ASS, REC. BY	REF	: ce3 A161900	29876 Gcd	Specis	a) lactriction:	
Suiveyor .		ASSTONME	INT (Office)	2		٠.
From (Person); Chin Lee Ying	_ of	ĝ	D	sterTime: 46	2019
	ust:		Bill to:			
OD TP W	STTPRES / OD RES / E	VA/THV/MV/C	S			
To Inspect V	whicle No: FBL 78	18		Insured:	SMA 7197 K	
M Workshop				Tel:	8380 2033.	Jacky
of 10 K	aki Bukit Rd 2 # 01-1	16				0
Policy No:_			'Claim No:	041926	083086	
Sum insured:			Excess:			
Make of Veh (Client's Recer				, D.	O.A. 2652	019
CA / REV	REP. / REV 24 HRS				H.O.D. Endorsement:	
Date/Time_	F	Person Controlled: _		Veb	icle INLOUT	
Date/Time	Action/Instruction (X) Estimate				
	FBL781SX					
	SMA FAFK-X					
	Dismartle: 10/6/20	19				
	After repair: A 6 20					
	140. 140	4				
	-					

. .

REF: AE	7.
GV.	ASSIGNMENT
rom: Date:	Veh No: FBC78/S Yr Regn: May 16
estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
DD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Handa PCX 150 a.c 153
t Workshop m/s	Colour Black A/C: Insured / Std / NI / NA
f	Sp.Reading 43393 T/Radio: Insured / Std / NI / NA
	Eng/No:
nsured:	C/No: MLHKF2084F5231632
Policy No.	Gen. Cond: Good / Fair / Poor / Burnt
Claims No.	
Sum Insured: Excess:	Steering: Inor@er / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nij) S/Rim / STD A/Rim or
	Tyre Size: F: 90/90-14
(Policy Condition)	R: (a0/90-14
Remark: The veh had commenced its	1 1 20, 2011 2 1110 1110 1110 1110 1110
repair at the time of inspection.	TOYO/YOKO OF MAXX IS
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
DAC Accident Rport: Consistent? : Yes or No	R/Bal mm R/Bal mn
GIA / PR Seen: Consistent? : Yes or No	L/Bal. mm L/Bal. mn
Est. Repairs: 2 days Res.: Yes or No	
Lum Sum: % 3 Val.: Yes or No	Survey held at W/S Shur
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / DIS / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction	The O/C / Chassis haire / Body Structure anested due to comision
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
1) : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: Transportation:
2)	Add Fee: : Site Insp (\$)S+RS,SI
	: Interview (\$) Photos
Report Format : DAR	: Tech. Invs (\$) Others
Report Format : DAR Lump Sum / I.B.I: (\$: Tech. Invs (\$) Others

...CLAIM SUBFOLDER...(Pending for Survey Report)

	FOLDER TRA		Adj Assigned	Adi Rpt	Adi Subr	nitted	Ins Auth'ed	Status		
Main	28 May 2019 Edit Reg	Est Submitted	06 Jun 2019 00:00 Edit Adj Rpt		7.0,000			Pending for Survey Report Cancel Case		
	Main	Re	ference		Claim Details	\Box	Docume	nts	Show All	
CLATM CI	BFOLDER DE	TATIS				[Creat	ed by adjuster]			
nsured:	GOLDBEL	L CAR RENTAL P	TE LTD, Co. Re	eg. No.: 200	710651D					
Main Claimant:		BIN KARIM								
Vehicle Reg	FBL781	s			Date of Loss: Policy/Cover	26/05/2	2019 00:00 - :59			
Claim Type	: TP / 041	TP / 0419260830SG				(Comprehensive)				
Vehicle Re No. (Insured):	SMA7197	ик			Policy No. (Claimant):					
(Ilisarca).					Excess:					
Repairer:	Motor 51	Pte Ltd (HQ) No	. 2 Kaki Bukit Av	venue 2 #01	-18 Kaki Bukit Au	itohub, 4	17921 Kaki Bukit	- lel:		
Handling Insurer:	The second containing the second	100 - 1 - 1					led by MdNoor, N		7/06/2019	
Adjuster:		Consultants Pto	e Ltd (HQ) - Tel	: 6256-3561	[Handled by]	XING GU	JO QIANG] [F	mai Kpt due .	17/00/2015	
Claimant's Solicitor:	CHIA S A	RUL & LLC - Tel:	67334647							
ASSOCIA	TED MAIL RI	ECEIVED						View All Con	npose Case Ma	
AIG_SC	(07/06/2019)): Request To Up	load TP GIA Re	port						
ALL ASS	OCIATED TA	sks=				View				
Due Da		y Type Task	Group Sub	oject Ha	ndler Assign	ned By	Completed (On Created	I On Don	

PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHIC...

From: C

Chin, Lee-Ying

To:

assignments, admin-a@lkkauto.com

Cc:

Fong, Andy-SY

Sent:

6/4/2019 10:38:42 AM

Attachments:

7

20190603151730150.pdf

Hi LKK,

Kindly assist to survey, bike in workshop.

Thanks.

Best Regards
Lee Ying, Chin
AIG
Claims | AIG Asia Pacific Insurance Pte. Ltd.
78 Shenton Way #08-16 Singapore 079120
Tel +(65) 6419 1947
Lee-Ying.Chin@aig.com | www.aig.sg

ID XGO PRS

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

CHIAS ARUL LLC

ADVOCATES & SOLICITORS

UEN 201330709H

ARULCHELVAN S . A. RAVIDASS . DON TAN

Our Ref :

FBL 781S (wk)

Your Ref: To be advised

3 June 2019

AIG Asia Pacific Insurance Pte Ltd

BY EMAIL ONLY

Dear Sirs.

RE:

PROPERTY DAMAGE CLAIM

CLAIMANT :

SHAREEN BIN KARIM

ACCIDENT INVOLVING FBL 781S & SMA 7197K ALONG CHOA CHU KANG

CRESCENT ON 26 MAY 2019 PRE-REPAIR SURVEY NOTICE

- We act for Shareen Bin Karim, the owner of motor cycle no. FBL 781S which was 1. involved in the aforesaid accident.
- We hereby in compliance with the Pre-Action Protocol for Non-Injury Motor 2 Accident Claims, Appendix C of the State Courts Practice Directions Amendment No. 1 of 2016 ("the NIMA Protocol") give you NOTICE that we are claiming against your insured motor vehicle no. SMA 7197K for damages, costs and disbursements as a result of your insured driver's negligence.
- Please let us know if you wish to conduct a pre-repair survey on our client's motor 3. cycle at:

Address	10 Kaki Bukit Road 2 #01-16 First East Centre Singapore 417868
Contact Person	Mr. Jacky Siah (8380 2233)

- Pursuant to paragraph 2.3 of the NIMA Protocol, in the event we do not receive 4. your response within next two (2) working days (excluding any Saturday, Sunday or public holiday), our client will instruct the workshop to commence appraisal and repairs to the damaged motor vehicle without further reference to you.
- Please advise the appointed surveyor to endorse on page 2 of this letter after the completion of each inspection.

Yours faithfully,

MR ARULCHELVAN S

Client (By Email)

Our Ref: FBL 781S (wk) Your Ref: To be advised PRE-REPAIR SURVEY (1) WORKSHOP: SURVEYOR: Name of Surveyor: Name: Contact Number: Date/Time: Date/Time: PRE-REPAIR SURVEY (2) SURVEYOR: WORKSHOP: Name of Surveyor: Name: Contact Number: Date/Time: Date/Time: POST-REPAIR SURVEY WORKSHOP: SURVEYOR:

Name of Surveyor:

Contact Number:

Date/Time:

M/s Chia S Arul LLC

Page 2

Name:

Date/Time:

Enquire Vehicle & Owner Information (Vehicle No. SMA7197K As At 26 May 2019 / 20:50:00)

Vanicia Hill

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

FBL781S

Current Owner Details

Owner ID Type:

Company

Owner ID:

200710651D

Owner Name:

GOLDBELL CAR RENTAL PTE. LTD.

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 10

Registered Street Name:

RAEBURN PARK

Registered Unit No.:

#02-01

Registered Building Name: -

088702

Registered Postal Code: Current Vehicle Details

Vehicle No.:

SMA7197K

Make Description/Model: TOYOTA / PRIUS ALPHA HYBRID 1.8S CVT

Insurance Company Name: AIG ASIA PACIFIC INSURANCE PTE. LTD.

> Back to OneMotoring

Vehicle Details			
Vehicle No. :	FBL781S		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Mope	ed .	
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	HONDA		
Vehicle Model :	PCX150 A		
Chassis No.:	MLHKF2084F5231632		
Propellant:	Petrol		
Engine No.:	KF20E4231632		
Engine Capacity :	153 cc		
Maximum Power Output :	•/·		
Maximum Laden Weight:	301 kg		
Unladen Weight :	129 kg		
Year Of Manufacture :	2015		
Original Registration Date :	26 May 2016		
Lifespan Expiry Date :			
COE Category :	D - Motorcycle		
Quota Premium :	\$6,303.00		
COE Expiry Date :	25 May 2026		
Road Tax Expiry Date:	25 May 2020		
Inspection Due Date :	25 May 2020		
Intended Transfer Date :	19 Jun 2019		
CO2 Emission :			
CO Emission :			
HC Emission :			
NOx Emission :	<u> </u>		
PM Emission:	•		
Late renewal fee(s) will be impo-	sed if road tax / lay-up has expired. Please use Enqu	ire Road Tax Payable for fee(s) pay	able.
Road tax, including Over Payme Amount Payable	nt (if any), of a vehicle will follow the vehicle to the	new registered owner when its owr	nership is being transferred.
	Amount Before GST	GST Amount	Amount After GS
	(S\$)	(S\$)	(\$\$
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.0

You may print this page for reference.

OK Print

> Back to OneMotoring

PARF Eligibility Expiry Date:

Intended COE Rebate Details

PARF Rebate Amount:

COE Expiry Date:

COE Period(Years):

COE Rebate Amount:

Total Rebate Amount:

COE Category:

QP Paid:

Enquire PARF/COE Rebate for Registered Vehicle Vehicle Owner Particulars Singapore NRIC Owner ID Type: 9669G Owner ID: Vehicle Details FBL781S Vehicle No.: Vehicle to be Exported: 19 Jun 2019 Intended Deregistration Date: HONDA Vehicle Make: PCX150 A Vehicle Model: Black Primary Colour: 2015 Manufacturing Year: KF20E4231632 Engine No.: MLHKF2084F5231632 Chassis No.: Maximum Power Output: \$3,169.00 Open Market Value: 26 May 2016 Original Registration Date: 26 May 2016 First Registration Date: 1 Transfer Count: \$476.00 Actual ARF Paid: Intended PARF Rebate Details No PARF Eligibility:

The information contained herein is correct as at 19 Jun 2019

OK

\$0.00

10

25 May 2026

\$6,303.00

\$4,369.00

\$4,369.00

D - Motorcycle

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

Date Of Report 27/05/2019 17:42 26/05/2019 20:50 Exact Location Of Accident Country/State of Loss DETAILS OF OWN VEHICLE Vehicle Registration Number FBL781S Insured/Policyholder Name Of Registered Owner NRIC No S9049669G MOEMAIL (LOCAL) +65-81010060 Alternative Phone No OFFICE-81010060 Vehicle Particulars Manufacturer Model . 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? If No, Please state action to be taken ALONG CHOA CHU KANG CRESCENT SHORE CHOA CHU KANG CRESCENT SINGAPORE ALONG CHOA CHU KANG CRESCENT SINGAPORE (LOCAL) +65-81010 SHAREEN BIN KARIM S9049669G NOEMAIL (LOCAL) +65-81010060 OFFICE-81010060 Vehicle Particulars MODA PCX150 A 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? If No, Please state action to be taken THIRD PARTY	noresaid.	ACCIDENT STATEMENT
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Policy Number 5090938010-02 Cover Note Number Driver Name of Driver ROHAIZAN BIN KARIM NRIC No \$7636311J Date Of Birth 03/11/1976 Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450	(5)(1)	NO
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Name of Driver ROHAIZAN BIN KARIM NRIC No \$7636311J Date Of Birth 03/11/1976 Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450		
NRIC No S7636311J Date Of Birth 03/11/1976 Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450	Driver	
NRIC No \$7636311J Date Of Birth 03/11/1976 Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450	Name of Driver	ROHAIZAN BIN KARIM
Date Of Birth 03/11/1976 Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450		S7636311J
Occupation OUTDOOR Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450		03/11/1976
Date Of Driving Pass 15/12/1993 Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450		OUTDOOR
Driving Experience 25 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-97971450	Lancación de la constante de l	15/12/1993
Gender MALE Mobile Number (LOCAL) +65-97971450	FIRST STAND CONT. IN.	25 YEARS AND 5 MONTHS
Mobile Number (LOCAL) +65-97971450	The state of the s	MALE
		(LOCAL) +65-97971450
	Fax Number	

NOEMAIL

Address

APT BLK 247 JURONG EAST STREET 24 #10-18

Postcode

600247

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SIBLING

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

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

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

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

CHOA CHU KANG NPC

Police Station Address

ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 ,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER SKETCH PLAN

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

SMA7197K

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

CHOO HENG GUAN

NRIC/Passport Number

S1571950H

Contact Number

90055880

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 14

DETAILS OF INJURED PERSON 1

Name

ROHAIZAN BIN KARIM

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBL781S

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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.
- 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 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:
 - 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:

CARLE STREET, From VA

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN		egan kilma seesis.
	CHON CHU CHUK THEE THEE THEE THEE THEE THEE THEE THE	р- FB- 4813 В- SI-IN 71971
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
Accident Date & Time :	16 05 Jag 10:50 Pm	
Accident Location : <++	THE THE VANA CAMERINA	•
AS I WAS	RIGIOL MONG CHON CHU KAN	IG CRESCEUT ON DATED + TIME
A IBN MINER	MOTOR RULE . BUB TO THE	WITE READ WAKE A RICHT TURN IMPACT AND WOTCRRIVE SURVIAIN I SOBSTAINED WINCH STRATCHOS LAIT TIGHT:
DECLARATION	* IMPORTANT N	hird Party Claim at other workshop (OD/TP) IOTE: ed by the workshop that in the event that you wish to claim aparest your own policy (Dom Damage Claim). EM (14) days clause whereby the claim must be made within the elipulated limits are from the day of
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

CARLIE Should process of





1 of 3

Report No. T/20190530/2189

Police Station Of Origin: Choa Chu Kang N.P.C 20 Choa Chu Kang Street 52 #01-02 SINGAPORE 689286

PORT OF A TRAFFIC ACCIDENT				Vida Bor	ort No :		Station Diary I			
te/Time Re	port M	ade:		Vide Report No.: 167						
05/2019 23	3:11						X 8			
ormant's P	articu	lars		Address						
me of Infor	mant:			Address: APT BLK 247 JURONG EAST STREET 24 #10-16 SINGAPORE 600247						
Type / ID I	No.:			Contact No.: Mobile: 97971450						
NRIC NO / \$76363113			_	Email:						
ationality: INGAPORE	E CITIZ	ZEN	Nath.		Informant:					
ex:	Age:	Date of E 03/11/19	3irtn:	Rider		100	T	ion / Scho	ol Name:	
Male	42	03/11/19	10	Langua	age:		institui			
Race:		0.				-11				
Malay	•	-		Driving	Licence Info	ormation:	Date	of Expiry:		
Occupation:				Class:	2B,2A,3,4,5					
DRIVER								¥		
			8					1 .		
	armati	on of the A	ccider	nt		Date/T	me of	T	pe of Location	
Seneral into	Offiliat	Injury			Drink			1 0	traight Road	
						Accide	nt.	0	(i dig.i.	
Type of		Others			Drive:	Accide	nt: 2019 20:			
Accident:					Drive: No	26/05/	nt: 2019 20:			
Accident: Location: Along Roa CHOA CH	IU KAN	Others	NT	Chan Chi	No	26/05/3	nt: 2019 20:	50		
Accident: Location: Along Roa CHOA CH	IU KAN	Others	NT 7 wards	Choa Chu	No	26/05/3	nt: 2019 20:	50	Speed Limit:	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather:	IU KAN	Others	NT 7 wards	Dry	No Kang North	26/05/3	nt: 2019 20:	Road S	Speed Limit:	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear	IU KAN IU KAN I Kang	Others	NT 7 wards	Dry	No Kang North d Surface:	26/05/3	nt: 2019 20:	Road S	Speed Limit: Volume:	
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Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear Traffic Flo Two Way Type of C Between	Collisio Movin	Others NG CRESCE NG NORTH TO Crescent to the control of the contr	wards	Dry Traf Not	No Kang North d Surface: fic Control: Controlled	7	2019 20:	Road S Traffic Heavy Anyor ambu No Condition Slightly Damages	Speed Limit: Volume: ne conveyed by lance: No of Passen	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear Traffic Flo Two Way Type of C Between Details of Charles FBL7813	Collisio Movin	Others NG CRESCE NG NORTH Crescent too n: g Vehicles Notorcycle	wards	Dry Traf Not	No Kang North d Surface: fic Control: Controlled	7	2019 20:	Road S Traffic Heavy Anyor ambu No Condition	Speed Limit: Volume: ne conveyed by lance: No of Passen 0	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear Traffic Flo Two Way Type of C Between Details of	Collisio Movin	Others NG CRESCE NG NORTH TO Crescent to the control of the contr	wards	Dry Traf Not	No Kang North d Surface: fic Control: Controlled	7	2019 20:	Road S Traffic Heavy Anyor ambu No Condition Slightly Damages Slightly	Speed Limit: Volume: No of Passen 0	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear Traffic Flo Two Way Type of O Between Details o Vehicle! FBL7813	Collisio Movin	Others NG CRESCE NG NORTH Crescent too n: g Vehicles Notorcycle Car	Head Mak	Dry Traf Not	No Kang North d Surface: fic Control: Controlled	7 Color	2019 20:	Road S Traffic Heavy Anyor ambu No Condition Slightly Damages Slightly	Speed Limit: Volume: ne conveyed by lance: No of Passen 0	
Accident: Location: Along Roa CHOA CH CHOA CH Choa Chu Weather: Clear Traffic Flo Two Way Type of O Between Details SMA719	Collision Movin	Others NG CRESCE NG NORTH Crescent too n: g Vehicles Notorcycle	Head Mal	Dry Traf Not	No Kang North d Surface: fic Control: Controlled Model	7 Color	2019 20:	Road S Traffic Heavy Anyor ambu No Condition Slightly Damages Slightly Damages	No of Passen	

POLICE REPORT Pg. 1



T/20190530/2189

2 of 3

Report No. T/20190530/2189

Police Station Of Origin: Choa Chu Kang N.P.C 20 Choa Chu Kang Street 52 #01-02 SINGAPORE 689286 Tel No: 1800-7659999

CONTINUATION OF REPORT

Rider	THE ICA DINA		ID No.		S7636311J	
Name	ROHAIZAN BIN KARIM					
	(a (Materiala)		Contac	t No.	97971450	
Related Vehicle	FBL781S (Motorcycle)		12			
Inspital/Clinic CHOA CHU KANG POLYCLINIC		Class of		of	Class: 2B.2A.3,4,5	
Hospital/Clinic	CHOA CHU KANG POLITOLINIO	1	Driving		Date of Expiry: NIL	
			Licence &			
			Expiry Date			
	27/05/2019	Date Disch			5/2019	
Date Treatment	ted Medical Leave 03	Degree of	Injury	Sligh	t	
	ted Ivicaios: Ev			٠	S1571950H	
Driver	CHOO HENG GUAN		ID No.		3,37 193011	
	CHOO HENG GUAN					
Name			Conta			
	CHOO HENG GUAN SMA7197K (Car)		Conta	ct No	90055880	
Name Related Vehicle	SMA7197K (Car)		Conta	of	90055880 Class: NIL	
Name			Conta	of	90055880	
Name Related Vehicle	SMA7197K (Car)		Conta Class Drivin Licen	of of ce &	90055880 Class: NIL Date of Expiry: NIL	
Name Related Vehicle	SMA7197K (Car)	Date Disc	Conta Class Drivin Licen Expir	of of ce & y Date	90055880 Class: NIL Date of Expiry: NIL	

On 26/05/2019 at about 2050hrs, I was riding along Choa Chu Kang Crescent towards Choa Chu Kang North 7. As I rode past Blk 675 Choa Chu Kang Crescent cluster, out of a sudden, a car (SMA7197K) whom was driving from the opposite direction make an abrupt right turn towards Blk 675 Choa Chu Kang Crescent carpark entrance. As a result, the car collided onto the right side of my motorcycle (FBL781S). My motorcycle suffered slight damages on its right side. I sustained some injuries on my right arm and right leg due to the collision. On 27/05/2019, I went to seek medical treatment at Choa Chu Kang Polyclinic and was given 3 days of MC dated from 27/05/2019 to 29/05/2019. I do not have a camera installed on my motorcycle however, a witness had approached me and handover the in-car camera footage of the incident.

POLICE REPORT Pg. 1





19053012109

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Report No. T/20190530/2189

Police Station Of Origin: Choa Chu Kang N.P.C 20 Choa Chu Kang Street 52 #01-02 SINGAPORE 689286 Tel No: 1800-7659999

CONTINUATION OF REPORT

Sket	ch	Р١	an
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NP168.

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 NURSHUHADAH BINTE SULAIMAN	Signature Of Informant:
Signature Of Interpreter. Notrapplicable	Date/Time: 30/05/2019 23:11
Officer In Charge Of Case: TP_/AEIT / SSI 2 YEO GEAK ENG CECILIA** Contact No.: 65476404	Classification Of Case:
Authentication Stamp	

(01)Bent (2)Dented (3)Distorted (4)Cracked (5)Cut (6)Scratched (07)Deformed (08)Shifted (09)Buckled (10)Broken (11)Necessary (12)Missing (13)Torn (14)Unconfirmed (15)Not Working

FOR MOTORCYCLE

ACTION (AC)

1 Replace (√) 2 Repair (X) = 3 Check (?)

4. Not Consistent (NC)

Vehicle No:

NAC	INC	Item	CON	AC	Qty	NAC	INC	Item
1001		Front Number Plate	MC	/		1052	995074	Radi
3001	995065	Front Tyre				1053	992738	Radi
3002	995095	Front Rim				3046	994146	Seat
3003	994872	Front Tyre Rim Spoke				3047	990915	Engi
3004	991771	Front Fender Wheel Guard	and	/		3048	990928	Engi
3005	991283	Front Brake Disc	- 4			1067	990219	Batte
3006	991281	Front Brake Caliper	0.00			1068	990224	Batte
3007	991785	Front Fork Assy	repe	nr	1.	1069	990223	Batte
3008	991787	Front Fork Inner Tube				3049	991144	Foot
3009		Front Fork Outer Tube				3050	991154	Fron
3010	991167	Front Fork Bracket				3051	991779	Fron
3011	991182	Front Fork Oil Seal	NC	-		3052	994269	Side
3012		Front Fork Garnish oil	Mc	/		3053	992549	Mair
3013		Front Headlamp Rim				3054	990615	-
3014		Front Headlamp	SeR	1		3055	992478	_
3015	992337		- 00			3056	992477	-
3016	992345		arp	1		3057	991145	-
3017	992130					3058	993500	-
3018	992134			_		3059	993501	Rea
3019	995245					3060	992581	Exh
3020	995246	The state of the s				3061	991058	-
3021	992556	Meter Casing				1405	993719	_
3022	992553					1445	993720	_
1118	991019	ERP Bracket				3062	995065	-
1119	991020	ERP Unit				3063	991200	_
3023	992446					3064	994872	_
3024	992442	Ignition Key Assy				3065	99347	_
3025	990706	Cowling Stay				3066	993443	_
3026	994470					3067	992940	_
3027	994427	Steering Cone and Blank	P NE	1	-	3068	992936	Rea
3028	992299	Handle Bar	1			3069	995236	_
3029	992312	Handle Bar Switch				3070	990583	5 Cha
3030	992310	Handle Bar Grip				3071	990580	
3031	995184	Handle Bar Balancer LH				3072	994530	_
3032	992300	Handle Bar Balancer RH				1420	993819	_
1252	992179	Fuel Tank				3073	99524	5 Rea
3033	990438	Brake Reservoir	1			3074	99524	Rea
3034	990621	Clutch Lever				3075	99525	Rea
3035	992293	Hand Brake Lever	Cat	-/		1137	99362	6 Rea
3036	991119	Side Fairing				3076	99419	2 Sid
3037		Side Fairing Top Garnish				3077	99292	7 Rea
3038	994219					3078	99292	8 Rea
3039		Fairing Shield	Re	1/	-	3079	99132	_
3040		Front Top Fairing Inner Garnish				1136	99024	7 Sti
3041	991123	Fairing Top Garnish	Cer	4				
3042	-							
3043		8 Rear Fairing	CRI	7.				
3044								
3045			Cw	4				
			-	1				
				+	\neg			
1								100

NAC	INC	Item	CON	AC	Qty
1052	995074	Radiator			
1053	992738	Radiator Cowling			
3046	994146	Seat Assy			
3047	990915	Engine Crash Bar			
3048	990928	Engine Guard		1. 1	
1067	990219	Battery	*		
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
3049	991144	Foot Brake			
3050	991154	Front Foot Rest			
3051	991779	Front Foot Rest Bracket			
3052	994269	Side Stand			
3053	992549	Main Stand			
3054		Clutch Engine Cover			
3055	992478	Kick Starter Rubber			
3056	992477	Kick Starter Lever			
3057		Foot Gear Shifter			
3058	993500		Cut	1	\top
3059	993501	Rear Foot Rest Bracket	1	Ť	1
3060	992581	Exhaust Muffler Heat Shield	12		
3061	991058		ER	Y	
1405	993719		G F	1	
1445	993720			+	+
3062	995065		-	+	+
3063	991200		+	-	+-
3064	994872	THE PART OF THE REST.		_	+
3065		Rear Fender Wheel Guard	+	+	+
			-	+	+
3066	993443	The state of the s	+	+	-
3067	992940		_	+	
3068	992936		+	+	+
3069	995236		+	+	+
3070	990585	Inches and a second second second	-	+	+
3071	990580		_	-	+-
3072			-	+-	+-
1420	-		+-	+	+-
3073	995245		+	+	+
3074			70	4	_
3075			04	1/	
1137				_	
3076				+-	
3077				+	
3078			—		-
3079	_		Nec	-/	-
1136	99024	7 Sticker	No	1-	1
					_
				4	
			·		

No of Items: As	ssessor:
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Merimen e-Claims Page 1 of 1

\dots CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj S	Submitted	Ins Auth'ed	Status	
Main	28 May 2019 Edit Reg		04 Jun 2019 00:00 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.	w Rpt		Pending for Report Cancel Case	
	Main	F	teference	Claim I	etails	\Box	Document	s	Show All
CLAIM SU	BFOLDER DE	TAILS				[Created	by adjuster]		
Insured:	GOLDBEL	L CAR RENTAL P	PTE LTD, Co. Reg. I	No.: 200710651D					
Main Claimant:	SHAREEN	BIN KARIM							
Vehicle Reg No.:	FBL781	5		Date	of Loss:		9 00:00 - :59 s From LTA Reg D	Date (Man Yr)]	
Claim Type	: TP / 041	TP / 0419260830SG		Policy Note	/Cover No.:	(Comprehe	nsive)		
Vehicle Reg No. (Insured):	SMA7197	к		Policy (Clair	No. nant):				
				Exces	s:				
Repairer:	Motor 51	Pte Ltd (HQ) No	. 2 Kaki Bukit Avenu	e 2 #01-18 Kaki I	Bukit Aut	ohub, 41792	21 Kaki Bukit - Te	d:	
Handling Insurer:	AIG Asia	Pacific Insuranc	ce Pte. Ltd. (Expres	s) - Tel: 65-6419	-3000	[Handled b	y MdNoor, Nors	iah] Norsiah.MdN	oor@aig.co
Adjuster:	LKK Auto	Consultants Pte	e Ltd (HQ) - Tel: 62	56-3561 [Hand	led by X	ING GUO Q	IANG] [Fina	I Rpt due 17/0	6/2019]
Claimant's Solicitor:	CHIA S A	RUL & LLC - Tel:	67334647						
ASSOCIAT	TED MAIL RE	CEIVED					Vi	ew All Compo	se Case Mail
AIG_SG	(07/06/2019):	Request To Up	load TP GIA Repor	:					
ALL ASSO	CIATED TAS	ks⊟			1	/iew All	Search Tasks	Create New Task	Complete
Due Dat	e Priority	Type Tasi	Group Subjec	t Handler	Assign	ed By	Completed On	Created O	Done

Claim Documents

*FBL781S (0419260830SG) [SMA7197K] TP SHAREEN BIN KARIM May 26 2019 12:00AM [GOLDBELL CAR RENTAL PTE LTD] Motor 51 Pte Ltd

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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: CS3/AIG19009876/GCD3E2

Date: 22/10/2019

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No:

Claimant FBL781S

FBL781S Insured Vehicle No: SMA7197K

Date of Loss: 26/05/2019 Nature of Claim: TP Claim No: 0419260830SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: FBL781S

Make & Model: HONDA PCX150A, 153cc Engine No: KF20E4231632
Reg. Date: 26/05/2016 (Man. Year: 2015) Chassis No: MLHKF2084F5231632

Colour: Black Odometer: 43393 km

Engine Capacity: 153 cc
Market Value/New Car
Price: N/A

Sum Insured (S\$): 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: 90/90-14 Rear Tyre Size: 100/90-14
Front Left Side: Maxxis 5 mm Rear Left Side: Maxxis 5 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	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 04/06/2019

Date Inspected: 04/06/2019 Inspected At: 10 KAKI BUKIT RD 2 #01-16 FIRST

EAST CENTRE

Repairer: Motor 51 Pte Ltd (HQ)

Estimated Period of Repair: 3.0 days

Adjuster: XING GUO QIANG Manager: CELINE FONG

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

Recommended Parts

No.	Qty Part No.	Particulars	Condition	Repairer's	Amount
1	1	*FRONT NUMBER PLATE	Necessary	0.00 F	*- F
2	1	*FRONT FENDER WHEEL GUARD	Cut	0.00 F	*-F
3	1	*FRONT FORK ASSY	Repair	0.00 F	*- F
4	1	*FRONT FORK OIL SEAL	Necessary	0.00 F	*- F
5	1	*FRONT FORK OIL	Necessary	0.00 F	*- F
6	1	*FRONT HEADLAMP	Scratched	0.00 F	*- F
7	1	*FRONT HEADLAMP FAIRING	Cracked	0.00 F	*- F
8	1	*STEERING CONE AND BEARING	Necessary	0.00 F	*- F
9	1	*HAND BRAKE LEVER	Cut	0.00 F	*- F
10	1	*FAIRING SHIELD	Deformed	0.00 F	*- F
11	1	*FAIRING TOP GARNISH	Cut	0.00 F	*- F
12	1	*REAR FAIRING	Cracked	0.00 F	*- F
13	1	*FAIRING LOWER	Cut	0.00 F	*- F
14	1	*REAR FOOT REST	Cut	0.00 F	*- F
15	1	*EXHAUST MUFFLER HEAT SHIELD	Cracked	0.00 F	*- F
16	1	*REAR TAILLAMP	Cracked	0.00 F	*- F
17	1	*EMBLEM	Necessary	0.00 F	*- F
18	1	*STICKER	Necessary	0.00 F	*- F
F=Fr	anchise part.		Total Parts (S\$)	0.00	0.00

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >