| CWS - | Steva | The same of the sa | MENT (Office | | | 1-1. |
|-----------------------------------|-----------------------------------|--|------------------|----------|--------------------|----------|
| rom (Person): | Joanne | yorg, | FCI | Date | /lime: 5.03p | m@81511 |
| Estimated Cost: | | . Value | Bill to: | | | |
| To hispect Vehi | TP RES / OD RES | | 582 | Insured: | SHD3897 6584691 | 1. |
| it Workshop m | 15 | JC MOT | nr | Tel: | 6584691 | 4 /9889 |
| of | B11 13 | Kaki Buluit | Rd 4 # | 01-16 | 333,11 | (po |
| olicy No: | | 7 | | | 2905MFSH | |
| Sum Insured: | | | Excess | | | |
| Make of Veh:_ Client's Record) | ANS LIGHT | | | D.0 | 1 24/04/2 | nola |
| | REP. / REV 24 H | (wp) | | 10 | O.D. Endorsement | |
| Date/Time: 10: | pamadals la | Person Contacte | d: jl M r | W. Velic | INOUT | |
| Date/Time | Action/Instruction (FBG S8 2— | × | | Ray. | | • |
| | SID 38077 | - x8/FC[180 | M178 Bu | 3n2 | DOA. | 6/3/2018 |

| (00.17.1.4 | REF: FC1 | | | |
|------------------------------|------------------------|---|---------------------------------------|-------------|
| annique Steve | | ASSIGNMENT | | |
| PRS | | -11 CC 1 | | 12 |
| From: | Date: 1015 201 | Veh No: FBG SFZ Type: M.Car / M.Cycle Bus / Van / Lo | Yr Regn: / | 12 |
| Estimated Cost: | | | my r taxi r time mover r | |
| OD (TP) WS / TP RES / OD RES | | Truck / Trailer or Make: Honda CBISOF | c.c [L | +9 |
| To Inspect Vehicle No: | FBG 582 | Make: Monda CISTS OF | A/C: Insured / Std / N | |
| at Workshop m/s | JC Motor | 4/2 | T/Radio: Insured / Std / | |
| of BIK 13 Kaki B | kt Rd 4 # 01-16 | | Titadio. Illustrati | |
| Insured: | (Bat) | I ALLECTIACON | A . 3461 | 991 |
| Policy No. | | | | , |
| Claims No. | | Gen. Cond: Good (Fair) Poor / Burnt | | |
| Sum Insured: | Excess: | Steering morder / Jammed / Leaked | | |
| (Client's Record) | | Brake: (norder/ Jammed / Leaked | | |
| Make of Veh: Look For | Ray @ 9889510 | Modi: Nil SiRin / STD A/Rim or | | |
| | , | Tyre Size: F: 87/1 | 70 | mee'z |
| (Policy Condition) | | R: T | · · · · · · · · · · · · · · · · · · · | |
| Remark: The veh had commen | | O/S BS / DUN / EXNOVA / GY / FS / LIZA | | 17 |
| repair at the time of i | nspection. | TOYO/YOKO or FI | KR | |
| Bal. or Market Value: | | Front | Rear 7 | |
| IDAC Accident Rport: | Consistent?: Yes or No | R/Bal. 7 mm | R/Bal. | mm |
| GIA / PR Seen: | Consistent?: Yes or No | L/Bal. mm | L/Bal. | mm |
| Est. Repairs: | days Res.: Yes or No | D.O.A. 14/4/19 | D.O.I. 10/5/19 | |
| Lum Sum: | % 3 Val.: Yes or No | Survey held at | | 1 |
| 01 1 DEV 1 DED 1 341 | HRS (WP) | Des. of Damages : Frt / Rear / Q/S | NIS / U/C / Rooftop o | or . |
| CA / REV / REP. / 24 | Vehicle: IN | N/OUT | . Di elfeated due t | o collision |
| Date: Person | Contacted: | The U/C / Chassis frame / Boo | dy Structure affected due to | o comsion. |
| Date / Time Action / Instr | uction . | Finally conft \$1290, 3 de (Red >105, 649) | of Cimmy 29 | 17/19) |
| | IA Report 7 | (Red sinc 649) | de Chilini | |
| maricet | rollor 6 | Clara 2103, 0412 | | |
| LOD can | GO GIN Repun (| Dun have 1 | | |
| | 3 | | | |
| | | RECEIVED 2 9 JUL 2019 | | |
| | 3 | | | |
| | | | | |
| Date/Time, File Pass to? | : Preli. Report | Days Of Repair: | | |
| 0 | : Final Report | Resurvey No. of Trip: | Survey Fee: | 130 |
| Date/Time, File Return to? | | | Transportation: | 50 |
| 2) 29tr - typist | Ad | dd Fee: Site Insp (\$ |) S +RS,SI | 50+50 |
| 3 | | : Interview (\$ |) Photos | 65 |
| Report Format : C | wS | : Tech. Invs (\$ |) Others | |
| Lump Sum / f.B.I: (\$ | 1200k | : Weekend (\$ | | |
| | | 2. | TOTAL | 345 |



Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

07-05-2019

Our Ref No. D19002995MFSH

Accident Date

24-04-2019

Claim Type. Third Party

Insured Vehicle

SHD3897T

Third Party Vehicle. FBG58Z

Survey Location

BLK 13 KAKI BUKIT ROAD 4#01-16 BARTLEY BIZ CENTRE

Contact Person.

JIMMY BOEY

Contact No.

65846914/0

Fax No. 65846912

Survey Type

WITHOUT PREJUDICE:

Appointed Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

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

Cc: Workshop

JC MOTORS (PTE. LTD.)

Attention. NIL

Cc : TP Solicitor

SINGH & CO

TP Solicitor Fax No. 63383762

Officer Incharge

JOANNEY

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.

Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Friday, 31 May 2019 2:20 PM

To:

'CWS Motor Claims'

Cc:

'Joanne Yong Lai fong'; SUR

Subject:

RE: SURVEY ASSESSMENT - D19002995MFSH/1, FBG 58Z

Attachments:

FBG 58Z PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle FBG 58Z

Date of survey: 10/5/2019 Number of days: 3 days

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAuto)

Sent: Thursday, 9 May 2019 4:46 PM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Joanne Yong Lai fong' <Joanneyong@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D19002995MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that repairer agreed survey on 10/05/2019.

Best Regards,

G.Nivitha Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Wednesday, 8 May 2019 5:03 PM To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>; Joanne Yong Lai fong

<Joanneyong@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19002995MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards, Admin Team Claim Workflow System Motor Claims Department MS First Capital Insurance Limited

Tel: 6507 3848 Fax: 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.



This email has been checked for viruses by AVG antivirus software. www.avg.com

Company Registration No. 199607198

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 625643

Your ref:

D19002995MFSH

Our ref:

CS/FCI1908228/Evd3

Date: 31/5/2019

The Motor Claims Department

MS FIRST CAPITAL INSURANCE LTD

Without Prejudice

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. FBG 58Z

We thank you for your instruction on 8/5/2019

Please be informed that we had conducted the inspection of the above mentioned vehicle on 10/5/2019 at the premises of M/s JC MOTORS PTE LTD

and have the following to report:-

 Workshop Estimate Amount
 : \$\$3,305.00

 Revised Estimate Amount
 : \$\$1,421.00

 "Check" Items Amount
 : \$\$

 Market Value
 : \$\$

 LTA Reimbursement Value
 : \$\$

 Nett Value
 : \$\$

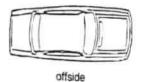
rear

Description of Damage:

The vehicle sustained damages at the

o/s body

nearside



front

Comments/Present Status:

Damages Consistent

Yours faithfully,

STEVE CHEN

Automotive Assessor

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars | | |
|--|-------------------|--|
| Owner ID Type: | Singapore NRIC | |
| Owner ID: Vehicle Details | 0792F | |
| Vehicle No.: | FBG58Z | |
| Vehicle to be Exported: | No | |
| Intended Deregistration Date: | 31 May 2019 | |
| Vehicle Make: | HONDA | |
| Vehicle Model: | CBF150 | |
| Primary Colour: | Black | |
| Manufacturing Year: | 2010 | |
| Engine No.: | KC11E2015483 | |
| Chassis No.: | LALKC11A8A3461981 | |
| Maximum Power Output: | | |
| Open Market Value: | \$1,534.00 | |
| Original Registration Date: | 20 Feb 2012 | |
| First Registration Date: | 20 Feb 2012 | |
| Transfer Count: | 1 | |
| Actual ARF Paid: Intended PARF Rebate Details | \$231.00 | |
| PARF Eligibility: | No | |
| PARF Eligibility Expiry Date: | • | |
| PARF Rebate Amount: Intended COE Rebate Details | \$0.00 | |
| COE Expiry Date: | 19 Feb 2022 | |
| COE Category: | D - Motorcycle | |
| COE Period(Years): | 10 | |
| QP Paid: | \$1,682.00 | |
| COE Rebate Amount: | \$458.00 | |
| Total Rebate Amount: | \$458.00 | |

The information contained herein is correct as at 31 May 2019

OK

> Back to OneMotoring

| Enquire Transfer F | 99 |
|--------------------|----|

| Vehicle Details | |
|-----------------------------------|---|
| Vehicle No.: | FBG58Z |
| Vehicle Type : | P00 - Passenger Motorcycle/Autocycle/Moped |
| Vehicle Attachment 1: | No Attachment |
| Vehicle Scheme : | Normal |
| Vehicle Make : | HONDA |
| Vehicle Model : | CBF150 |
| Chassis No.: | LALKC11A8A3461981 |
| Propellant: | Petrol |
| Engine No.: | KC11E2015483 |
| Engine Capacity : | 149 cc |
| Maximum Power Output: | • |
| Maximum Laden Weight: | 309 kg |
| Unladen Weight: | 140 kg |
| Year Of Manufacture : | 2010 |
| Original Registration Date : | 20 Feb 2012 |
| Lifespan Expiry Date : | • |
| COE Category: | D - Motorcycle |
| Quota Premium : | \$1,682.00 |
| COE Expiry Date : | 19 Feb 2022 |
| Road Tax Expiry Date : | 19 Aug 2019 |
| Inspection Due Date : | 19 Feb 2020 |
| Intended Transfer Date : | 29 Jul 2019 |
| CO2 Emission : | • |
| CO Emission : | • |
| HC Emission : | |
| NOx Emission : | |
| PM Emission : | |
| The current road tax expiry is 19 | Aug 2019. You may renew the road tax from 20 May 2019 with all pre-requisite(s) fulfilled. If the road tax is renewed after |

The current road tax expiry is 19 Aug 2019. You may renew the road tax from 20 May 2019 with all pre-requisite(s) fulfilled. If the road tax is renewed after 19 Aug 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 20 Aug 2019 to 19 Feb 2020)

| | Amount Before GST | GST Amount | Amount After GST |
|--|-------------------|------------|------------------|
| | (S\$) | (S\$) | (S\$) |
| Transfer Fee : | 25.00 | | 25.00 |
| Sub Total : | | | 25.00 |
| Nett Road Tax Amount (After Offsetting Over Payment) : | 32.00 | 5 | 32.00 |
| Total Amount Payable : Amount Payable (From 20 Aug 2019 | 9 to 19 Aug 2020) | | 57.00 |
| | Amount Before GST | GST Amount | Amount After GST |
| | (S\$) | (5\$) | (5\$) |
| Transfer Fee : | 25.00 | | 25.00 |
| Sub Total : | | | 25.00 |
| Nett Road Tax Amount (After Offsetting Over Payment) : | 64.00 | * | 64.00 |
| Total Amount Pavable : | | | 89.00 |

You may print this page for reference.

OK Print



REPUBLIC OF SINGAPORE DENTITY CARD NO S8100792E





MUHAMMAD FAHMY BIN ABU

Race MALAY Date of birth 06-01-1981 SINGAPORE

53100792F

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

NP 428A

Motorcycles =< 200 cc
Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg
*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg
*Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

Licence No: S8106792F



Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 29/04/2019 16:32

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Fax Number Contact Number

EMail Address

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

| aforesaid. | sent to the archiving of this report at the centre and to copies of the report being made available |
|--|---|
| all the state of t | ACCIDENT STATEMENT |
| Date Of Report | 29/04/2019 13:45 |
| Date Of Accident | 24/04/2019 18:25 |
| Exact Location Of Accident | MOULMEIN ROAD / NEWTON ROAD |
| Country/State of Loss | SINGAPORE |
| Committee of the Commit | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | FBG58Z |
| Insured/Policyholder | |
| Name Of Registered Owner | MUHAMMAD FAHMY BIN ABU |
| NRIC No | S8100792F |
| Email Address | ANASARYAN08@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-86606126 |
| Alternative Phone No | OFFICE-86606126 |
| Vehicle Particulars | The term of the second of the |
| Manufacturer | HONDA |
| Model | CBF150 |
| Exact Purpose for which vehicle was being used at time of accident | |
| 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 |
| Fleet Policy | NO |
| Policy Number | 5099045070-01 TP |
| Cover Note Number | |
| Driver | |
| Name of Driver | MUHAMMAD FAHMY BIN ABU |
| NRIC No | S8100792F |
| Date Of Birth | 06/01/1981 |
| Occupation | INDOOR |
| Date Of Driving Pass | 11/06/2001 |
| Driving Experience | 17 YEARS AND 10 MONTHS |

MALE

(LOCAL) +65-86606126

ANASARYAN08@GMAIL.COM

OFFICE-86606126

. Address

BLK 308C #02-334 PUNGGOL WALK WATERWAY TERRACES I

Postcode

823308

OWNER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

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

YES

ambulance?

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

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT 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

SHD3897T

Vehicle Make/Model/Colour

TOYOTA PRIUS 5DR HATCHBACK (AUTO)

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)

" 3

| DETAILS OF INJURED PERSON 1 |
|---|
| MUHAMMAD FAHMY BIN ABU |
| 38 |
| |
| FBG58Z |
| |
| YES |
| BLK 308C #02-334 PUNGGOL WALK WATERWAY TERRACES I |
| 823308 |
| |

SKETCH PLAN

IMPORTANT NOTICE

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

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:
 - 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 malling 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/mall 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 2 9 APR 2019

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

Name: NRIC/FIN No.:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
REmail: Grankb@singastcoum.se

BARMS WHILE HIS COUNTY

| SKETCH PLAN | MOULH | ENTED TOWARDS A | EWION ROAD |
|--------------------------------|---------------------------|---|---|
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| ESCRIBE CIRC | JIMSTANCES OF | THE ACCIDENT | |
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| V) TISUS | DIAM DAG | anasaryAH 08 Bgmail. | COM |
| CLARATION e declare the for | egoing particulars | are true in every respect. | IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 |
| A. | Padiera is De Lase Tom | | Singapore 415933 Tel: 67416697 Fax: 67492305 |
| cyholder's Signatu & Time: | re | Driver's Signature | Email: vackb@singnet.com.sg Reporting Centre Personnel's Signature |
| | APR 2019 | (If driver is not the policyholder) Date & Time: | Name: |





1 of 3

Report No. T/20190426/2081

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 26/04/2019 15:44 | | ade: | Vide Report No.: | Station Diary No.: | |
|---|------------|-----------|---|----------------------------|--|
| Informant | 's Particu | lars | | | |
| Name of Informant: MUHAMMAD FAHMY BIN ABU | | | Address: APT BLK 308C PUNGGOL WALK #02-334 WATERWAY TERRACES I SINGAPORE 823308 | | |
| ID Type / ID No.: NRIC NO / S8100792F Nationality: SINGAPORE CITIZEN | | | Contact No.: Home/Office: Email: | Mobile: 86606126 | |
| Sex: Age: Date of Birth: Male 38 06/01/1981 | | | Type of Informant: Rider | | |
| Race: Malay | | | Language: English | Institution / School Name: | |
| Occupatio GRABFO0 | | ERY RIDER | Driving Licence Information: Class: 2B,3,4 | Date of Expiry: | |

| | I - to come | 6 | | T. | |
|--|------------------------------|-----------------------|---|------------------|---------------------------------|
| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 24/04/2019 18:25 | | Type of Location: X-Junction |
| Location: | | | | | |
| MOULMEIN R | OAD | | | | |
| ALONG MOUL | MEIN ROAD X NEWTO | N ROAD | | | |
| Weather: | | Road Surface: | | Pood ! | 0 11: " |
| vveatner. | | noau Sunace. | | noau | Speed Limit: |
| Cloudy | | Wet | | noau | Speed Limit: |
| Cloudy | | | | | Volume: |
| | | Wet | rking | | Volume: |
| Cloudy Traffic Flow: | on: | Wet Traffic Control: | rking | Traffic Moder | Volume: |
| Cloudy Traffic Flow: Type of Collision | on: e Against - Others | Wet Traffic Control: | rking | Traffic Moder | Volume: ate e conveyed by |

| Details of V | Details of Vehicle Involved | | | | | |
|--------------|-----------------------------|--------|-----------------------------------|-------|-----------|-----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
| FBG58Z | Motorcycle | HONDA | CBF150 | Black | | 0 |
| SHD3897T | TAXI | ТОУОТА | PRIUS 5DR HATCHBAC K (AUTO) | Blue | | 0 |

| Details of Vehicle Insurance | | | | | | |
|------------------------------|-------------------|--------------|-----------|-------------|--|--|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date | | |





2 01

Report No. T/20190426/2081

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | | | |
|------------------------------|--|---------------|------------|-------------|--|--|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date | | |
| FBG58Z | NTUC Income Insurance Co-Operative Limited | 5099045070-01 | 16/03/2019 | 19/02/2020 | | |

| Details of Perso | | | | | | |
|-------------------|-----------------------------|-----------|--------------------------------|-------------------------------------|-----|--------------------------------------|
| Any Pedestrian Ir | nvolved: No | | | | | |
| No. of Pedestrian | s Injured: NIL | | Use of Pedestrian Crossing: NA | | | ing: NA |
| Rider | | | | | | |
| Name | MUHAMMAD FAHM | Y BIN ABU | | ID No. | | S8100792F |
| Related Vehicle | FBG58Z (Motorcycle) | | | Contact No. | | 86606126 |
| Hospital/Clinic | inic TAN TOCK SENG HOSPITAL | | | Class Drivin Licent Expire | g | Class: 2B,3,4 Date of Expiry: NIL |
| Date Treatment | nt 24/04/2019 Date D | | Date Disch | | | /2019 |
| | ted Medical Leave | 05 | Degree of | Injury | NIL | |

Brief Details.

ON THE ABOVE MENTIONED DATE TIME AND LOCATION,
I WAS TRAVELLING ALONG THE SAID LOCATION. THERE WAS 4 LANES. I WAS AT THE LEFT
MOST LANE GOING STRAIGHT APROACHING THE JUNCTION, TRAFFIC LIGHT WAS IN MY
FAVOUR WHILE I WAS HALFWAY THROUGH THE JUNCTION A TAXI VEHICLE OF (SHD3897T)
SUDDENLY MAKE A RIGHT TURN WITHOUT GIVING WAY DUE TO THAT I SWERVE TO THE LEFT
AND THROW MY BIKE JUST TO AVOID COLLISION WITH THE TAXI VEHICLE OF (SHD3897T).
THAT'S ALL.





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Report No. T/20190426/2081

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

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 TP / MUHAMMAD HAZIQ BIN SAIFUDDIN | Signature Of Informant: | | |
|---|-----------------------------|--|--|
| Signature Of Interpreter: Not applicable | Date/Time: 26/04/2019 15:44 | | |
| Officer In Charge Of Case: | Classification Of Case: | | |
| TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476232 | SINGAPORE POLICE FORCE | | |
| Authentication Stamp NP168 | | | |
| | Signature: | | |

WHI PROJUSIN 10/5/19, 11.15 am LIS Johns R. Aliny 8322 8813

JC MOTORS PTE LTD

Blk 13 Kaki Bukit Road 4 #01-16 S'pore 417807 97433222 Tel 65846914 Fax 65846912

DATE May 3, 2019 Quotation # FBG58Z

May 7, 2019

Quotation valid until:

Make/Model: HONDA CB150F Prepared by: Jimmy Boey Number Plate (Front /Rear) x \$25.00 X \$25.00 1 Na \$220.00 X 1 Front Fork Assy x /// 10 \$198.00 Steering Cone Set x M/ \$110.00 X 1 10 \$99.00 Steering Stem > M/1/ \$130.00 X 10 \$117.00 1 Handle Grip / (47 \$30.00 / 10 \$27.00 1 1 Handle Bar/Balancer / 11 \$120.00 10 \$108.00 \$30.00 / 1 clutch Lever / (MT 10 \$27.00 1 clutch Holder / \$50.00 / 10 \$45.00 Front Cowling LH / CMT \$180.00 / 1 10 \$162.00 Front Signal Lamp LH / CVT \$60.00 48 10 \$54.00 1 \$220.00 8 Front Fender / CVT 1 10 \$198.00 \$160.00 / 1 Engine Guard / // 10 \$144.00 Lower Cowling / CPT \$140.00 / 10 \$126.00 1 Front Fpptrest assy IH ×)//(1 \$110.00 X 10 \$99.00 1 IU Meter X MI 1 \$170.00× Na \$170.00 Head Lamp stay x M/1 \$140.00 X 1 10 \$126.00 Rear Box with Bracket × /1/1 \$120.00× 10 \$108.00 1 \$480.00 X 10 \$432.00 Repair Body Frame x R 1 704.70

| | | | Sub-Total | \$2,265.00 |
|-----|--|------------|-----------|------------|
| QTY | Description | UNIT PRICE | DISCOUNT | LINE TOTAL |
| | Service | | | / |
| 1 | Paint-Work | \$400.00 | NA 3 | \$400.00 |
| 1 | Labour (Dismantle Belting, Gear box, Rear body Frame) | \$600.00 | NA / | \$600.00 |
| 1 | Towing | \$40.00 | NA | \$40.00 3 |
| LK | LKK Auto Consultants hence notify | | | \$3,305.00 |

the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- · Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

| P-794.70 |
|----------|
| L-780 |
| 1484-11 |
| = 1299 |

Completion Time: 14 Days.



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 Interna | tionale Des Experts En Autom | obile |
|------|--------------------------------|--|--------------------------------|------------|
| MS I | FIRST CAPITAL IN | ISURANCE LTD | Ref : CS/FCI1900822 | 28/Evd3e2 |
| | OBINSON ROAD 01 CITY HOUSES | INGAPORE 068877 | Date: 13-08-2019 Code: FCI2 | |
| 1. | | Policy Particular | rs :- THIRD PARTY CLAIR | M |
| | Insured Veh. | SHD 3897T | Veh. Inspected | FBG 58Z |
| | Policy No. | | Coverage (\$) | 0.00 |
| | Claim No. | D19002995MFSH | Excess (\$) | 0.00 |
| | Assign From | JOANNE YONG | Assign Date | 08/05/2019 |
| 2. | | Vehicle Pa | rticulars & Condition | |
| | Make & Model | HONDA CBF150 | c.c | 149 |
| | Engine No. | HIDDEN | Year of Reg. | 2012 |
| | Chassis No. | LALKC11A8A3461981 | Colour | BLACK |
| | Odometer | 14563 | Steering | IN ORDER |
| | Brakes | IN ORDER | Modification | SPORTS RIM |
| | General | FAIR | | |
| 3. | | Conc | litions of Tyres | |
| | | Size | Make | Balance |
| | R/H Front Tyre | 80/90-18 | FKR | 7 mm |
| | L/H Front Tyre | | | mm |
| | R/H Rear Tyre | 80/90-18 | FKR | 7 mm |
| | L/H Rear Tyre | | | mm |
| 4. | | | otion of Damages | |
| | THE VEHICLE SU | STAINED DAMAGES AT THE | O/S BODY. | |
| | DAMAGES SEE D | ETAILS. | | |
| 5. | | Gene | ral Information | |
| | Accident Date | 24/04/2019 | Inspection Date | 10/05/2019 |
| | Survey held at | JC MOTORS PTE. LTD. | | |
| | | 13 KAKI BUKIT ROAD 4 #01-16 BARTLEY BIZ CENTRE SINGAPORE 417807 | | |
| 5a. | | | Remarks | |
| | B)THE INSPECTION | ISISTENT TO ACCIDENT REP ON WAS CONDUCTED ON A"V CE TO YOUR INSTRUCTIONS | VITHOUT PREJUDICE" BAS | |
| 5b. | | Estima | te Days of Repair | |
| | ESTIMATED NOR | MAL PERIOD FOR REPAIR: | 3 Working Day | s |



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBG 58Z

| Qty | Description of Parts | Condition | Estimate By Workshop (\$)) | Our Adjusted (\$) |
|-----|---|-------------------------|-------------------------------|-------------------|
| | REPLACEMENT OF PARTS | | | |
| 1 | FRONT FORK ASSY | NOT NECESSARY | 220.00 | |
| 1 | SET STEERING CONE | NOT NECESSARY | 110.00 | - |
| 1 | STEERING STEM | NOT NECESSARY | 130.00 | |
| 1 | HANDLE GRIP | CUT | 30.00 | 30.00 |
| 1 | HANDLE BAR / BALANCER | BENT | 120.00 | 60.00 |
| 1 | CLUTCH LEVER | CUT | 30.00 | 30.00 |
| 1 | CLUTCH HOLDER | BENT | 50.00 | 50.00 |
| 1 | FRONT COWLING LH | CUT | 180.00 | 180.00 |
| 1 | FRONT SIGNAL LAMP LH | CUT | 60.00 | 48.00 |
| 1 | FRONT FENDER | CUT | 220.00 | 85.00 |
| 1 | ENGINE GUARD | BENT | 160.00 | 160.00 |
| 1 | LOWER COWLING | сит | 140.00 | 140.00 |
| 1 | FRONT FOOTREST ASSY LH | NOT NECESSARY | 110.00 | - |
| 1 | HEAD LAMP STAY | NOT NECESSARY | 140.00 | - |
| 1 | REAR BOX WITH BRACKET | NOT NECESSARY | 120.00 | - |
| 1 | BODY FRAME | TO REPAIR SEE LABOUR | 480.00 | - |
| | LESS 10% DISCOUNT | | -230.00 2,070.00 | |
| | SPECIAL NETT ITEMS | | 2,070.00 | 704.70 |
| 1 | NUMBER PLATE (FRONT/REAR) (SN) | NOT NECESSARY | 25.00 | |
| -1 | IU METER (SN) | NOT NECESSARY | 170.00 | |
| | | | 195.00 | |
| | LABOUR | | | |
| | PAINT-WORK. | | 400.00 | 300.00 |
| | LABOUR (DISMANTLE BELTING, GEAR BOX, REAR BODY FRAME). INCLUSIVE OF THE REPAIR OF BODY FRAME. | | 600.00 | 450.00 |
| | TOWING. | | 40.00 | 30.00 |
| | | | 1,040.00 | 780.00 |
| | GRAND TOTAL | | 3,305.00 | 1,484.70 |

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| RECOMMENDED COST OF LUMP SUM REPAIRS | | 1,200.00 |
|--------------------------------------|--|----------|
| (TO ITS PRE-ACCIDENT CONDITION) | | |

Report Ref No. CS/FCI19008228/Evd3e2



CHEN TSUE YEE

Automotive Assessor

X.S.

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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