

ASS. REC. BY:

REF: CS/SM019007214/USD312

Special Instruction:

Surveyor: Marcus**ASSIGNMENT (Office)**

Merimen

From (Person): Gnoh Pau Loong of SMO Date/Time: 24.4.19

Estimated Cost: _____ Bill to: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: FBH 6234L Insured: G4 4721Lat Workshop m/s Ban Hock Hin Tel: 62816520of M06 Defu Lane 4Policy No: D18MTPCUE001089 Claim No: CMTD1901806

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 9.4.2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 24.4.19 1.38p.m Person Contacted: Ishah Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	FBH 6234L - X
	G4 4721L - X
<u>25/4/19</u>	<u>Send preli. revised via merimen</u>

(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:

at Workshop m/s

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.

Bal. or Market Value:

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

LTA 769

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

FBH6234L

Yr Regn:

8.13

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

Truck / Trailer or

Make:

Yamaha

F216

c.c

153

Colour:

Red

A/C: Insured / Std / NI / NA

Sp. Reading

91581

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

ME12/COG6D2013250

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:

100/80/17

R:

130-70-17

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

9/4/19

D.O.I.

24/4/19

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear & n/s Body

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

9/5/19 Confirmed L/S & 900 with Payment.

(\$ 781.00 Red - 47%)

RECEIVED 09 MAY 2019

Date/Time, File Pass to?

09/05/19

1)

Typist

Date/Time, File Return to?

2)



: Preli. Report



: Final Report

Days Of Repair:

4

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

250

10

Add Fee:



: Site Insp (\$

) \$ + RS. \$



: Interview (\$

) Photos



: Tech. Invs (\$

) Others



: Weekend (\$

)

Report Format :

Lump Sum / I.B.I. (\$ 900/- HS)

TOTAL

260

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

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

Singapore 408933

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

To: Sompoo Insurance Singapore Pte. Ltd. 50 Raffles Place #05-01/06, Singapore Land Tower Singapore 048623	From: LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
Attn: GNOH PAU LOONG	Date: 25 Apr 2019

Preliminary Advice

Insured Vehicle No	: GY4721L	Accident Date	: 09/04/2019
TP Vehicle No	: FBH6234L	Assignment Date	: 24/04/2019
Make	: YAMAHA FZ16	Est. Duration of Repair	: 4
Date of Inspection	: 24/4/2019		
Inspection At	: BAN HOCK HIN CO PTE LTD		

The vehicle sustained impact / damages rear portion and n/s body and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	1,681.00
Revised Amount	:S\$	1,301.00
Check Items (Estimated)	:S\$	152.00
Total	:S\$	1,453.00
Lump Sum Repair	:S\$	

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

- () The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- (X) Other comments : The above survey was conducted on a 'Without Prejudice' basis.

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Apr 2019		24 Apr 2019 13:16 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS		[Created by insurer]	
Insured:	INDUSTRIES MECHANICAL CONST SERVICES, Co. Reg. No.: 27620800E		
Main Claimant:	TAN CHOON SHIANG, ID: S7406345D		
Vehicle Reg. No.:	FBH6234L	Date of Loss:	09/04/2019 18:00 - :59
Claim Type:	TP / CMTD1901806	Policy/Cover Note No.:	D18MTPCVE001089 (TP, Fire & Theft)
Vehicle Reg. No. (Insured):	GY4721L	Policy No. (Claimant):	
		Excess:	
RePAIRer:	Ban Hock Hin Co. Pte Ltd (HQ) No. 6 Defu Lane 4, 539410 Defu Lane - Tel: 62816520		
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by GNOH PAU LOONG - 63295217]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 06/05/2019]		
Driver/Custodian (Insured):	WEE EE SENG (), NRIC: S1509519I, Tel: +6598624797 Email:		
Adj Asg. Remarks:	WS: RAYMOND 6281 6520 x 220		

ASSOCIATED MAIL RECEIVED	View All	Compose Case Mail
There are no mail for this case.		

ALL ASSOCIATED TASKS								View All	Search Tasks	Create New Task	Complete
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?		
No results.											

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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	6345D
Vehicle Details	
Vehicle No.:	FBH6234L
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Apr 2019
Vehicle Make:	YAMAHA
Vehicle Model:	FZ 16
Primary Colour:	Red
Manufacturing Year:	2013
Engine No.:	21CG013105
Chassis No.:	ME121C0G6D2013250
Maximum Power Output:	-
Open Market Value:	\$2,274.00
Original Registration Date:	12 Aug 2013
First Registration Date:	12 Aug 2013
Transfer Count:	1
Actual ARF Paid:	\$342.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	11 Aug 2023
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$1,791.00
COE Rebate Amount:	\$769.00
Total Rebate Amount:	\$769.00

The information contained herein is correct as at 24 Apr 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	12/04/2019 08:12
Date Of Accident	09/04/2019 10:20
Exact Location Of Accident	ALONG ANG MO KIO AVENUE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH6234L
Insured/Policyholder	
Name Of Registered Owner	TAN CHOON SHIANG
NRIC No	S7406345D
Email Address	MAY81821974@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97653299
Alternative Phone No	OFFICE-97653299

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ 16
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5066966813-04
Cover Note Number	

Driver

Name of Driver	TAN CHOON SHIANG
NRIC No	S7406345D
Date Of Birth	22/02/1974
Occupation	INDOOR
Date Of Driving Pass	29/05/1997
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97653299
Fax Number	
Contact Number	OFFICE-97653299
EMail Address	MAY81821974@GMAIL.COM

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	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	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 [OTHER]	YISHUN SOUTH NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO T/20190410/2057 LODGE AT YISHUN SOUTH NPC ON 09/04/2019 AT ABOUT 1820HRS, ALONG ANG MO KIO AVE 1 JUNCTION BELOW FLYOVER TOWARDS CTE. SLE, I WAS RIDING MY MOTORCYCLE BEARING PLATE NUMBER: FBH6234L AT THE SECOND LANE FROM THE RIGHT, OF A 4 LANE ROAD. I WAS APPROACHING THE SAID JUNCTION AND INTENDED TO TURN RIGHT AND IT IS A RIGHT TURN LANE. AT THAT JUNCTURE, THE TRAFFIC LIGHT WAS RED AND THE GREEN ARROW WAS LIT GREEN. AS I WAS APPROACHING NEARER TO THE JUNCTION, IT THE RIGHT TURN ARROW TURNED AMBER AND I BRAKED AND SLOW DOWN. WHEN I MANAGED TO COME TO A COMPLETE STOP AT THE JUNCTION, ALL OF A SUDDEN, A LORRY BEARING PLATE NUMBER: GY4721L HAD COLLIDED WITH THE REAR OF MY MOTORCYCLE AND IT RESULTED IN ME FALLING DOWN TOGETHER WITH IT AND IT DRAGGED ME AS WELL. I WAS NOT SEVERELY INJURED BUT WAS ONLY SLIGHTLY. TRAFFIC POLICE AND AMBULANCE COME TO CHECK ON MY INJURIES AND I WAS NOT CONVEYED. I WAS THEN ADVISED TO HEAD TO SEEK MEDICAL TREATMENT IF I WISH TO. I WAS ALSO ADVISED TO LODGE POLICE REPORT IF I WAS GIVEN 3 DAYS MC. SUBSEQUENTLY, I WENT TO KTPH AND GIVEN 3 DAYS MC 09/04/2019 TO 11/04/2019.

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	GY4721L
Vehicle Make/Model/Colour	NISSAN CABSTAR GOLD
Details Of Properties	NA
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WEE EE SENG
NRIC/Passport Number	S1509519I

Contact Number	98624797
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	TAN CHOON SHIANG
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBH6234L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.

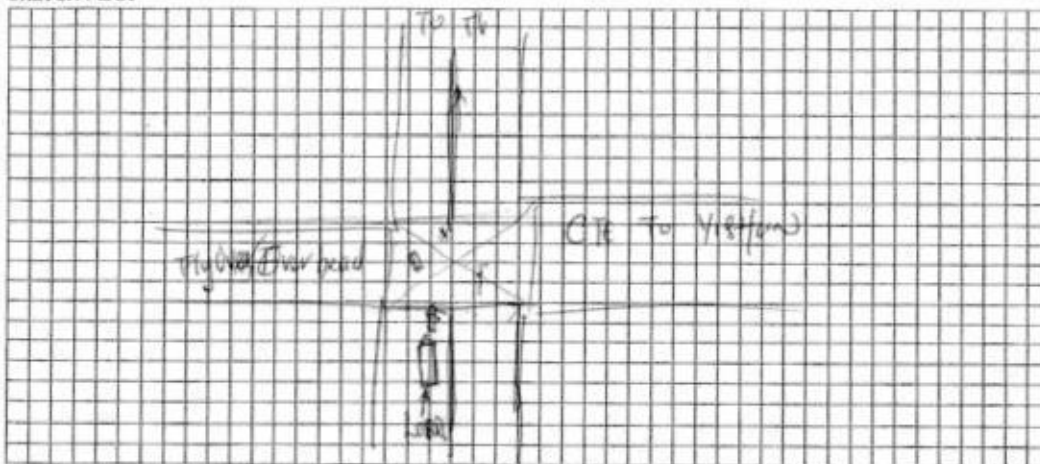

Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is a vertical margin line on the left side, creating a narrow left margin. The paper appears to be from a notebook or a standard ruled sheet of paper.

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

Names:

NROC/FIN No.:

GLAFC SketchPlanForm_V3

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POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190410/2057

1 of 3

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

Report No. T/20190410/2057

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/04/2019 11:28		Vide Report No.:		Station Diary No.: 36
Informant's Particulars				
Name of Informant: TAN CHOON SHIANG		Address: APT BLK 749 WOODLANDS CIRCLE #03-604 SINGAPORE 730749		
ID Type / ID No.: NRIC NO / S7406345D		Contact No.: Home/Office: Mobile: 97653299		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 45	Date of Birth: 22/02/1974	Type of Informant: Rider	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: TECHNICIAN		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/04/2019 18:20	Type of Location: X-Junction
Location: Along Road 1 ANG MO KIO AVENUE 1 along Ang Mo Kio Ave 1 junction below flyover towards CTE towards (SLE)				
Weather: Clear		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH6234L	Motorcycle	YAMAHA	FZ 16	Red	Slightly Damaged	0
GY4721L	Lorry	NISSAN	CABSTAR	Gold		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBH6234L	NTUC Income Insurance Co-Operative Limited	5066966813-04	13/08/2018	12/08/2019

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190410/2057

2 of 3

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

Report No. T/20190410/2057

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	TAN CHOON SHIANG	ID No.	S7406345D
Related Vehicle	FBH6234L (Motorcycle)	Contact No.	97653299
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	09/04/2019	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	WEE EE SENG	ID No.	S1509519I
Related Vehicle	GY4721L (Lorry)	Contact No.	98624797
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.

On 09/04/2019 at about 1820hrs, along Ang Mo Kio Ave 1 junction below flyover towards CTE (SLE), I was riding my motorcycle bearing plate number: FBH6234L at the second lane from the right, of a 4 lane road. I was approaching the said junction and intended to turn right and it is a right turn lane. At that juncture, the traffic light was red and the green arrow was lit green. As I was approaching nearer to the junction, the right turn arrow turned amber and I braked and slowed down.

When I managed to come to a complete stop at the junction, all of a sudden, a lorry bearing plate number: GY4721L had collided with the rear of my motorcycle and it resulted in me falling down together with it and it dragged me as well. I was not severely injured but was only slightly. Traffic police and ambulance came to check on my injuries and I was not conveyed. I was then advised to head to seek medical treatment if I wish to. I was also advised to lodge a police report if I was given 3 days MC. Subsequently, I went to KTPH and was given 3 days MC from 09/04/2019 to 11/04/2019.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190410/2057

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

3 of 3

Report No. T/20190410/2057

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:

L /

Sgt 3 MUHAMMAD RIDWAN BIN SA'MION

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

10/04/2019 11:28

Officer In Charge Of Case:

TP / AEIT /

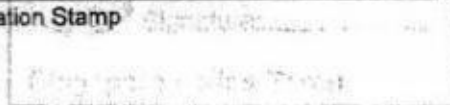
SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

Authentication Stamp

NP168





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 :

NO. : 33977

- Rev. 1

SOMPO INSURANCE SINGAPORE PTE LTD

50 RAFFLES PLACE
#05-01/06 SINGAPORE LAND TOWER
SINGAPORE 048623

MOTOR CLAIMS DEPT

DATE : 13/04/2019

CLAIM NO. : 11318

POLICY NO. :

FROM : RAYMOND

VEHICLE NO. : FBH6234L

MAKE/MODEL : YAM / FZ16

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	BALANCER HANDLE (BLACK) P/N: 44782	REPLACE	2.00	\$8.00	16.00
2	BAR HANDLE P/N: 44886	REPLACE	1.00	\$42.00	42.00
3	BRACKET BOX REAR	Replace	1.00	\$115.00	115.00
4	COVER TAIL CENTER	REPLACE	1.00	\$45.00	45.00
5	COVER TAIL LH (RED) P/N: 59989	REPLACE	1.00	\$55.00	55.00
6	COVER TAIL RH (RED) P/N: 59988	REPLACE	1.00	\$55.00	55.00
7	COVER TANK RH	REPLACE	1.00	\$98.00	98.00
8	FENDER REAR P/N: 50202	REPLACE	1.00	\$56.00	56.00
9	FLAP P/N: 57161	REPLACE	1.00	\$28.00	28.00
10	GRIP THROTTLE LH P/N: 44894	REPLACE	1.00	\$12.00	12.00
11	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED.	Supply/Install	5.00	\$35.00	175.00
12	LAMP SIGNAL FRONT LH P/N: 45129	REPLACE	1.00	\$22.00	22.00
13	LEVER BRAKE P/N: 40317	REPLACE	1.00	\$16.00	16.00



CERT NO.: 2002-1-0383
ISO 9001: 2015

Address: No. 6, Defu lane 4, Singapore 539410 | Telephone: +65 6281 6520 | Web: www.bhh.com.sg

Fax: (Main) +65 6281 2830, (Spare Parts) +65 6285 7530, (Insurance/Project) +65 6284 2969, (Accounts) +65 6281 6759

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/SMO19007214/USD3N2

Date: 14/05/2019

REFERENCE

Handling Insurer:	Sompo Insurance Singapore Pte. Ltd.	Policy No:	D18MTPCVE001089
Claimant Vehicle No :	FBH6234L	Insured Vehicle No :	GY4721L
Date of Loss:	09/04/2019	Nature of Claim:	TP
		Claim No:	CMTD1901806

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	FBH6234L	Engine No:	21CG013105
Make & Model:	YAMAHA FZ16, 153cc (M)	Chassis No:	ME121C0G6D2013250
Reg. Date:	12/08/2013 (Man. Year: 2013)	Odometer:	91581 km
Colour:	Red		
Engine Capacity:	153 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	100/80/17	Rear Tyre Size:	130-70-17
Front Left Side:	Pirelli 6 mm	Rear Left Side:	Pirelli 6 mm
Front Right Side:	0 mm	Rear Right Side:	0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	1,471.00	973.80	497.20	33.80
Miscellaneous Items	0.00	0.00	0.00	
Labour	210.00	185.00	25.00	11.90
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	1,681.00	1,158.80	522.20	31.06
Approved Total (Overridden) (\$\$)		900.00		
(\$\$)	1,681.00	900.00	781.00	46.46
+ GST 7.00/7.00% (\$\$)	117.67	63.00	54.67	46.46
Nett Amount (\$\$)	1,798.67	963.00	835.67	46.46

INSPECTION

Date of Assignment:	24/04/2019	
Date Inspected:	24/04/2019	Inspected At: Ban Hock Hin Co. Pte Ltd (HQ) No. 6 Defu Lane 4 Singapore 539410
Estimated Period of Repair:	4.0 days	

Adjuster: MARCUS CHUA

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our

knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference		
Part Source:	(Last Synchronised: 14 May 2019)	
Parts:	N/A	YAMAHA FZ16 153cc (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for FBH6234L)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BALANCER HANDLE (BLACK)	N/s Scratched	16.00 F	*8.00 FL
2	1		*BAR HANDLE	Bent	42.00 F	*42.00 FL
3	1		*BRACKET BOX REAR	Damaged	115.00 F	*115.00 FL
4	1		*COVER TAIL CENTER	Cut	45.00 F	*45.00 FL
5	1		*COVER TAIL LH (RED)	Cracked	55.00 F	*55.00 FL
6	1		*COVER TAIL RH (RED)	Cracked	55.00 F	*55.00 FL
7	1		*COVER TANK RH (SCRATCHED)	Not Consistent With The Impact	98.00 F	*- FL
8	1		*FENDER REAR	Cracked	56.00 F	*56.00 FL
9	1		*FLAP	Torn	28.00 F	*28.00 FL
10	1		*GRIP THROTTLE LH	Torn	12.00 F	*12.00 FL
11	1		*LAMP SIGNAL FRONT LH	Scratched	22.00 F	*22.00 FL
12	1		*LEVER BRAKE (SCRATCHED)	Not Consistent With The Impact	16.00 F	*- FL
13	1		*LEVER CLUTCH	Scratched	16.00 F	*16.00 FL
14	1		*MIRROR LH	Cut	22.00 F	*22.00 FL
15	1		*PROTECTOR MUFFLER (SILVER) (SCRATCHED)	Not Consistent With The Impact	45.00 F	*- FL
16	1		*SCOOP AIR LH	Cracked	36.00 F	*36.00 FL
17	1		*SCOOP AIR RH	Not Necessary	36.00 F	*- FL
18	1		*BOX REAR (GIVI) TREKKER MONOKEY BLK W/ALUM	Cut	636.00 F	*450.00 FL
19	2		*TUBE TOOL (WITH LOCK)	Cracked	120.00 F	*120.00 FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$) **1,471.00** **1,082.00**
 - List Item Discount on L Items 0.00/10.00% (S\$) **0.00** **108.20**

Total Parts (S\$) 1,471.00 973.80

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	LABOUR-FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED	New	175.00	150.00
2	TRANSPORT CHARGES-FOR COLLECTION OF ACCIDENT BIKE	New	35.00	35.00
Gross Labour Cost (\$\$)			210.00	185.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >