FRONT BRAKE HOSE, STEEL BRAIDED | 77.00 | ? |
| 1 PC | RH SWITCH | 226.00 | cut |
| 1 PC | THOTTLE ACTUATOR | 245.00 | 2's |
| 1 PC | RH HANDLE GRIP/CRUISE SENSOR ACTUA | 95.00 | cut |
| 1 PC | RH MIRROR, BAR END | 22.00 | cut |
| 1 PC | RH BAR END, BLACK | 37.00 | ? |
| 1 PC | FRICTION RING COLLAR, RH MIRROR | 3.00 | cut |
| 1 PC | BOLT, RH BAR END | 95.00 | cut |
| 1 PC | LH MIRROR, BAR RND | 18.00 | cut |
| 1 PC | LH HANDLE GRIP | 22.00 | cut |
| 1 PC | LH BAR END, BLACK | 3.00 | cut |
| 1 PC | BOLT, LH BAR END | 698.00 | cut |
| 1 PC | METER ASSY | 57.00 | bt |
| 1 PC | STAY, BLACK, METER | 176.00 | bro |
| 1 PC | FRONT INSTRUMENTS SUB-FRAME | 115.00 | ms |
| 1 PC | FLYSCREEN, SMOKE | 398.00 | ms |
| 1 PC | FLY-COWL, CRYSTAL WHITE | 115.00 | ms |
| 1 PC | AIR INTAKE ENTRY COVER, FRONT COWLINC | 565.00 | cut |
| 1 PC | HEADLAMP ASSY | 460.00 | bt |
| 1 PC | STEERING STEM, BLACK | 95.00 | cut |
| 1 PC | STEERING CON/BEARINGS ASSY | 692.00 | bt |
| 1 PC | RH FRONT FORK ASSY | 7.00 | ? |
| 1 PC | REFLECTOR, RH FRONT FORK ASSY | 692.00 | bt |
| 1 PC | LH FRONT FORK ASSY | 235.00 | cut |
| 1 PC | FRONT MUDGUARD, CRYSTAL WHITE | 128.00 | ? |
| 1 PC | LH GARNISH, FRONT MUDGUARD, MATT | 128.00 | cut |
| 1 PC | RH GARNISH, FRONT MUDGUARD, MATT | 988.00 | bro |
| 1 PC | FRONT WHEEL RIM, PIN STRIPE | 95.00 | bt |
| 1 PC | FRONT WHEEL AXLE | 440.00 | bt |
| 1 PC | RH FRONT BRAKE DISC | 440.00 | ? |
| 1 PC | LH FRONT BRAKE DISC | 747.00 | ? |
| 1 PC | RH FRONT BRAKE CALIPER | 970.00 | bt |
| 1 PC | RADIATOR ASSY | 420.00 | ? |
| 1 PC | BRACKET/FAN, RADIATOR | 56.00 | ? |
| 1 PC | CLUTCH CABLE | 29.00 | bt |
| 1 PC | RADIATOR GUARD, RH, MATT BLACK | 69.00 | cut |
| 1 PC | RH FRONT SIGNAL, LED | 187.00 | cut |
| 1 PC | RADIATOR COWL, RH, CRYSTAL WHITE | 23.00 | cut |
| 1 PC | RH RADIATOR SHROUD, MATT | 17.00 | bt |
| 1 PC | BRACKET, RH RADIATOR SHROUD | 88.00 | dd |
| 1 PC | RH FRAME BAR, MATT BLACK | 175.00 | cut |
| 1 PC | RH BELLYPAN, CRYSTAL WHITE | 902.00 | |
| TOTAL C/F | | | |

PAN EURO BIKES PTE LTD

21 Moonstone Lane #01-01 Poh Leng Building Singapore 328462
Tel: 62994929 Fax: 62994430 Email: paneurobikes@singnet.com.sg

Biz/GST Reg: 200916151R

PAGE 2

TO: MOTOR CLAIMS DEPARTMENT
EQ INSURANCE CO. LTD

DATE: 30.01.2019

ESTIMATED COST OF REPAIRS TO TRIUMPH STREET TRIPLE RS

ENGINE NO : CHASSIS NO :
VEHICLE NO: FBN 19A ACCIDENT ON :
INSURED : ANG HSING

| | | TOTAL B/F | | |
|------|-------------------------------------|-----------|-----------|-----------|
| 1 PC | BRAKE PEDAL | \$ | 13,902.00 | 1 |
| 1 PC | RH FRONT FOOTREST | \$ | 135.00 | bt |
| 1 PC | SPRING, RH FRONT FOOTREST | \$ | 94.00 | bt |
| 1 PC | RH FRONT FOOTREST BRACKET | \$ | 6.00 | bt |
| 1 PC | EXHAUST MUFFLER | \$ | 134.00 | bt |
| 1 PC | RH PILLION FOOTREST | \$ | 1,265.00 | ddl |
| 1 PC | ROTATING PLATE, RH PILLION FOOTREST | \$ | 72.00 | cut |
| 1 PC | RH PILLION FOOTREST BRACKET | \$ | 5.00 | bt |
| 1 PC | SWINGARM, MATT BLACK | \$ | 192.00 | cut |
| 1 PC | REAR SUB FRAME ASSY | \$ | 1,365.00 | ? |
| 1 PC | PILLION GRAB BAR, RH, MATT BLACK | \$ | 785.00 | ? |
| 1 PC | PILLION GRAB BAR, LH, MATT BLACK | \$ | 94.00 | bt |
| 1 PC | TAILLAMP | \$ | 94.00 | cut |
| | | \$ | 225.00 | cut |
| | <i>can cover & gasket - cut</i> | TOTAL | \$ | 18,368.00 |
| | <i>Fuel tank ddl</i> | LESS 10% | \$ | 1,836.80 |
| | | SUB TOTAL | \$ | 16,531.20 |

NETT ITEMS:

| | | | | |
|-------|--|-------|----------|-----------|
| 4 PCS | BOLTS, HANDLE TOP CLAMP | \$ | 18.00 | ? |
| | BRAKE FLUID | \$ | 20.00 | ddl |
| 1 PC | ERP UNIT | \$ | 145.79 | cut |
| 1 PC | FRONT NO. PLATE, STICKER | \$ | 12.00 | ddl |
| 1 PC | FRONT TIRE, 120/70-17 PIRELLI DIABLO SUPERCORSA SP | \$ | 190.00 | part |
| 1 SET | FRONT WHEEL BEARINGS/SEALS | \$ | 55.00 | ddl |
| 1 SET | BRAKE PAD, RH FRONT | \$ | 98.00 | ? |
| | COOLANT, ENGINE ICE | \$ | 45.00 | ddl |
| 1 SET | CLIPS/GROMMETS/SCREWS, RH RADIATOR COWL | \$ | 15.00 | ddl |
| 1 SET | BEARINGS/BUSH/SEALS, SWINGARM | \$ | 125.00 | ? |
| 1 PC | REAR NO. PLATE, EMBOSSED | \$ | 25.00 | ddl |
| | TOWING | \$ | 80.00 | GO |
| | LABOUR CHARGE | \$ | 1,200.00 | 800 |
| | | TOTAL | \$ | 18,559.99 |

REMARKS:

Kindly send a surveyor down for an OD Comprehensive insurance claim.

Thank You.

Kin Wah: 9731-7133

LESS EXCESS

SUB TOTAL

ADD 7% GST

GRAND TOTAL

\$ 1,250.00

\$ 17,309.99

\$ 1,299.20

\$ 18,609.19

LKK Auto Consultants hence notify the Repairer of the following:

- To res: ... painting
- To dis: ... during resurvey
- Parts pr: ... information
- Th: par: ... "Without Prejudice" basis
- No: gal: ... (where)
- St: mer: ... resu: ... and
- is sub: ... uru: ... company

Acknowledged by:

Signature:

Date:

Tanpin 97495749

Not Advise

11/2/19 @ 345pm

Ex \$1250

* Resurvey new parts

sw @ lkkauto.com

10 days

SUPPLEMENTARY ITEMS FOR REPAIRS TO TRIUMPH STREET TRIPLE RS

ENGINE NO :

CHASSIS NO :

VEHICLE NO : FBN 194

ACCIDENT ON :

INSURED : ANG Hsing

1 PC

CAM COVER, ENGINE

1 PC

PETROL TANK, CRYSTAL WHITE

S ~~468.00~~

S ~~1,291.00~~

S ~~1759 468.00~~

TOTAL

LESS 10%

S ~~175.90 46.80~~

SUB TOTAL

1583.10 S ~~421.20~~

NETT ITEMS:

1 SET

CAM COVER GASKETS/SEALS

S ~~88.00~~

SUB TOTAL

S 509.20

ADD 7% GST

S 35.64

GRAND TOTAL

S 544.84

\$1671.10