## **DETAILS OF INJURED PERSON 1**

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBD9751L

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

## Accident Sketch Plan

		-		
		-12		
SCRIBE CIRCUMSTANCES OF	THE ACCIDENT			
				• • • • • • • • • • • • • • • • • • • •
press park	220001 4	20A1	1011.0	, 01
				1200Eu
				(38 mg
CLARATION le declare the foregoing particu	ars are true in every respect.			
de declare the foregoing particu	lars are true in every respect.			Turk )
	lars are true in every respect.			
de declare the foregoing particu	lars are true in every respect.  Driver's Signature		Reporting Centre	Personnel's Signature

Date & Time:

DANSET SAMPLEMENT OF THE

Page 4 of 14

NRIC/FIN No.:

#### Individual Statement

3

#### 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
- 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.
- 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.
- 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.
- 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)

Lunderstand, 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 :
  - 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.

#### police1



REPORT OF A TRAFFIC ACCIDENT

76

25/06/1941

Male

Race:

Chinese Occupation:

Retiree



Institution / School Name:

Date of Expiry:

Police Station Of Origin: Tampines N.P.C. 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

1 of 3 \_ Report No. T/20171109/2001

Date/Time Report Made: Vide Report No.: 09/11/2017 00:09 Station Diary No.: G/20171108/0240 Informant's Particulars Name of Informant: Address: YEOW YEW TECK APT BLK 159 TAMPINES STREET 12 #04-103 SINGAPORE 521159 ID Type / ID No... Contact No. NRIC NO / S21352031 Home/Office: Mobile: 94579788 Nationality: Email SINGAPORE CITIZEN Sex Age: Date of Birth

Type of Informant

Driving Licence Information:

Driver

Class.

Language:

General Information of the Accident Injury Type of Drink Date/Time of Type of Location: Attended by Police Accident: Drive: Accident No 08/11/2017 22:05 Location: TAMPINES AVENUE 1 TAMPINES AVENUE 5 Tampines ave 1 towards ave 5 Weather Road Surface: Road Speed Limit: Traffic Flow: Traffic Control Traffic Volume: Type of Collision: Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make	Model	10.1		
FBD9751L	Motorcycle	munu	Iviodei	Color	Condition	No of Passenger
	Motorcycle					0
SDJ4522J	Car	SUBARU	CUDADA	(200)		
	Gui	SUBARU	SUBARU XV 1.6I-S AWD CVT	Silver		0

Details of V	ehicle Insurance	THE RESERVE THE PARTY OF THE PA		
Vehicle No.	Insurance Company	I leave to	1	
	- Company	Insurance No	Effective	Expiry Date





T/20171109/2001

2 of 3

Police Station Of Origin: Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Report No. T/20171109/2001

Details of V	ehicle Insurance		The same of the sa	-
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDJ4522J	COLUMN AND ADDRESS OF THE PARTY	2100452439	22/02/2017	21/02/2018

Details of Perso	n Involved				1516	
Any Pedestrian Ir	rvolved: No		-			and NIA
No. of Pedestrian	s Injured: NIL		Use of Pec	destrian	Cross	ing: NA
Driver	CONTRACTOR OF THE PARTY OF THE	BENEADLE N				004050001
Name	YEOW YEW TECK	YEOW YEW TECK		ID No.		S2135203I
Related Vehicle	SDJ4522J (Car)			Conta	ct No.	94579788
Hospital/Clinic	NIL			Class Drivin Licent Expir	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
	ited Medical Leave	NIL	Degree o	f Injury	NIL	

#### Brief Details.

On 08/11/2017 at about 2205hrs,I was driving along Tampines ave 1 towards ave 5 left most lane and was reaching the junction, during that point of time, the traffic light was red light as such I slowed down my vehicle. While my vehicle was slowing down, I notice there was a motorbike on my left and somehow the front left side of my vehicle slightly collided onto the right side of the said motorbike afterwhich the motorbike skidded

I then stopped my vehicle and went down to assist the motorcyclist afterwhich called for ambulance and police. Ambulance then came to scene and conveyed the motorcyclist to hospital, police then came and interview me afterwhich game me a case card for me to lodge a report in regards to this accident.

#### police3





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No. 1800-5871999 3 of 3 Report No. T/20171109/2001

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.
G /
Sgt 2 NG JUNJIE, EDWIN

Signature Of Interpreter:
Not applicable

Date/Time:
09/11/2017 00:09

Classification Of Case:
TP / GIT /
SI YEO CHUN JIAN
Contact No.: 65476213

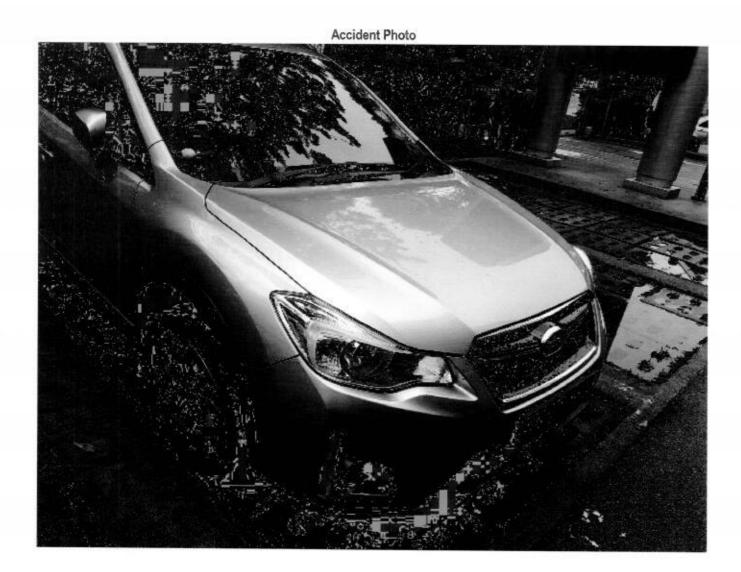
Authentication Stamp
NP168

Accident Photo





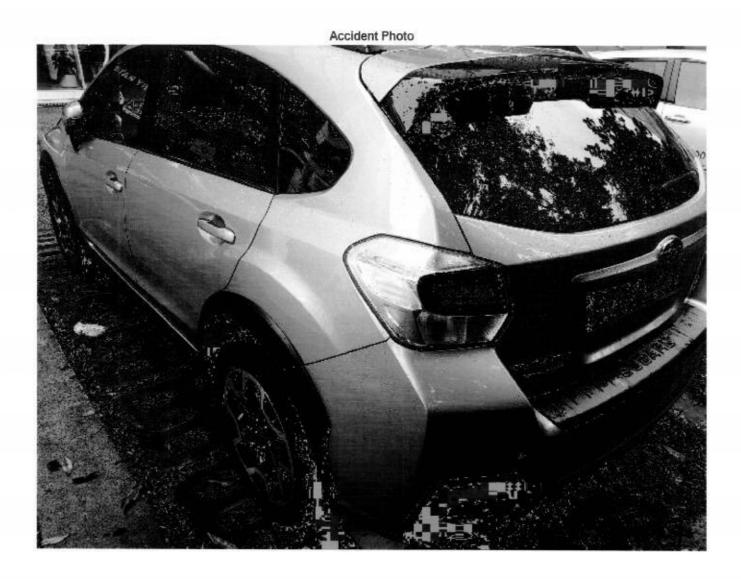






## Accident Photo







## SANFU MOTOR PTE LTD

67446010

Company Reg No.: 200612487G

1 Kaki Bukit Ave 6, #02-43, AutoBay@Kaki Bukit, Singapore 417883 Tel: (65) 6744 7753 Pax: (65) 6744 6010

# ASSESSMENT FOR REPAIR: FBD 9751L

Description		
f	87	X NN
Front Tyre	280	X NN
Front & Rear Rims	220	VIV X
Lower Stand		V ///
Left & Right Forks	360	200/
Fairings	420	V N/N
Front Fairing Bracket	,110	X NAI
Con Bearing .	56	- 07
Handle.Bar	60	/ 00
Balancer	38	101
Throttle Grip	18	X NN
Left & Right Signal Light	50	X NA
Headlight	58	× M/
Rear Box	260	/ CM
Box Bracket	85	C 0/1
Front No. Plate	· 18	X /V///
Brake Lever	. 18	X ////
Clutch Lever	18	X ///
Front Brake Pad	45	· × N
Mirror (1 Set)	45	X NI
Left & Right Footpeg	38	28
Footpeg Bracket	65	X M
Gear Pedal .	45	y ////
Exhaust Pipe Cover .	55	X WN
Towing Services	60	/30
Labour Cost .	300	1900

TOTAL 2,809

3 days

743 - 10% - 668.70 230 898.70

L/5-718.96 = 700

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

Case	Notified	Est Submitted	Adl Assigned	Adj Rpt		Adj Subr	nitted	Ins Authled	Status		
Main	03 Jan 2018 Edit Reg	Est Suomitte	29 Dec 2017 00:00 Edit Adj Rpt	S\$700.00 Edit Estim		<b>S\$700.0</b> View Rp			Pending for Survey Report Cancel Case		vey
	Main	F	Reference		Claim	Details		Docume	nts	5	how All
CLAIM SU	BFOLDER DI	ETAILS					[Create	d by adjuster]			
Insured:	YEOW YE	W TECK, Co. F	teg. No.: -								
Main Claimant:	МОНАМЕ	D ABDULLAH S	O MANSOOR H	ALLAJ, ID	: 5830	7358F	4				
Vehicle Reg	- FBD9/31L					e of Loss:	08/11/2 [ <b>96</b> Mon	8/11/2017 22:00 - :59 96 Months and 25 Days From LTA Reg Date (Man			
Claim Type	<b>TP</b> / 1468705889SG		68705889SG			cy/Cover e No.:	2100452	100452439 (Comprehensive)			
Vehicle Reg No. (Insured):	SDJ4522	J				cy No. aimant):					
(anourco).						ess:					
Repairer:	Sanfu Mo	otor Pte Ltd (Ka	iki Bukit) 1 Kaki	Bukit Ave 6,	#02-4	3 Autobay	@ Kaki B	ukit, 417883 Kak	Bukit - Tel	: 6744775	3
Handling Insurer:			nce Pte. Ltd. (Ex								
Adjuster:	LKK Auto	Consultants P	te Ltd (HQ) - Tel	: 6256-356	l [Ha	indled by	CHEN TS	JE YEE] [Fin	al Rpt du	e 12/01/	2018]
ASSOCIA	TED MAIL RI	ECEIVED							View All	Compose	Case Ma
• AIG_SG • AIG_SG	(04/01/2018) (04/01/2018)	: NO OI GIA RI	EPORT RT								
ALL ASS	OCIATED TA	sks <sup>=</sup>					View A	Search Tasks	Create !	New Task	Comple
Due Da	te Priority	Type Tas	sk Group Sub	ject Ha	ndler	Assign	ned By	Completed (	on Cr	eated On	Done

#### **Claim Documents**

\*FBD9751L (1468705889SG) [SDJ4522J] TP MOHAMED ABDULLAH S/O MANSOOR HALLAJ Nov 8 2017 10:10PM [YEOW YEW TECK] Sanfu Motor Pte Ltd

Upl	oad Documents   U	pload Photos	Compose New Letter	Upload Video	Upload Audio	View	View in Brow	vser ▼
Doc	umentation					1 per	page 🔻	•
No	Relabel/Reorde	r LKK Auto	o Consultants Pte Lt	d (HQ)			Thumbnail	Print
1	29/03/19 15:48	TP Singa	pore Accident State	ment		0	Load PDF	
2	29/03/19 15:48	OI Singa	pore Accident State	ment		0	Load PDF	

## **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Handling Insurer  Note: Remarks are private unless you show it to other parties.	

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

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park Singapore 408933

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS3/AIG17024731/ETD3S2-1

Date:

29/03/2019

REFERENCE

Handling Insurer:

AIG Asia Pacific Insurance Pte. Ltd.

Policy No:

2100452439

Claimant Vehicle

FBD9751L

Insured Vehicle No:

SDJ4522J

No : Date of Loss:

08/11/2017

Nature of Claim:

TP

Claim No: 1468705889SG

0 km

5YP301636

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

FBD9751L

Make & Model:

YAMAHA SPARK, 135cc 14/10/2009 (Man. Year: 2009)

14

Reg. Date: Colour:

Blue

Engine Capacity: Market Value/New Car Price: 135 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Good

Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No

Pre-accident Condition:

Engine No:

Odometer:

Chassis No:

Yes

CONDITION OF TYRES

Front Tyre Size:

Rear Tyre Size:

Front Left Side:

0 mm

Rear Left Side:

0 mm

Front Right Side:

0 mm

Rear Right Side:

0 mm

The above values represent the remaining tyre treads depth

Repaire	er's Adjus	ster's	Difference	Diff %
2,449	.00 6	68.70	1,780.30	72.69
C	.00	0.00	0.00	
360	.00 2	30.00	130.00	36.11
C	,00	0.00	0.00	
C	.00	0.00	0.00	
ross Total (S\$) 2,809	.00 8	98.70	1,910.30	68.01
verridden) (S\$)	7	00.00		
(S\$) 2,809	.00 7	00.00	2,109.00	75.08
7.00/7.00% (S\$) 196	.63	49.00	147.63	75.08
tt Amount (S\$) 3,005	5.63 7	49.00	2,256.63	75.08
7	2,449 0 360 0 0 ross Total (S\$) 2,809 verridden) (S\$) (S\$) 2,809	2,449.00 6 0.00 360.00 2 0.00 0.00 0.00 8 verridden) (S\$) 2,809.00 7 (S\$) 2,809.00 7 0.00/7.00% (S\$) 196.63	2,449.00 668.70 0.00 0.00 360.00 230.00 0.00 0.00 0.00 0.00 0.00 0.00  ross Total (\$\$) 2,809.00 898.70 verridden) (\$\$) 700.00 (\$\$) 2,809.00 700.00 0.00/7.00% (\$\$) 196.63 49.00	2,449.00 668.70 1,780.30 0.00 0.00 0.00 360.00 230.00 130.00 0.00

INSPECTION

Date of Assignment:

Date Inspected:

29/12/2017

29/12/2017 Inspected At:

Sanfu Motor Pte Ltd (Kaki Bukit)

1 Kaki Bukit Ave 6, #02-43 Autobay @ Kaki Bukit

Singapore 417883

Estimated Period of Repair:

3.0 days

Adjuster: CHEN TSUE YEE

Manager:

DENISE TAY KWEE CHENG

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 https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen\_printrpt&caseid=671421&extid=260913&CFID=50526300&C... 1/5

any other liability under any other circumstances is hereby expressly excluded.

NOTE: COR SUBJECT TO REVIEW UPON ADDITIONAL PHOTOGRAPHS PROVIDED

# REPAIR DETAILS

	Reco	mm	an	do	d F	ar	te
Г	CECO	IIIIII	len	ue	uг	al	LO

No.	Qty Part No.	Particulars	Condition	Repairer's	Amount
1	1	*FRONT TYRE	Not Necessary	87.00 F	*- FL
2	1	*FRONT & REAR RIMS	Not Necessary	280.00 F	*-FL
3	1	*LOWER STAND	Not Necessary	220.00 F	*- FL
4	1	*LEFT & RIGHT FORKS	Not Necessary	360.00 F	*- FL
5	1	*FAIRINGS	Cut	420.00 F	*300,00 FL
6	1	*FRONT FAIRING BRACKET	Not Necessary	110.00 F	*- FL
7	1	*CON BEARING	Not Necessary	56.00 F	*- FL
8	1	*HANDLE BAR	Bent	60.00 F	*60.00 FL
9	1	*BALANCER	Cut	38.00 F	*38.00 FL
10	1	*THROTTLE GRIP	Not Necessary	18.00 F	*- FL
11	1	*LEFT & RIGHT SIGNAL LIGHT	Not Necessary	50.00 F	*- FL
12	1	*HEADLIGHT	Not Necessary	58.00 F	*- FL
13	1	*REAR BOX	Cut	260,00 F	*260.00 FL
14	1	*BOX BRACKET	Bent	85.00 F	*85.00 FL
15	1	*FRONT NO. PLATE	Not Necessary	18.00 F	*- FL
16	1	*BRAKE LEVER	Not Necessary	18.00 F	*- FL
17	1	*CLUTCH LEVER	Not Necessary	18.00 F	*- FL
18	1	*FRONT BRAKE PAD	Not Necessary	45.00 F	*- FL
19	1	*SET MIRROR	Not Necessary	45.00 F	*- FL
20	1	*LEFT & RIGHT FOOTPEG	Not Necessary	38.00 F	*-FL
21	1	*FOOTPEG BRACKET	Not Necessary	65.00 F	*- FL
22	1	*GEAR PEDAL	Not Necessary	45.00 F	*- FL
23	1	*EXHAUST PIPE COVER	Not Necessary	55.00 F	*- FL
F=Fr	anchise part, L=ListIte	mDisc.		are with a server of	
			Sub Total (S\$)	2,449.00	743.00
		- List Item Disco	unt on L Items 0.00/10.00% (S\$)	0.00	74.30
			Total Parts (S\$)	2,449.00	668.70

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TOWING SERVICES	New	60.00	30.00
2	LABOUR COST	New	300.00	200.00
		Gross Labour Cost (S\$)	360.00	230.00
	Repor	t was unsubmitted during this print-out.		

< END OF ESTIMATES >