

ASS. REC. BY:

REF: CS/PC1 1900 6797/UTd302

Special Instruction:

Surveyor: MARCUS

ASSIGNMENT (Office)

CWS

From (Person): Hunny Kao

of FC1

Date/Time: 16.4.19 3.29 p.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: FZ 4120 C

Insured: SHC 0397U

at Workshop m/s Ban Hock Hin

Tel: 62816520

of MO: 6 Defu Lake 4

Policy No:

Claim No: D19002530 MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 27.3.2019

17.4.2019

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement:

Date/Time: 16.4.19 3.52 p.m

Person Contacted: IKA

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate (✓)
	FZ 4120 C - X	
	SHC 0397U - X	
18/4 @ 5:36pm	Rec'd	via preli advise email.

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: FZ 4120C

at Workshop m/s BHH

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.

N/S	O/S

Bal. or Market Value: 1800

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: 4-7-2020

Veh No: FZ 4120C

Yr Regn: 7105

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

Truck / Trailer or

Make: Yamaha Supreme c.c. 111

Colour: multi colour A/C: Insured / Std / NI / NA

Sp. Reading: 54155 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: 5/W031442

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 70-80-17

R: 70-80-17

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

TOYO / YOKO or

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. mm

L/Bal. mm

D.O.A. 28/3/19

D.O.I. 17/4/19

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

Ign. 3rd.

26/7/19 confirmed a/s 4950 with Raymond. (Red: 625,39%)

NV: 1800

LTA: 789

NV: 1011

RECEIVED 01 AUG 2019

Date/Time, File Pass to?

1) 1/8 Typist

Date/Time, File Return to?

2)

☐ : Preli. Report☒ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

100

50

50

64

264

Report Format: TP

Lump Sum / I.B.I: (\$ 950/- )

**MOTOR SURVEY ASSIGNMENT**

<b>Date</b>	15-04-2019	<b>Our Ref No.</b> D19002530MFSH
<b>Accident Date</b>	27-03-2019	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHC0397U	<b>Third Party Vehicle.</b> FZ4120C
<b>Survey Location</b>	NO. 6 DEFU LANE 4	
<b>Contact Person.</b>	RAYMOND	
<b>Contact No.</b>	62816520/ 0	<b>Fax No.</b> 62842969
<b>Survey Type</b>	WITHOUT PREJUDICE:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	NA	

**FOR DIRECT SETTLEMENT**

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

**THIRD PARTY SURVEY REQUEST**

<b>Cc : Workshop</b>	BAN HOCK HIN CO. PTE LTD	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	NA	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	HENRY KAO	

**IMPORTANT NOTE**

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.  
This is a computer generated letter, no signature required.

## Denise Tay (LKKAUTO)

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**From:** Denise Tay (LKKAUTO)  
**Sent:** Thursday, 18 April 2019 5:36 PM  
**To:** Admin-D (LKKAUTO); 'CWS Motor Claims'; assignments; SUR  
**Cc:** 'Henry Kao Cai Jie'  
**Subject:** RE: SURVEY ASSESSMENT - D19002530MFSH/1  
**Attachments:** PRELI ADVISED FZ 4120C.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **FZ 4120C**

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

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

---

**From:** Admin-D (LKKAUTO)  
**Sent:** Tuesday, 16 April 2019 3:59 PM  
**To:** 'CWS Motor Claims' <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Cc:** 'Henry Kao Cai Jie' <[HenryKao@msfirstcapital.com.sg](mailto:HenryKao@msfirstcapital.com.sg)>  
**Subject:** RE: SURVEY ASSESSMENT - D19002530MFSH/1

Dear Sir / Mdm,

Thank you for the assignment.

Please be informed that repairer agreed to survey on 17/4/2019.

Best Regards,

**Summer Lee** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

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**From:** CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]  
**Sent:** Tuesday, 16 April, 2019 3:29 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; Henry Kao Cai Jie <[HenryKao@msfirstcapital.com.sg](mailto:HenryKao@msfirstcapital.com.sg)>  
**Subject:** PRI: SURVEY ASSESSMENT - D19002530MFSH/1

Dear Sir/Mdm,



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19002530MFSH

Date: 18/4/2019

Our Ref: CS/FCI19006797/Utd3

The Motor Claims Department  
First Capital Insurance Ltd

Dear Sir/Madam,

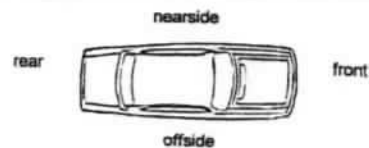
INITIAL INSPECTION REPORT OF VEHICLE NO. FZ 4120C

Please be informed that we had conducted the inspection of the abovementioned vehicle 17/4/2019 at the premises of M/s Ban Hock Hin have the following to report: -

Workshop Estimate Amount	: S\$ <u>1,575.00</u>
Revised Estimate Amount	: S\$ <u>1,213.50</u>
"Check" Items Amount	: S\$ <u>31.00</u>
Market Value	: S\$ <u>          </u>
LTA Reimbursement Value	: S\$ <u>          </u>
Nett Value	: S\$ <u>          </u>

Description of Damage:

The vehicle sustained damages at the  
n/s body portion.



**Comments/ Present Status:**

Damages Consistent.

Yours faithfully

Marcus

Automotive Assessor

## 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	08/04/2019 16:58
Date Of Accident	28/03/2019 00:05
Exact Location Of Accident	ALONG CTE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ4120C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMMAD RIZAL BIN SAPTO
NRIC No	S7728922D
Email Address	MARIZ7757@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92230577
Alternative Phone No	OFFICE-92230577

### Vehicle Particulars

Manufacturer	YAMAHA
Model	SUPREME X-1-111CC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MC/00087894-06
Cover Note Number	

### Driver

Name of Driver	MOHAMMAD RIZAL BIN SAPTO
NRIC No	S7728922D
Date Of Birth	04/10/1977
Occupation	OUTDOOR
Date Of Driving Pass	31/01/1994
Driving Experience	25 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92230577
Fax Number	
Contact Number	OFFICE-92230577
EMail Address	MARIZ7757@GMAIL.COM

Address	BLK 352 CHOA CHU KANG CENTRAL #02-339
Postcode	680352
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
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	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 21 BUKIT BATOK EAST AVE 4 , <b>POSTCODE:</b> 659840 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-6659999 - <b>FAX NO:</b> 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE TRAFFIC ACCIDENT REPORT NO. T/20190328/20188 ATTACHED

#### 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	SHC397U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	MOHAMMAD RIZAL BIN SAPTO
Approximate Age	41
Injuries Sustain	
Injured person in which vehicle?	FZ4120C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 352 CHOA CHU KANG CENTRAL #02-339
Postcode	680352



## Sketch Plan


### SKETCH PLAN

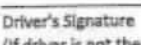
#### IMPORTANT NOTICE


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.

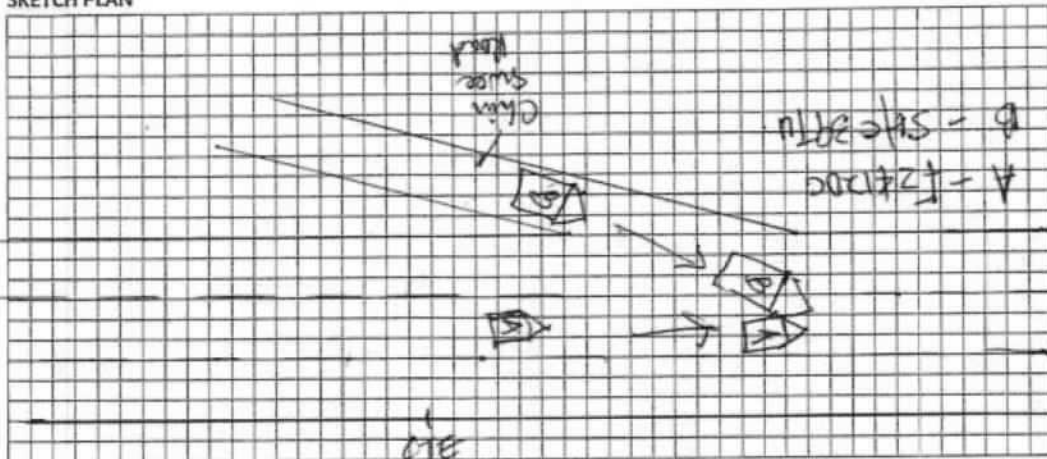
  
Policyholder's Signature  
Date & Time:

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

  
Reporting Centre Personnel's Signature  
Name: Tan Chou Wai  
NRIC/FIN No.: G7715735R

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Traffic Accident Report No. T/20190328/2188 attached.

### DECLARATION

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

*[Signature]*  
 Policyholder's Signature  
 Date & Time:

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

*[Signature]*  
 Reporting Centre Personnel's Signature  
 Name: *Pan Chuan Lou*  
 NRIC/FIN No.: *G771523SR*

GIARMC SketchPlanForm\_V3

Traffic Accident Report Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190328/2188

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

1 of 3  
Report No. T/20190328/2188

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/03/2019 19:43	Vide Report No.:	Station Diary No.: 167
--	------------------	---------------------------

**Informants Particulars**

Name of Informant: MOHAMMAD RIZAL BIN SAPTO	Address: APT BLK 352 CHOA CHU KANG CENTRAL #02-339 SINGAPORE 680352		
ID Type / ID No.: NRIC NO / S7728922D	Contact No.:	Mobile: 92230577	
Nationality: SINGAPORE CITIZEN	Email:	Mariz7757@gmail.com	
Sex: Male	Age: 41	Date of Birth: 04/10/1977	Type of Informant: Rider
Race: Boyanesse	Language: English	Institution / School Name:	
Occupation: TECHNICAL OFFICER	Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/03/2019 23:50	Type of Location: Bend
Location: Along Road 1 CENTRAL EXPRESSWAY  CTE/AYE towards Tuas. At the entrance of 1B.				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow:	Traffic Control:	Traffic Volume: Light		
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FZ4120C	Motorcycle	YAMAHA	SUPREME X -1	Blue	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ4120C	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00087894/06	05/07/2012	04/07/2019

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**SINGAPORE  
POLICE FORCE**



T/20190328/2188

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

2 of 3

Report No. T/20190328/2188

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	MOHAMMAD RIZAL BIN SAPTO	ID No.	S7728922D
Related Vehicle	FZ4120C (Motorcycle)	Contact No.	92230577
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	28/03/2019	Date Discharge	28/03/2019
No. of Days granted Medical Leave	04	Degree of Injury	Serious

**Brief Details.**

On 27/03/2019 at about 2350hrs, I was riding my motorcycle (Reg no: FZ4120C) along CTE/AYE towards Tuas. At exit 1B, there was a taxi coming from Chin Swee Road slip road and collided with me. I fell together with my motorcycle on the left and skidded.

The ambulance came and conveyed me to the hospital immediately as I was seriously injured. I did not manage to exchange particulars with anyone. I was admitted in Singapore General Hospital and was being discharged on the same day. I was given 04 days of hospitalization leave from 28/03/2019 to 31/03/2019. Doctor informed me that there will be an extension of my hospitalization leave as I need to do dressing for my wounds.

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**SINGAPORE  
POLICE FORCE**



T/20190328/2188

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

3 of 3

Report No. T/20190328/2188

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:  
J /  
Sgt 3 MUHAMMAD ASHRAF BIN RAHUMAN  
SHAH

Signature Of Informant:

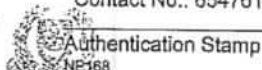
*T. Raj*

Signature Of Interpreter:  
Not applicable

Date/Time:  
28/03/2019 19:43

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt MUHAMMAD KHAIRIL BIN KAMAL  
Contact No.: 65476131

Classification Of Case:



Signature :

**Singapore Police Force**

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**SINGAPORE  
POLICE FORCE**

Traffic Police  
10 Ubi Avenue 3  
Singapore 408865  
Tel +65 6547 0000  
Fax +65 6547 6259  
[www.police.gov.sg](http://www.police.gov.sg)

Our Ref : TP/IP/21145/2019  
Date : 4 April, 2019

MOHAMMAD RIZAL BIN SAPTO  
BLK 352 CHOA CHU KANG CENTRAL  
#02-339  
SINGAPORE 680352

Dear Sir/Madam

**ACCIDENT INVOLVING FZ4120C & SHC397U ALONG CTE (AYE) ON 28  
MARCH 2019 AT 0002 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of SHC397U had committed an offence of Inconsiderate Driving under Section 65(b) of the Road Traffic Act, Chapter 276. Action has been initiated against the said driver for the said offence.
3. If you have any queries, please contact the Investigation Officer, Daniel Yan at 65476252 or via email at [Daniel\\_Yan@spf.gov.sg](mailto:Daniel_Yan@spf.gov.sg)

Yours faithfully

Perlin Chong  
for Head Investigation  
Traffic Police  
Singapore Police Force

A FORCE FOR THE NATION



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[> Back to OneMotoring](#)

## Enquire Transfer Fee

Vehicle Details			
Vehicle No.:	FZ4120C		
Vehicle Type:	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme:	Normal		
Vehicle Make:	YAMAHA		
Vehicle Model:	SUPREME X-1		
Chassis No.:	5YW031442		
Propellant:	Petrol		
Engine No.:	5YW031442		
Engine Capacity:	111 cc		
Maximum Power Output:	-		
Maximum Laden Weight:	-		
Unladen Weight:	96 kg		
Year Of Manufacture:	2005		
Original Registration Date:	05 Jul 2005		
Lifespan Expiry Date:	-		
COE Category:	D - Motorcycle		
PQP Paid:	\$3,253.00		
COE Expiry Date:	04 Jul 2020		
Road Tax Expiry Date:	04 Jul 2019		
Inspection Due Date:	04 Jul 2019		
Intended Transfer Date:	15 Apr 2019		
CO2 Emission:	-		
CO Emission:	-		
HC Emission:	-		
NOx Emission:	-		
PM Emission:	-		
The current road tax expiry is 04 Jul 2019. You may renew the road tax from 05 Apr 2019 with all pre-requisite(s) fulfilled. If the road tax is renewed after 04 Jul 2019, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable (From 05 Jul 2019 to 04 Jan 2020)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	48.00	-	48.00
Total Amount Payable:			73.00
Amount Payable (From 05 Jul 2019 to 04 Jul 2020)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	96.00	-	96.00
Total Amount Payable:			121.00
Message			
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.			

You may print this page for reference.

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[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:	Singapore NRIC
Owner ID:	8922D

**Vehicle Details**

Vehicle No.:	FZ4120C
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Apr 2019
Vehicle Make:	YAMAHA
Vehicle Model:	SUPREME X-1
Primary Colour:	Blue
Manufacturing Year:	2005
Engine No.:	5YW031442
Chassis No.:	5YW031442
Maximum Power Output:	-
Open Market Value:	\$1,468.00
Original Registration Date:	05 Jul 2005
First Registration Date:	05 Jul 2005
Transfer Count:	1
Actual ARF Paid:	\$221.00

**Intended PARF Rebate Details**

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

**Intended COE Rebate Details**

COE Expiry Date:	04 Jul 2020
COE Category:	D - Motorcycle
COE Period(Years):	5
PQP Paid:	\$3,253.00
COE Rebate Amount:	\$789.00
<b>Total Rebate Amount:</b>	<b>\$789.00</b>

**Message**

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 17 Apr 2019

OK





**BAN HOCK HIN**  
Co., Pte Ltd

Co.Reg.No: 197000288K

MOTORCYCLE ACCESSORIES | SERVICE CENTRE  
MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL  
WORKS | LEASING & RENTALS | FLEET SALES | INSURANCE SALES

## QUOTATION

Customer :

FIRST CAPITAL INSURANCE LTD  
06 RAFFLES QUAY #21-00  
SINGAPORE 048580

MOTOR CLAIMS DEPT

VEHICLE NO. : FZ4120C  
MAKE/MODEL : YAM / SUPREME X-1

NO. : 33974

DATE : 09/04/2019

CLAIM NO. : 11316

POLICY NO. :

FROM : RAYMOND

(Page 1 of 3)

S/N	Description	Action	Qty	Unit Price	Amount
1	AXLE WHEEL REAR	REPLACE	1.00	\$10.00	10.00 X
2	BALL BEARING RETAINER P/N: 52980	REPLACE	2.00	<del>\$36.00</del> 36.00	72.00 ✓
3	BALL RACE 1 P/N: 50622	REPLACE	1.00	\$12.00	12.00 ✓
4	BALL RACE 2 P/N: 50623	REPLACE	1.00	\$12.00	12.00 X
5	BAR HANDLE P/N: 31115	REPLACE	1.00	\$42.00	42.00 ✓
6	BOLT FOOTREST FRONT	REPLACE	4.00	\$1.50	6.00 ✓
7	BOX REAR (GIVI) B32N	REPLACE	1.00	\$140.00	140.00 X
8	BRACKET FOOTREST FRONT	REPLACE	2.00	\$4.50	9.00 ✓
9	BRACKET FOOTREST REAR LH	REPLACE	1.00	\$45.00	45.00 ✓
10	BRACKET HANDLE BAR P/N: 32040	REPLACE	1.00	\$30.00	30.00 ✓
11	COVER SIDE LH	REPLACE	1.00	\$40.00	40.00 ✓
12	COVER SIDE UPPER LH	REPLACE	1.00	\$32.00	32.00 ✓
13	DAMPER BRACKET HANDLE BAR P/N: 32041	REPLACE	6.00	\$4.50	27.00 ✓



S/N	Description	Action	Qty	Unit Price	Amount
14	FOOTREST FRONT	REPLACE	1.00	\$38.00	38.00
15	FOOTREST REAR LH	REPLACE	1.00	\$20.00	20.00
16	FORK FRONT ASSY P/N: 31122	REPLACE	1.00	\$405.00	405.00
17	FRONT FLASHER LIGHT ASSY 1 P/N: 62269	REPLACE	1.00	\$63.00	63.00
18	GRIP HANDLE SET P/N: 62201	REPLACE	1.00	\$65.00	65.00
19	GROMMET P/N: 23668	REPLACE	1.00	\$2.50	2.50
20	GROMMET P/N: 62264	REPLACE	2.00	\$1.50	3.00
21	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.	Supply/Install	8.00	\$35.00	280.00
22	LEVER CLUTCH P/N: 32356	REPLACE	1.00	\$16.00	16.00
23	MID PIN CLEVIS 91701-08038 P/N: 22604	REPLACE	2.00	\$3.00	6.00
24	MID SPRING TORSION 90508-20023 P/N: 22599	REPLACE	1.00	\$3.00	3.00
25	MIRROR LH	REPLACE	1.00	\$16.00	16.00
26	MUDGUARD FRONT	REPLACE	1.00	\$45.00	45.00
27	PEDAL GEAR P/N: 27948	REPLACE	1.00	\$38.00	38.00
28	PIN COTTER P/N: 24205	REPLACE	3.00	\$4.50	13.50
29	PIN FOOTREST REAR P/N: 39457	REPLACE	1.00	\$7.50	7.50
30	PLATE FOOTREST FRONT LH	REPLACE	1.00	\$8.50	8.50
31	PLATE FOOTREST FRONT RH	REPLACE	1.00	\$8.50	8.50
32	RACE BALL 2 P/N: 52330	REPLACE	1.00	\$12.00	12.00
33	RUBBER FOOTREST FRONT P/N: 32901	REPLACE	2.00	\$8.00	16.00
34	SPRING FOOTREST LH	REPLACE	1.00	\$3.00	3.00



S/N	Description	Action	Qty	Unit Price	Amount
35	STAY COWLING FRONT P/N: 32359	REPLACE	1.00	\$25.00	25.00
36	STICKER COVER TAIL LH	REPLACE	1.00	\$38.00	38.00
37	STOPPER FOOTREST REAR	REPLACE	1.00	\$1.50	1.50

SUB TOTAL

\$1,575.00

GST @ 7 %

\$110.25

GRAND TOTAL

\$1,685.25

50% deposit required before ordering of parts.

Validity: 30 days

For &amp; on Behalf of

BAN HOCK HIN CO PTE LTD

Acknowledge &amp; Accepted By



RAYMOND

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

1069  
102  
962.1  
220  
1182.1  
22  
984.3






# 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				
MS FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI19006797/Utd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 15-08-2019	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHC 397U		Veh. Inspected	FZ 4120C
Policy No.			Coverage (\$)	0.00
Claim No.	D19002530MFSH		Excess (\$)	0.00
Assign From	HENRY KAO		Assign Date	16/04/2019
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	YAMAHA SUPREME		c.c	111
Engine No.	HIDDEN		Year of Reg.	2005
Chassis No.	5YW031442		Colour	MULTI COLOUR
Odometer	54155		Steering	IN ORDER
Brakes	IN ORDER		Modification	SPORTS RIM
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	70-90-17	MICHELIN	5 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	80-90-17	MICHELIN	5 mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	28/03/2019		Inspection Date	17/04/2019
Survey held at	BAN HOCK HIN CO.PTE LTD NO 6 DEFU LANE 4 SINGAPORE 539410			
<b>5a. Remarks</b>				
A)DAMAGES CONSISTENT TO ACCIDENT REPORT. B)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. C)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:			<b>4 Working Days</b>	



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

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Page No.:1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FZ 4120C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>REPLACEMENT OF PARTS</b>			
1	AXLE WHEEL REAR	NOT NECESSARY	10.00	-
2	BALL BEARING RETAINER @\$36.00	NECESSARY	72.00	72.00
1	BALL RACE 1	NECESSARY	12.00	12.00
1	BALL RACE 2	NOT NECESSARY	12.00	-
1	BAR HANDLE	BENT	42.00	42.00
4	BOLT FOOTREST FRONT @\$1.50	NECESSARY	6.00	6.00
1	BOX REAR (GIVI) B32N	SERVICEABLE	140.00	-
2	BRACKET FOOTREST FRONT @\$4.50	BENT	9.00	9.00
1	BRACKET FOOTREST REAR LH	CRACKED	45.00	45.00
1	BRACKET HANDLE BAR	NECESSARY	30.00	30.00
1	COVER SIDE LH	CUT	40.00	40.00
1	COVER SIDE UPPER LH	CUT	32.00	32.00
6	DAMPER BRACKET HANDLE BAR @\$4.50	NECESSARY	27.00	27.00
1	FOOTREST FRONT	TORN	38.00	38.00
1	FOOTREST REAR LH	MISSING	20.00	20.00
1	FORK FRONT ASSY	BENT / DAMAGED	405.00	405.00
1	FRONT FLASHER LIGHT ASSY 1	SCRATCHED	63.00	63.00
1	SET GRIP HANDLE	TORN	65.00	65.00
1	GROMMET	NECESSARY	2.50	2.50
2	GROMMET @\$1.50	NECESSARY	3.00	3.00
1	LEVER CLUTCH	SCRATCHED	16.00	16.00
2	MID PIN CLEVIS 91701-08038 @\$3.00	NOT NECESSARY	6.00	-
1	MID SPRING TORSION 90508-20023	NOT NECESSARY	3.00	-
1	MIRROR LH	BROKEN	16.00	16.00
1	MUDGUARD FRONT	CUT	45.00	45.00
1	PEDAL GEAR	SERVICEABLE	38.00	-
3	PIN COTTER @\$4.50	NOT NECESSARY	13.50	-
1	PIN FOOTREST REAR	NECESSARY	7.50	7.50
1	PLATE FOOTREST FRONT LH	NECESSARY	8.50	8.50
1	PLATE FOOTREST FRONT RH	NOT NECESSARY	8.50	-
1	RACE BALL 2	NOT NECESSARY	12.00	-

Report Ref No. CS/FCI19006797/Utd3e2



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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	RUBBER FOOTREST FRONT @\$8.00	NOT NECESSARY	16.00	-
1	SPRING FOOTREST LH	NOT NECESSARY	3.00	-
1	STAY COWLING FRONT	DAMAGED	25.00	25.00
1	STICKER COVER TAIL LH	NECESSARY	38.00	38.00
1	STOPPER FOOTREST REAR	NECESSARY	1.50	1.50
	LESS 10% DISCOUNT		-	-106.90
			1,331.00	962.10
	<b>LABOUR</b>			
	LABOUR - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.		280.00	230.00
			280.00	230.00
<b>GRAND TOTAL</b>			<b>1,611.00</b>	<b>1,192.10</b>

<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>950.00</b>
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Report Ref No. CS/FCI19006797/Utd3e2

MARKET VALUE: \$1,800.00(EST)-LTA REIMBURSEMENT VALUE: \$789.00=NETT VALUE: \$1,011.00

CHUA KANG SENG

Licensed Appraiser

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