

1200000

ASS. REC. BY:

REF: CS3 / ASM18010762 / T19d31

Special Instructions:

SUBJECT

Smart claim

Taufik

ASSIGNMENT (Office)

27/4/19

From (Person):

Wan Cury

of ABM

Date/Time:

11062018 401pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

F6H 7642K

Insured:

SLN 1343M

at Workshop m/s

Universal Motors

Tel:

9642 3147

of

81k 1008 Bukit Merah Lane 3 #01-04

Policy No:

Claim No:

98m00JNJ

Sum Insured:

Excess:

Make of Veh.
(Client's Record)

D.O.A. 04062018

CA / REV / REP. / REV 24 HRS

13062018

H.O.D. Endorsement:

Date/Time: 12062018 532pm

Person Contacted:

Michael

Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (X) Estimate
	F6H 7642K - NGA / MSH18010409 / Y
	SLN 1343M - X
	Dismantle Part: 19.062018
	Taufik
	PLS check parts prices.
	Submit LS \$3100, 6 days.
	(Red \$2100, 40%)

[Signature]

4/5 \$3100, 6 days

RECEIVED 14 MAY 2019

13/5/2019

Nivitha (LKK Auto)

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Sent: Thursday, 18 April 2019 3:00 PM
To: assignments
Cc: SUR
Subject: CS3/ASM18010762/T1z4be2
Attachments: TPPD Litigation LOD MOHAMED SATHIK FARLUDEEN (2).pdf

Hi team,

Paper survey. [CS3/ASM18010762/T1z4be2](#). Please see SMART for more details.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

<< Service Request Details

Claim	SBM00JNJ
Reference	None 
Loss Date	4 June 2018
Report Date	6 Jun 2018 5:38:00 PM
Request Date	18 April 2019
Due Date	26 April 2019
Vendor Name	LKK AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Re-inspection

Actions

Next Step Agree to perform service

Decline Work

Accept Work

Vehicle Info

Incident Veh
Registration

Make

Model

Service Ad

BLK 752 JUI

Primary Co

HAROON A
BLK 752 JUI

Claim Hand

TAN Wancor

tan.wancong

Additional Instructions

Please conduct paper survey

WITHOUT PREJUDICE



CERTIFICATE OF POSTING

ANWAR BIN HAROON
BLK 752 JURONG WEST STREET 74
#04-24
SINGAPORE 640752
OWNER OF SLN 1343M

(UEN No.: 533945718)

6A Shenton Way
#04-02 to 08
OUE Downtown Gallery
Singapore 068815

60144223

CERTIFICATE OF POSTING

ADILAH BINTE ANWAR
BLK 752 JURONG WEST STREET 74
#04-24
SINGAPORE 640752
DRIVER OF SLN 1343M

Tel: +65 6914 2682
Fax: +65 6429 1048
E-mail: general@jklc.com.sg

PDX 8176

AXA INSURANCE PTE LTD
8 SHENTON WAY
#27-01
AXA TOWER
SINGAPORE 068811
ATTN: TAN JUN HONG
YOUR REF: S8M00JNJ/Mc/JH



Writer / Secretary Contact
Email: jeekin@jklc.com.sg /
theresa@jklc.com.sg

Date:
11 April 2018

Our Ref:
JK.jia.19400.UM.PD



Dear Sir,

MOHAMED SATHIK FARLUDEEN, FIN NO. G6315178K
ACCIDENT ON 04 JUNE 2018 INVOLVING FBH 7642K AND SLN 1343M
ALONG PIE TOWARDS TUAS

We act for MOHAMED SATHIK FARLUDEEN, FIN NO. G6315178K.

We are instructed by the above named to claim damages against you/your insured in connection with a road traffic accident on 04 June 2018 along PIE towards Tuas involving our client's vehicle registration no. FBH 7642K and vehicle registration no. SLN 1343M driven by you/your insured at the material time.

We are instructed that the accident was caused by you/your insured's negligence in the driving and/or management of your/your insured vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

1) Cost of repair	\$5,564.00
2) Loss of use (14 days @ \$60.00/day)	\$ 840.00
3) Survey report	\$ 400.00

4) Costs	\$ 700.00
5) Facsimile, photocopying, printing, postage, transport, telephone charges and other incidental disbursements (inclusive of 7% GST)	<u>\$ 150.00</u>
	<u>\$7,654.00</u>

A copy each of the following supporting documents is enclosed for your consideration:-

- a) Our client's GIA report;
- b) Our client's police report;
- c) GIA report of SLN 1343M;
- d) LTA search on vehicle no. SLN 1343M;
- e) Repair Bill;
- f) Survey invoice;
- g) Survey report;
- h) Sixty-three (63) copies of scanned coloured photographs showing damage to our client's vehicle.

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgment of receipt of this letter within 14 days of your receipt of this letter.

Should you fail to acknowledge receipt of this letter within 14 days, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours Sincerely

JK Law

JK LAW CHAMBERS

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 ability.
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	07/06/2018 16:18
Date Of Accident	04/06/2018 14:45
Exact Location Of Accident	ALONG PIE TOWARDS TUAS 36.2KM LANE 3 AND 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH7642K
Insured/Policyholder	
Name Of Registered Owner	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Email Address	FARLU904@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82651651
Alternative Phone No	OTHERS-82651651
Vehicle Particulars	
Manufacturer	BAJAJ
Model	PIJI SAR-180CC DTS-I (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72033500
Driver	
Name of Driver	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Date Of Birth	09/08/1986
Occupation	INDOOR
Date Of Driving Pass	11/02/2011
Driving Experience	7 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82651651
Fax Number	
Contact Number	OTHERS-82651651
Email Address	FARLU904@GMAIL.COM

Address	BLK 443D BUKIT BATOK WEST AVENUE 8 #11-773
Postcode	654443
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 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	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180604/2178

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	SLN1343M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ADILAH BINTI ANWAR
NRIC/Passport Number	S8909576Z
Contact Number	96308157
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name	MOHAMED SATHIK FARLUDEEN
Approxmate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBH7642K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

07/06/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN



A) FBH 7642K
B) SW 1343 M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description box:

PLS REFER TO POLICE REPORT
7/20180604/2128

DECLARATION

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

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.:



SINGAPORE POLICE FORCE



1/20180604/2178

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/20180604/2178

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2018 19:35	Vide Report No.:	Station Diary No.: 189
--	------------------	---------------------------

Informant's Particulars

Name of Informant: Mohamed Sathik Farudeen			Address: 443D Bukit Batok West Ave 8 #11-773 SINGAPORE 654443		
ID Type / ID No.: PASSPORT / N2046483			Contact No.: Home/Office: Mobile: 82651651		
Nationality: INDIAN			Email:		
Sex: Male	Age: 31	Date of Birth: 09/08/1986	Type of Informant: Rider		
Race: Indian			Language:	Institution / School Name:	
Occupation: sales executive			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/06/2018 14:45	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY Along PIE towards Tuas 36.2km lane 3 and 4.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH7642K	Motorcycle				Slightly Damaged	0
SLN1343M	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



SINGAPORE POLICE FORCE



T/20180604/2178

2 of 3

Police Station Of Origin:

Bukit Batok N.P.C

21 Bukit Batok East Avenue 4 SINGAPORE

659840

Tel No: 1800-6659999

Report No. T/20180604/2178

CONTINUATION OF REPORT

Rider			
Name	Mohamed Sathik Farludeen	ID No.	N2046483
Related Vehicle	FBH7642K (Motorcycle)	Contact No	82651651
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	Adilah binti Anwar	ID No.	S8909576Z
Related Vehicle	SLN1343M (Car)	Contact No.	96308157
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	r f Injury	NIL

Brief Details.

V1) FBH7642K (Motorcycle)

V2) SLN1343M (Car)

On 04/06/2018 at around 1445hrs, I was riding V1 along PIE towards Tuas at the third lane. Subsequently, V2 was on my left, and wanted to merge into my lane. I did not see V2 on my left and I continued to accelerate. Subsequently out of nowhere, V2 made a sharp right turn and hit against my left side. I lost balance and fell off my bike. V2 subsequently stopped ahead and a passerby called for ambulance. Subsequently ambulance and traffic police arrived at scene. I sustained some injuries. The injuries are as follows, my left elbow sustained some abrasions. My left toe nail is broken. There are some abrasions on my knees and there is also some redness on my neck area. I was not conveyed as I did not feel any pain earlier.

My vehicle also sustained some damages. V1 headlight sustained some scratches and the gear was damaged. The rear box was broken and the left signal was also damaged. My left side mirror was broken. My bike was unable to start and was towed to my residential address. I have not went to the clinic to make a check. I do not have any in built camera.



SINGAPORE
POLICE FORCE



1/20180604/2178

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/20180604/2178

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 2 MUHAMMAD SYAFIQ BIN MOHD RAFFI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt YUS MASTARI I KHAZALI 114

Contact No: 65476214

Authentication Stamp

NP168

Signature :

Singapore Police Force

Signature Of Informant:

Date/Time:

04/06/2018 19:35

Classification Of Case:

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
 4 Selegie Road, #02-01/02, Singapore 117602
 Tel: 65 6827 7668 Fax: 65 6827 7600
 www.msig.com.sg

For any enquiries, please call the Underwriting agent: Commercial Agency Pte Ltd
 23 Kelantan Lane #02-01/02 Kim Hoe Centre Singapore 208602 Tel: 63373133

MOTOR CYCLE COVER NOTE

(Strictly for Motor Cycle Insurance)

MSCN No : 72033500

Date 19 Sep 2017

Agency : A3074-001-10225

Name : MOHAMED SATHIK FARLUDEEN

having proposed for insurance in respect of the Motor Cycle described in the Schedule below the risks is hereby HELD COVERED
 in the terms of the Company's usual form of Third Party Policy applicable thereto for the

period from 00:01AM on 20 Sep 2017 to midnight on 19 Sep 2018 unless the
 cover be terminated by the Company by notice in writing in which case insurance will thereupon cease and a proportionate part of
 the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk

SCHEDULE

Registration No.	FBH7642K	Insured Value	Third Party Liability: TPL
Engine No.	DJ2CCG39003	C.C.	179
Chassis No.	MD2A12DZ1CCG29451		
Year Manufactured	2012	Year of Registration	2013
Make & Model	BAJAJ [PULSAR DTS-1 180 MANUAL]		
Rider Type	Policyholder		

Use only for the following purpose: social domestic and pleasure purposes and in connection with policyholder's business or profession

CERTIFICATE OF INSURANCE

I/WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with the provisions
 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

IMPORTANT

Please be informed that this cover note is issued for temporary use only and that you must exchange the cover note for the
 certificate of insurance from the respective agents within 14 days hereof.

For MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurer

UNIVERSAL MOTORS PTE LTD

BLK 1006 BUKIT MERAH LANE 2

#01-04 SINGAPORE 159762

TEL: 62782029 FAX: 67732039

MSD/MT/16-250829

(Please read important information on the reverse page.)

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	05/06/2018 14:36
Date Of Accident	04/06/2018 13:55
Exact Location Of Accident	BET FILTER LANE & LANE 3 FM TOH GUAN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN1343M
Insured/Policyholder	
Name Of Registered Owner	ANWAR BIN HAROON
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1927119
Cover Note Number	

Driver

Name of Driver	ADILAH BINTE ANWAR
NRIC No	S8909576Z
Address	BLK 752 JURONG WEST ST 74 #04-24

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

Circumstances of Accident

PLEASE REFER AS 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	FBH7642K
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Accident Sketch Plan

SKETCH PLAN

Image As per Original
---CSU---

IMPORTANT NOTICE

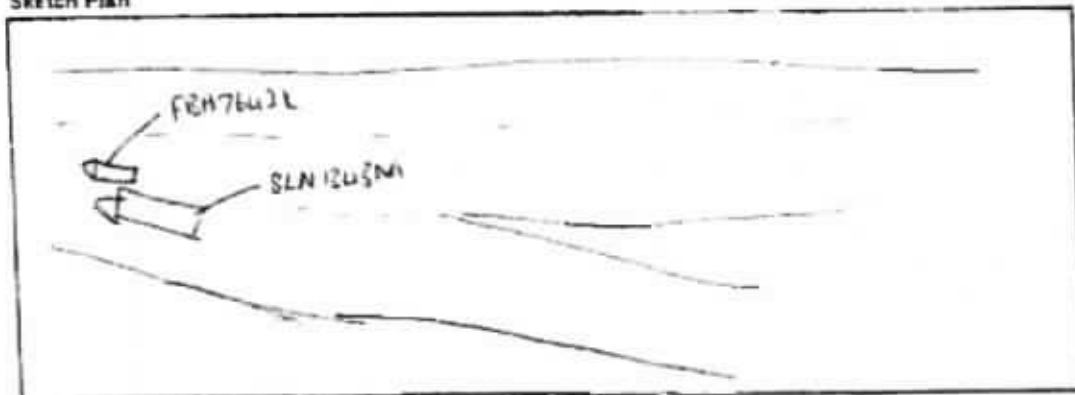
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of the report in the Centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)
(understand without incurring any and consent that:
- a. We (insurers) will not disclose the General Insurance Association of Singapore's (GIA) - Malaysia permitted to collect, use, disclose and/or process the Personal Data (which is a portion set out in the (Terms and any other personal information provided by the insured persons and the insurer) collected in the "Personal Information" and disclose and transfer such Personal Information to all insured persons who have insured vehicles involved in this accident, all insurers of the insured vehicles involved in this accident shall be collected, intended to be disclosed to the insurers, the insurers' lawyers, the Monetary Authority of Singapore and any relevant government agencies, courts, tribunals, the police, the fire department, the relevant authorities and any necessary investigations relating to the claim;
- b. We (insurers) will not disclose the details of the accident to any third party;
- c. We (insurers) will not disclose the details of the accident to any third party;
- d. We (insurers) will not disclose the details of the accident to any third party;
- e. We (insurers) will not disclose the details of the accident to any third party;
- f. We (insurers) will not disclose the details of the accident to any third party;
- g. We (insurers) will not disclose the details of the accident to any third party;
- h. We (insurers) will not disclose the details of the accident to any third party;
- i. We (insurers) will not disclose the details of the accident to any third party;
- j. We (insurers) will not disclose the details of the accident to any third party;
- k. We (insurers) will not disclose the details of the accident to any third party;
- l. We (insurers) will not disclose the details of the accident to any third party;
- m. We (insurers) will not disclose the details of the accident to any third party;
- n. We (insurers) will not disclose the details of the accident to any third party;
- o. We (insurers) will not disclose the details of the accident to any third party;
- p. We (insurers) will not disclose the details of the accident to any third party;
- q. We (insurers) will not disclose the details of the accident to any third party;
- r. We (insurers) will not disclose the details of the accident to any third party;
- s. We (insurers) will not disclose the details of the accident to any third party;
- t. We (insurers) will not disclose the details of the accident to any third party;
- u. We (insurers) will not disclose the details of the accident to any third party;
- v. We (insurers) will not disclose the details of the accident to any third party;
- w. We (insurers) will not disclose the details of the accident to any third party;
- x. We (insurers) will not disclose the details of the accident to any third party;
- y. We (insurers) will not disclose the details of the accident to any third party;
- z. We (insurers) will not disclose the details of the accident to any third party;

Policyholder's Signature - Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstances of the Accident

I was driving into PIE Tunn from Tak Guan Road. I was trying to change lanes from the filler lane into Lane 3 of the expressway. I drove past a small lorry in Lane 3 while I was on the filler lane. I tried to overtake a small lorry in Lane 3 from the filler lane but at the same time I saw a blue taxi trying to overtake the lorry as well so I tried to speed up a little and take a position in front of the taxi but I didn't notice a motorcycle in the middle of Lane 3 in front as it was in my blindspot at the right edge of my windscreen. I accidentally hit him on the left side of the motorcycle and the motorcycle contacted my right side view mirror until it cluded in and the mirror cover was detached and flying into the road. At that time I was driving at about 30 km/h I immediately stopped & the car turned off the engine and got out to check on the rider. ~~Respect that I kept~~

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Vehicle Make/Model/Colour

Name of Driver

Insurance Company Name

MOHAMED SATHIK FARLUDEEN

Image As per Original
---CSU---

AXA INSURANCE PTE LTD
8 Shenton Way, #04-01
AXA Tower, Singapore 068811
Customer Service Centre #B1-01
Tel: (65) 63387288 Fax: (65) 63362622
Website: www.axa.com.sg
GST Registration Number: 1990035128
customer.service@axa.com.sg



Private Cars COMP
POLICY SCHEDULE
NEW BUSINESS
Original

POLICY INFORMATION		Policy No. : VPA/P1927119
Source	(01) 14885 BMS-AXA TOYOTA RS	
Insured	ANWAR BIN HAROON	
Address	BLK 752 JURONG WEST ST 74 #04-24 SINGAPORE 640752	
Business/Profession	OTHER OCCUPATION Carrying on or engaged in the business of purchasing last declared and on other for the purpose of this insurance	
Period of Insurance	From 24/04/2017 To 23/04/2018 Both Dates Inclusive.	
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium		
PREMIUM		
Premium After 50% NCD	SGD 1,052.80	
GST	SGD 73.70	
Annual Premium	SGD 1,126.50	
Total Payable	SGD 2,252.99	
RISK DETAILS THE MOTOR VEHICLE		
Type of Cover	Comprehensive	
Vehicle No.	ELN1243M	
Make/Model	Private Car TOYOTA ALTIS 1.8	
Year of Manufacture	2017	
Body Type	SALOON	
Engine No.	1ERT347354	
Insured's Estimated Market Value	Market Value At The Time Of Loss including Accessories and Spare Parts	
Limitations as to Use	As specified in Certificate of Insurance	
Hire Purchase	DBS BANK LTD	
Extra Coverage/Premium Breakdown		
NCD Protector	Limit (SGD)	Premium (SGD)
Basic Own Damage Excess		SGD 500.00
Named Drivers		
1 - ANWAR BIN HAROON		
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
Sales Agent ID - 85T013		

Accident Photo



Page No. : 6
Unable to disclose
NRIC / driving licence

Accident Photo



Accident Photo



Accident Photo



Accident Photo



***Enquire Vehicle & Owner Information (Vehicle No. SLN1343M As At 04 Jun 2018 / 14:45:00)**

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: FBH7642K/UM/PDPI

Current Owner Details

Owner ID Type: Singapore NRIC

Owner ID: S1201733B

Owner Name: ANWAR BIN HAROON

Registered Address Type: HDB / HUDC

Registered Block/House No.: 752

Registered Street Name: JURONG WEST STREET 74

Registered Unit No.: # 04 - 24

Registered Building Name: -

Registered Postal Code: 640752

Current Vehicle Details

Vehicle No.: SLN1343M

Make Description/Model: TOYOTA / COROLLA ALTIS 1.6 CVT

Insurance Company Name: AXA INSURANCE PTE LTD

Print

OK

UNIVERSAL MOTORS PTE LTD

*Your Complete Motorcycle Company
For Best Quality And Service*

www.umpl.com.sg

HEAD OFFICE
1006 BUKIT MERAH LANE 2
#01-04 SINGAPORE 159762
TEL: 65 - 6278 2029
FAX: 65 - 6273 2039

SHOWROOM
356 ALEXANDRA ROAD
SINGAPORE 159949
TEL: 65 - 6479 3128
65 - 6479 0326

Co. Reg. No.199003243

Date : 15-Jul-18

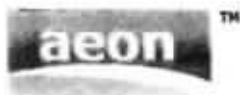
FINAL REPAIR COST OF FBH 7642 K

Date of accident : 4-Jun-18
Make / Model : BAJAJ PULSAR DTS-I 180 MANUAL
Name : Mohamed Sathik Farludeen
Address : C/o: Universal Motors Pte Ltd
Blk 1006 Bukit Merah Lane 2,
#01-04 Singapore 159762

Lump Sum Repair Costs	\$	5,200.00
Plus 7% GST	\$	364.00
	\$	<u>5,564.00</u>

Singapore Dollars: Five Thousand Five Hundred and Sixty Four Only.

Head Office: No. 627, Balestier Road, Singapore 329916 Tel: 6253 8398 / 6251 9167 Fax: 6251 7877
Branch: Blk 4003, Ang Mo Kio Ave 10, Industrial Park 1 #01-114, Singapore 569624 Tel: 6456 0018 / 6457 0136 Fax: 6451 3338
Email: wingyap@singnet.com.sg Reg No: 226769/00C GST Reg. No: M8-8002905-3



INVOICE

TO : MOHAMED SATHIK FARLUDEEN
C/O: UNIVERSAL MOTORS PTE LTD
1006 BUKIT MERAH LANE 2 #01-04
SINGAPORE 159762

Invoice No.: 618/UM684
Date: 15-Jul-2018

PARTICULARS

Vehicle Registration No.: FBH 7642 K
Date of Loss: 04-Jun-2018
Date of Assessment: 14-Jun-2018

SERVICES

FEES

1. Assessment with report Photographs -
Including films, developing, storage and Transport.

\$400.00

TOTAL \$400.00

SINGAPORE DOLLARS FOUR HUNDRED ONLY

We would appreciate your cheque crossed and made payable to:
"AEON AUTO CONSULTANTS LLP" with our invoice no. written on the back of the cheque.

AEON AUTO CONSULTANTS LLP



AEON AUTO CONSULTANTS LLP

50 Chin Swee Road #09-04 Thong Chai Building Singapore 169874
Telephone +65 97687958 Facsimile +65 68264112 Email amas@aeonac.com
Reg. No. LL0701273L (registered with limited liability)

AUTOMOBILE ASSESSMENT REPORT

TO: MOHAMED SATHIK FARLUDEEN
C/O: UNIVERSAL MOTORS PTE LTD
1006 BUKIT MERAH LANE 2 #01-04
SINGAPORE 159762

Our Reference: 618/UM684
Date: 15-Jul-2018

ASSESSMENT OF VEHICLE NO. FBH 7642 K

DATE OF LOSS: 04-Jun-2018

We have carried out a physical assessment at UNIVERSAL MOTORS PTE LTD,
1006 Bukit Merah Lane 2 #01-04 Singapore 159762, according to your instruction
on 14-Jun-2018 and are pleased to submit our report herewith.

1. VEHICLE PARTICULARS

Registration No.: FBH 7642 K
Make & Model: BAJAJ PULSAR DTS-I 180 MANUAL
Year of Registration: 2013
Engine Capacity: 179
Chassis No.: MD2A12D21CCG29451
DJZCCG39003
Colour: BLACK
Mileage (km): 46240

2. VEHICLE CONDITION

Body Paint: GOOD
Steering: SERVICEABLE
Foot Brake: SERVICEABLE
Parking Brake: SERVICEABLE
Modification: NIL

3. TYRE PARTICULARS & CONDITION

Front
Make/Size/Thread: RALCO 90/90 R17 – 75%

Rear
Make/Size/Thread: RALCO 120/80 R17 – 75%

4. DESCRIPTION OF DAMAGE

At the time of the inspection, the vehicle sustained damages to the LHS portion.

5. REMARKS

Market Value:	Na
Salvage Value:	Na
Repair Limit:	Na
Estimated Amount:	\$7,845.53
Adjusted Amount:	\$6,563.03
Lump Sum:	\$5,200.00
Estimated Repair Days:	10 days



Pursuant to your instruction, we have **NOT AUTHORISED** repair.

The assessment was conducted on a "**Without Prejudice**" basis.

If we are not notified of anything to the contrary within **14 days** from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle is involved. No liability or responsibility whatsoever shall be held by Aeon Auto Consultants LLP for any reliance on this report by any third party.

ASSESSMENT REPORT FOR VEHICLE NO. FBH 7642 K

PARTS (LIST ITEMS)

Qty	Description	Condition	Workshop's Estimate	Our Assessment
1	HEAD LAMP	Cracked	310.00	310.00 250
1	HEAD LAMP BRACKET	Bent	68.00	68.00
1	HEAD LAMP COWLING	Cracked	245.00	245.00 180
1	HANDLE BAR LH	Bent	210.00	210.00 150
1	HANDLE BAR RH	Repair	210.00	-
1	HANDLE BRAKE LEVER	Repair	45.00	-
1	HANDLE BALANCER L/R	Bent	130.00	130.00 111.60
1	HANDLE CLUTCH LEVER	Bent	45.00	45.00
1	WING MIRROR ASSY L/R	Cracked	140.00	140.00 140.00
1	HANDLE GRIP L/R	Cut	48.00	48.00
1	FRONT LH SIGNAL LAMP	Cracked	65.00	65.00
1	FRONT RH SIGNAL LAMP	Cracked	65.00	65.00
1	FRONT FORK ASSY	Bent	682.00	682.00 450
1	STEERING STEM	Bent	36.00	36.00
1	STEERING UPPER CONE	Bent	38.50	38.50
1	STEERING LOWER CONE	Bent	40.20	40.20
1	STEERING BALL BEARING RACE SET	Jammed	31.00	31.00
1	FRONT FENDER	Cracked	180.00	180.00
1	FRONT WHEEL RIM	Bent	420.00	420.00 Local
1	FRONT WHEEL BRAKE DISC	Bent	145.00	145.00
1	FUEL TANK ASSY	Repair	510.00	-
1	FUEL TANK SIDE COWLING LH	Cracked	180.00	180.00
1	FUEL TANK SIDE COWLING RH	Repair	180.00	-
1	FOOT GEAR SELECTOR LEVER	Bent	168.00	168.00
1	FOOT REST BRACKET LH	Bent	280.00	280.00 48 Δ
1	FRONT FOOT REST LH	Bent	45.00	45.00
1	REAR FOOT REST LH	Bent	45.00	45.00
1	REAR SEAT LH SIDE COWLING	Cut	280.00	280.00 200
1	SIDE STAND	Bent	220.00	220.00 150
1	REAR MUDGUARD	Repair	180.00	-
1	EXHAUST PIPE PROTECTOR GUARD	Bent	80.00	80.00
1	EXHAUST MUFFER	Bent	490.00	490.00
			5,861.70	4,736.70
			586.17	473.67
			5,275.53	4,263.03

2682-70
2414.43
SN 120
Less 10% discount
Parts Total:

ASSESSMENT REPORT FOR VEHICLE NO. FBH 7642 K

SPECIAL NETT ITEMS

1	FRONT NUMBER PLATE	Bent	20.00	20.00
1	REAR NUMBER PLATE	Bent	20.00	20.00
1	REAR TOP BOX	Cracked	300.00	300.00 ²⁴⁰
1	REAR TOP BOX BRACKET/RAIL SET	Bent	160.00	160.00 ¹²⁰

Special Nett Total : 500.00 500.00

400

LABOUR

S/N	Description	Workshop's Estimate	Our Assessment
1	Check wiring system and light	120.00	³⁰ 100.00
2	To check, align and balance body main frame.	250.00	¹⁵⁰ 200.00
3	Spray painting.	700.00	⁴⁰⁰ 600.00
4	Labour for repair and replace parts.	1,000.00	⁴⁰⁰ 900.00 ²⁸⁰
Labour Total :		2,070.00	1,800.00
TOTAL (PARTS & LABOUR) \$		7,845.53	6,563.03

3914.43

4/5 \$3100.

6 days

The workshop has agreed to undertake the repair on a Lump Sum basis.

The final adjusted Lump Sum contract amount is

\$5,200.00

(SINGAPORE DOLLARS FIVE THOUSAND TWO HUNDRED ONLY)



Amas Ong
Automobile 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 ability.
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	07/06/2018 16:18
Date Of Accident	04/06/2018 14:45
Exact Location Of Accident	ALONG PIE TOWARDS TUAS 36.2KM LANE 3 AND 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH7842K
Insured/Policyholder	
Name Of Registered Owner	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Email Address	FARLU904@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82651651
Alternative Phone No	OTHERS-82651651
Vehicle Particulars	
Manufacturer	BAJAJ
Model	PULSAR-180CC DTS-I (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72033500
Driver	
Name of Driver	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Date Of Birth	09/09/1986
Occupation	INDOOR
Date Of Driving Pass	11/02/2011
Driving Experience	7 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82651651
Fax Number	
Contact Number	OTHERS 82651651
E Mail Address	FARLU904@GMAIL.COM

Address	BLK 443D BUKIT BATOK WEST AVENUE 8 #11-773
Postcode	654443
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 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	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	
Circumstances of Accident	
PLEASE REFER TO POLICE REPORT T/20180604/2178	
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	SLN1343M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ADILAH BINTI ANWAR
NRIC/Passport Number	S8909576Z
Contact Number	96308157
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name	MOHAMED SATHIK FARLUDEEN
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBH7642K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

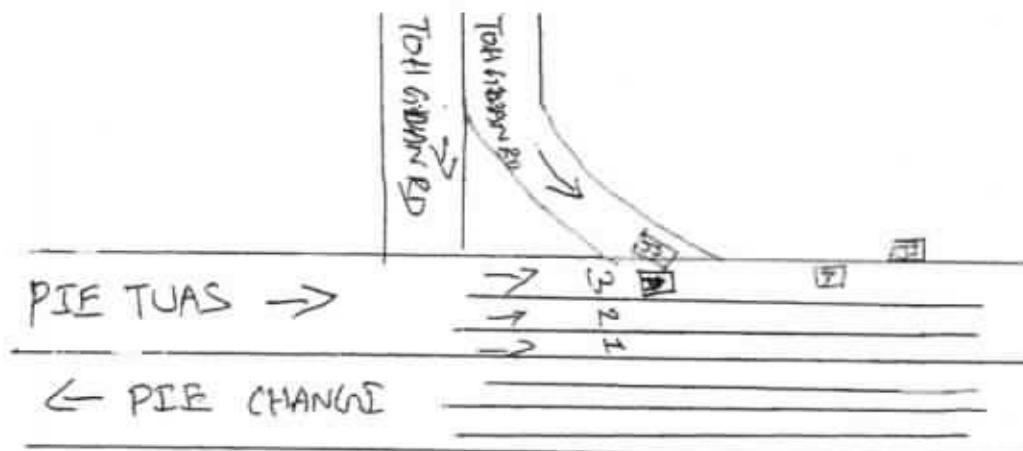
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

07/06/2018
Reporting Centre Personnel's Signature
Name: *Ravi Kumar*
NRIC/FIN No.:

SKETCH PLAN



A) FBH 7642K
B) SLW 1343 M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten notes in the description area:

- REFERR TO POLICE
- 7/2018 664/2128
- REPORT

DECLARATION

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

Police holder's signature
Date & Time

Driver's signature
(If driver is not the police holder)
Date & Time

Reporting Centre Personnel's signature
Name
Date / Time

Handwritten signature and date: 7/06/2018



SINGAPORE POLICE FORCE



T/20180604/2178

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/20180604/2178

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2018 19:35	Vide Report No.:	Station Diary No.: 189
--	------------------	---------------------------

Informant's Particulars

Name of Informant: Mohamed Sathik Farludeen			Address: 443D Bukit Batok West Ave 8 #11-773 SINGAPORE 654443	
ID Type / ID No.: PASSPORT / N2046483			Contact No.: Home/Office: Mobile: 82651651	
Nationality: INDIAN			Email:	
Sex: Male	Age: 31	Date of Birth: 09/08/1986	Type of Informant: Rider	
Race: Indian			Language:	Institution / School Name:
Occupation: sales exocutive			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/06/2018 14:45	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY Along PIE towards Tuas 36.2km lane 3 and 4.				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow:	Traffic Control:	Traffic Volume: Heavy		
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction		Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH7642K	Motorcycle				Slightly Damaged	0
SLN1343M	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180604/2178

2 of 3

Police Station Of Origin:

Bukit Batok N.P.C

21 Bukit Batok East Avenue 4 SINGAPORE

659840

Tel No: 1800-6659999

Report No. T/20180604/2178

CONTINUATION OF REPORT

Rider			
Name	Mohamed Sathik Farludeen	ID No.	N2046483
Related Vehicle	FBH7642K (Motorcycle)	Contact No.	82651651
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	Adllah binti Anwar	ID No.	S8909576Z
Related Vehicle	SLN1343M (Car)	Contact No.	96308157
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

V1 FBH7642K (Motorcycle)

V2 SLN1343M (Car)

On 04/06/2018 at around 1445hrs, I was riding V1 along PIE towards Tuas at the third lane.

Subsequently, V2 was on my left, and wanted to merge into my lane. I did not see V2 on my left and I continued to accelerate. Subsequently out of nowhere, V2 made a sharp right turn and hit against my left side. I lost balance and fell off my bike. V2 subsequently stopped ahead and a passerby called for ambulance. Subsequently ambulance and traffic police arrived at scene. I sustained some injuries. The injuries are as follows, my left elbow sustained some abrasions. My left toe nail is broken. There are some abrasions on my knees and there is also some redness on my neck area. I was not conveyed as I did not feel any pain earlier.

My vehicle also sustained some damages. V1 headlight sustained some scratches and the gear was damaged. The rear box was broken and the left signal was also damaged. My left side mirror was broken. My bike was unable to start and was towed to my residential address. I have not went to the clinic to make a check. I do not have any in built camera.



**SINGAPORE
POLICE FORCE**



T/20180604/2178

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/20180604/2178

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 2 MUHAMMAD SYAFIQ BIN MOHD RAFFA
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt YUS MASTARI I KHAZALI 114 Contact No: 65476214
Authentication Stamp NP 108

Signature Of Informant:
Date/Time: 04/06/2018 19:35
Classification Of Case:



Your Ref: S8M00JNJ

Date: 17th May 2019

Our Ref: CS3/ASM18010762/T1qd3e2-1

M/s Axa Insurance Pte Ltd

8 Shenton Way #24-01

Axa Tower

Singapore 068811

(The Motor Claims Department)

Attn : Tan Wan Cong

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: FBH 7642K
INSURED VEHICLE: SLN 1343M
ACCIDENT DATE: 04/06/2018**

We thank you for your instruction on 22/04/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of FBH 7642K from M/s Aeon Auto Consultants Llp.
- b) Singapore Accident Statement of Vehicles FBH 7642K and SLN 1343M.
- c) Police Report of Vehicles FBH 7642K.
- d) Final Repair Bill of FBH 7642K from M/s Universal Motors Pte Ltd.
- e) Colour damaged vehicle photographs of FBH 7642K.

Pre-Repair Inspection Date : 13/06/2018 at M/s Universal Motors Pte Ltd, Blk 1006 Bukit Merah Lane 2 #01-04, Singapore 159762..

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: FBH 7642K
Make & Model	: Bajaj Pulsar DTS-I 180 Manual
Year of Registration	: 2013
Chassis Number	: MD2A12DZ1CCG29451
Engine Capacity	: 179 cc

2. We recommend that the repairs of the entire damage require about 6 (Six) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.