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Inquire Transfer Fee			
Vehicle Details			
Vehicle No. :	FBN1494D		
Vehicle Type :	P01 - Passenger Scooter		
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	YАМАНА		
Vehicle Model:	NMAX155 ABS		
Chassis No.:	MH3SG431000007479		
Propellant:	Petrol	***************************************	
Engine No. :	G3H6E0009679		
Engine Capacity :	155 cc		
Maximum Power Output:	-		***************************************
Maximum Laden Weight:	295 kg		
Unladen Weight :	128 kg		***************************************
Year Of Manufacture :	2018		ermen er en en en er en
Original Registration Date :	27 Jul 2018		
Lifespan Expiry Date:	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$6,189.00		
COE Expiry Date :	26 Jul 2028		
Road Tax Expiry Date :	26 Jul 2019		
Inspection Due Date :	26 Jul 2021		
Intended Transfer Date :	10 Apr 2019		anna a cara an ang ang ang ang ang ang ang ang ang
CO2 Emission :	•		
CO Emission :	_		
HC Emission :	-		
NOx Emission:	-		
PM Emission:	_		жини и нами (доли и нами и на поделения дольку двер намед (т. т. д. г. г. д
Late renewal fee(s) will be impos	sed if road tax / lay up has expired. Please use Enqu	uire Road Tax Payable for fee(s) pay	able.
Road tax, including Over Payme Amount Payable	nt (if any), of a vehicle will follow the vehicle to the	new registered owner when its own	ership is being transferred.
	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(S\$)	(S\$)
Transfer Fee :	25.00	_	25,00
Total Amount Payable:			25.00

You may print this page for reference.

OK Print



QUOTATION

Customer:

NO.: 33917

INDIA INTERNATIONAL INSURANCE P.L.

64 CECIL STREET #04-00 & #06-00 **IOB BUILDING** SINGAPORE 049711

DATE

: 01/04/2019

CLAIM NO. : 11307

POLICY NO. : AVFMSB0000651800

FROM

: RAYMOND

VEHICLE NO.

: FBN1494D

MAKE/MODEL

: YAM / NMAX155 ABS

(Page 1 of 2)

<u>S/N</u>	Description	<u>Action</u>	<u>Qty</u>	Unit Price	<u>Amount</u>
1	BELLY PAN P/N: 58094	REPLACE	1.00	\$35.00	35.00
2	BOX FILTER AIR OUTER P/N: 58141	REPLACE	1.00	\$18.00	18.00
3	BOX FILTER AIR OUTER FRONT P/N: 58164	REPLACE	1.00	\$15.00	15.00
ļ	COVER CLUTCH OUTER P/N: 58147	REPLACE	1.00	\$68.00	68.00
5	COVER SIDE CENTRE LH (WHITE) P/N: 58097	REPLACE	1.00	\$30.00	30.00
3	DUCT FILTER AIR	REPLACE	1.00	\$8.00	8.00
,	FILTER AIR P/N: 58151	REPLACE	1.00	\$28.00	28.00
3	GASKET FILTER AIR	REPLACE	2.00	\$4.00	8.00
Ð	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.	Supply/Install	2.00	\$35.00	70.00
10	PIPE THROTTLE BODY	REPLACE	1.00	\$15.00	15.00
11	TRANSPORT CHARGES P/N: 07169 - FOR COLLECTION OF ACCIDENT BIKE AND DELIVER BACK TO OUTLET ONCE REPAIR DONE.	/ER	2.00	\$35.00	70.00
		B TOTAL T @ 7 %			\$365.00 \$25.55



S/N Description Action Qty Unit Price Amount

GRAND TOTAL

\$390.55

50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

Acknowledge & Accepted By

BAN HOCK HIN CO PTE LTD



RAYMOND

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.





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 witholding 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	21/03/2019 13:30
Date Of Accident	21/03/2019 10:20
Exact Location Of Accident	MARINA VIEW LINK AND MARINA BOULEVARD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBN1494D
Insured/Policyholder	
Name Of Registered Owner	BAN HOCK HIN COMPANY PRIVATE LIMITED
Co Reg No	197000288K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62816520
Vehicle Particulars	grand film i spile og en standig filmennen en stall film filmen filmen film film. Standig filmen som som standig film film film film film film film film
Manufacturer	YAMAHA
Model	NMAX155 ABS
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	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	AVFMSB0000651800
Cover Note Number	

Driver

Name of Driver MOHD NAJIB BIN OMAR

 NRIC No
 G2914882T

 Date Of Birth
 01/04/1975

 Occupation
 OUTDOOR

 Date Of Driving Pass
 12/06/2018

Driving Experience 0 YEAR AND 9 MONTH

Gender MALE

Mobile Number (LOCAL) +65-98955543

Fax Number

Contact Number

EMail Address NOEMAIL

Address NIL

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

-

2

NO

NO

NO

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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Gircumstances of Accident

I (FBN1494D) was turning right to marina boulevard, from marina view link, slowing down, when suddenly a taxi (SHA1652L) hit me from the back. The front of the taxi make contact with the rear left side of my bike. Slight injury to me.

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 SHA1652L

Vehicle Make/Model/Colour HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR / BLUE

Details Of Properties

Vehicle Category TAXI

Name of Driver NG KHOON KAM
NRIC/Passport Number S0097287H
Contact Number 90227539

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name MOHD NAJIB BIN OMAR

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

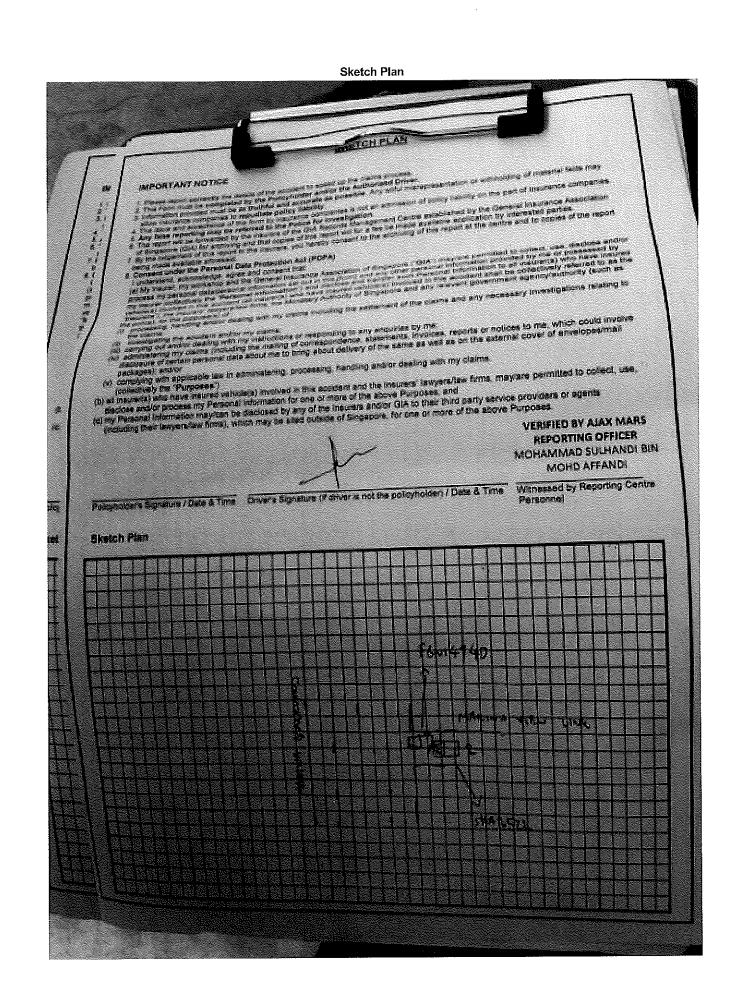
Address

Postcode

FBN1494D

NO

NO



Common Statement Pg. 1

ACCIDENT STATEMENT (2000 characters)

	na boulevard, from marina view link, slowing L) hit me from the back. The front of the taxi ny bike. Slight injury to me.
Taxì Voucher No.:	
DECLARATION We declare that the above particulars & information prov	ided above are true in every aspect
VERIFIED BY AJAX MARS REPORTING OFFICER - MOHAMMAD SULHANDI BIN MOH AFFANDI	
MARS Officer	Registered Owner or Driver's Signature
lob Complete Date/Time	Date/Time:
21 March 2019 at 12:22 PM	21 March 2019 at 12:22 PM

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Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

09 Apr 2019 / 14:52:25

Receipt Date/Time: 09 Apr 2019 / 14:52:25

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190409-001888

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHA1652L As at 21 Mar 2019/10:20:00 Insurance Co: INDIA INT'L INS PTE LTD 1 Insurance Enquiry - SHA1652L				
Enquiry Fee 20190409145040911660		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20190409145111900	Direct Debit: eNE (Internet Banking		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF

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Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
SHA1652L	21 Mar 2019 / 10:20:00	INDIA INT'L INS PTE LTD

Print

ОК

Save as PDF