

Surveyor

REF: CS3/LAW18007189/GS/3021

Special Instruction:

1/S: 9,100.00

ASSIGNMENT (Office)

From (Person): Norayinchen Renceny Tankok Owen Date/Time: 24/6/19

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

Third Parties:

Claimant:

Surveyor: Pro-Option Services

Workshop: FTA Performance

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: FBG 5145Y Insured: SGE 8760 C

at Workshop m/s FTA Performance Tel: \_\_\_\_\_

of 2 Kaki Bukit Ave 4 # 07-26

Policy No: \_\_\_\_\_ Claim No: C10001491

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 06/04/2018

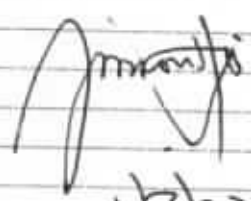
(Client's Record)

H.O.D. Endorsement/Date: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT

Date/Time: \_\_\_\_\_ Confirmed with \_\_\_\_\_ Final Fig \_\_\_\_\_, \_\_\_\_\_ days (Red \$ \_\_\_\_\_ / \_\_\_\_\_ %; Original 6 days)

Date/Time: 02/07/19 Submit Final Fig 3850, 4 days (Red \$ 5,250 / 58 %; Original 6 days)

Date/Time	Action/Instruction
	FBG 5145Y - CS3/LAW18007189/GS/3021
	SGE 8760 C - CS3/LAW18007189/GS/3021
	Don: 6/4/2018
	Don: 6/4/18
	RECEIVED 8 JUL 2018
	
	1/7/2019

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

Para(3) : Nett Value

Market Value : \_\_\_\_\_

Salvage Value : \_\_\_\_\_

Nett Value : \_\_\_\_\_

Inspected/  
Evaluated by:

Fee Charged:

Basic & Add  
Transport  
Photos  
Others  
Total

Date:

1) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

3) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

5) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

2) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

4) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

6) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

## Nivitha (LKK Auto)

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**From:** Narayanan Ramasamy <nara@tkqp.com.sg>  
**Sent:** Monday, 24 June 2019 12:53 PM  
**To:** Admin A; assignments@lkkauto.com  
**Cc:** Deborah Ma on behalf of Narayanan Ramasamy  
**Subject:** Auto & Gen Ref: C10001491 // TKQP Ref: TWK.RN.deb.2044.18.AUTO // MC 17850/2018  
**Attachments:** FBG5145Y GIA Report.pdf; 2044.18.AUTO - OI GIA Report (SGE 8760C).pdf; LKK Survey Report\_.pdf

LKK Ref: CS3/AGI 18007189/Gz4be2

Part 1.

Dear Sirs,

We act for Auto & General Insurance (Singapore) Pte Ltd.

We refer to your PRI report dated 28.6.2018 (attached).

We understand that repair estimate was not presented at the time of inspection.

Attached herewith is the third party surveyor Pro-Options survey report (to be sent in the next email)

Please let us have assessment of the repair costs, given by the repairer and the third party surveyor.

For completeness, the third party rider's and our driver's accident reports are attached.

Regards,  
RM Narayanan

Partner

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# TKQP

Tan Kok Quan Partnership  
Advocates & Solicitors, Singapore  
1 Wallich Street #07-02 Guoco Tower Singapore 078881  
T (65) 6225 9333  
D (65) 6496 9504  
F (65) 6227 6116  
E [nara@tkqp.com.sg](mailto:nara@tkqp.com.sg)  
W [www.tkqp.com.sg](http://www.tkqp.com.sg)

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ASS. REC. BY:

REF: CSY/AG 18007189 /6sds-1

and  $\text{Im}(\lambda) \neq 0$  then

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

64

### ASSIGNMENT (Office)

From (Perang):

Julia

of

Fig 1

ListedTime

18042012 238pm

Estimated Coeff.

Bill 100

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

To inspect Vehicle No. \_\_\_\_\_

FBG 5145Y

Insured

SHI 87611C

at Workshop m/s

### FTA Performance

Tel:

42

8 Koki Bukit Ave 4 #07-26

Policy No.

### Claim Max

15410017

Self-insured:

## Excerpt

Make of Veh

[illegible]

66047018

(Clement's Record)

CA 1 REV / REP. / REV 24 HRS (WPD)

### 1.1.1.1. Endogenous

Date/Time: 18042018 3:31 pm

Person Contacted

An Signed

Vehicle IN OUT

Date/Time	Action/Instruction ( X ) Estimate
	700 945Y - x
	30L 07000 048 / 04013003137 / 140
	100 00000

REF: **AGI**

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To: Insured Vehicle No: \_\_\_\_\_  
 at Worksite no: **FTA Performance**  
 of: \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claims No: \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Ven: \_\_\_\_\_

(Policy Condition)  
 Remark: The veh had commenced its repair at the time of inspection.



Bel or Market Value: \_\_\_\_\_  
 OAC Accident Rpt. Consistent? Yes or No  
 GIA PR Seen Consistent? Yes or No  
 Est. Repairs: **4** days Res: Yes or No  
 Lump Sum % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT

Veh No: **FBG 5145Y** Reg: **-29 DEC 2011**

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

Truck / Trailer or

Make: **Honda CBR1000RR cc 1000**

Colour: **white/red** A/C Insured / Std / NI / NA

Sp. Reading: **77560** T/Radio: Insured / Std / NI / NA

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

C/Vo: **-JH 28C 59A 1CK400769**

Gen. Cond: **Good** / Fair / Poor / Burnt

Steering: **In order** / Jammed / Leaked / Burnt or

Brake: **In order** / Jammed / Leaked / Burnt or

Mod: **100** / SRim / STD A/Rim or

Tyre Size: F: **120/70 8R17**

R: **200/55 8R17**

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

TOYO / YOKO or

Front

Rear

R/Bel: **5** mm F/Bel: **5** mm

L/Bel: \_\_\_\_\_ mm L/Bel: \_\_\_\_\_ mm

D.O.A. \_\_\_\_\_ D.O.I. **18-04-18**

Survey held at: **W/S** **4:40 pm**

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

and

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

Date Time Action / Instruction

**Estimated repair range \$5,000 - \$6,000**

2/5/18 Spring 2 PMS Report

**2/6/2018**

RECEIVED 25 JUN 2018

Date/Time File Pass to: ☐ Prel. Report

☐ Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

1st 1st 400

Perks

1st 1st

1st 1st

1st 1st

1st 1st

Add Fee: ☐ Site Insp. IS

☐ Interview IS

☐ Tech. Insp. IS

☐ Year-end IS

Report Format:

Lump Sum / I.B.I. / S

100
100

# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Tel: 6315 1239, Fax: 6315 3298, Mobile: 9061 0543

## ACCIDENT VEHICLE INSPECTION REPORT

Report no : 136M0418.FTA  
Vehicle no : FBG5145Y

### **1 REFERENCE**

Date of inspection : 19 April 2018  
Requested by : Ibrahim Biplab  
Blk 557 Bedok North Street 3  
#14-982  
Singapore 460557  
Type of survey : Independent  
Repairer : FTA Performance Pte Ltd  
8 Kaki Bukit Avenue 4, #07-26 Premier@KB, Singapore 415875  
Date of accident : 6 April 2018

### **2 VEHICLE DATA**

Make/model : Honda CBR1000RR  
Chassis no : JH2SC59A1CK400769  
Engine no : SC59E2401493  
Date of registration : 29 December 2011  
Engine capacity : 999 cc  
Colour : Multicolour

### **3 STATIC CONDITION CHECK**

Steering : Affected  
Foot brakes : Serviceable  
Hand brakes : Serviceable  
Paintwork : Good  
General Condition : Good

### **4 TIRE CONDITION CHECK**

	<u>mm/Make</u>	<u>SIZE</u>
Front tread	: 5 mm/Pirelli	120/70ZR17
Rear tread	: 5 mm/Pirelli	200/55ZR17

### **5 BRIEF DESCRIPTION OF DAMAGE**

Rear number plate holder bent/deformed, rear subframe warped/distorted, LHS side fairing cracked, front forks bent, rear seat fairing warped/tabs fractured, LHS handle tube bent, clutch lever bent, exhaust muffler bent/cracked, etc. Please see para. 8 of this report for more details.

### **6 REMARKS**

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

### **7 RECOMMENDATION**

Cost of repairs : \$9,100.00 (lump sum)  
Estimated no of days : Six (6)

**8 ASSESSMENT OF DAMAGE AND COSTS**

Report no: 136M0418.FTA  
 Vehicle no: FBG5145Y

**A SPARE PARTS**

Description	Qty	Assessed Condition	Repairer's Amount	Revised Amount	
Rear number plate holder	1	bent/deformed	129.00	129.00	/
Clutch lever	1	bent	45.00	45.00	/
Clutch lever holder	1	bent	65.00	X 65.00	NN
Handle tube LHS	1	bent	240.00	X 240.00	NN
Handle end balancer set	1	end scraped	44.00	44.00	/
Pillion foot peg bracket	1	broken	128.00	128.00	/
Rear seat fairing	1	warped/tabs fractured	645.00	329.00	/
Rear subframe assy	1	warped/distorted	889.00	X 889.00	Repairer
Side fairing LHS	1	cracked	1,095.00	1,095.00	778
Fuel tank cover	1	end broken	900.00	900.00	800
Front fork assy LHS/RHS	2	bent	3,200.00	X 3,200.00	NN
		Subtotal of the above	7,380.00	7,064.00	2253
		Discount 10%	738.00	706.40	
(Special nett)		Subtotal 1:	6,642.00	6,357.60	2027.7
Exhaust muffler assy	1	bent/cracked	2,800.00	2,800.00	1800
Rear number plate	1	bent	12.00	12.00	/
Pillion foot peg, LHS	1	abraded	75.00	75.00	/
Front foot peg/bracket/gear pedal set	1	abraded/bent	255.00	X 255.00	NN
Pillion foot peg, RHS	1	abraded	75.00	75.00	/
Hand grip	1	deformed	36.00	36.00	/
Body sticker/stripe set	1	necessarg	400.00	400.00	200
Fuel tank cover pad	1	necessarg	45.00	45.00	/
		Subtotal 2:	3,698.00	3,698.00	243
		Total cost of parts:	10,340.00	10,055.60	

**B LABOUR**

Towing fee (2x)	60.00	60.00	50
Labour	750.00	600.00	300
Spray painting of the affected parts and necessary areas.	800.00	600.00	200
			550
Total cost of labour:	1,610.00	1,260.00	
Total cost of repair:	11,950.00	11,315.60	

4820.7  
 20%: 3850

**9 CONCLUSION**

Report no: 136M0418.FTA  
Vehicle no: FBG5145Y

The actual damage sustained by the vehicle was carefully inspected and assessed during the inspection and the assessment is appended in para. 8 of this report. The degree of damage sustained by individual part(s) is/are carefully assessed before the part(s) is/are recommended to be either replaced or repaired.

The revised or adjusted cost of repairs to restore the vehicle is \$11,315.60.

However, considering the age and condition of the vehicle and the availability of good second parts in the market, the repairs are recommended to be undertaken on a contract lump sum basis of \$9,100.00 and the estimated number of days for the repairs would be Six (6) working days.

The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its pre-accident condition.

*Note: By accepting to carry out the repairs on a contract lump sum basis, the repairer has the discretion to replace the damaged part(s) with used, reconditioned or new part(s), or to repair the part(s) to a roadworthy condition.*

We have not authorised any repairs and would like to revert the recommendations for your consideration and decision.

Yours faithfully



Liaw Leong San  
Licensed Automotive Appraiser

# SALES TAX INVOICE



Invoice : 1000504637

Date : 30/07/2018

Page : 1

Cashier : Administrator

Bill To

BIPLAB IBRAHIM

Singapore

Phone :

Ref :

Code	Description	Qty	Unit Price	Disc	Amount (\$)
LUMP SUM REPAIR FBG5145Y	LUM SUM INSURANCE REPAIR FBG5145Y	1	9737.00		9737.00

Remarks :

Total :	\$	9,737.00
GST 7.0% :	\$	637.00
Amount Due :	\$	9,737.00
Balance Due :	\$	9,737.00

Payment may be made by cheque payable to FTA PERFORMANCE PTE LTD Thank you for your purchase. Please come again.

**FTA PERFORMANCE PTE LTD**

FULL THROTTLE ASIA

8 Kaki Bukit Ave 4 Premier @ Kaki Bukit #07-26

Tel : 63840123

Fax :

GST Reg. No. : 201600708N

Authorised Signatory

Date :

Company Stamp & Signature

Date :



## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

Date Of Report	10/04/2018 13:12
Date Of Accident	06/04/2018 19:00
Exact Location Of Accident	PAYA LEBAR ROAD TOWARDS PIE (CHANGI)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG5145Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	IBRAHIM BIPLAB
Passport No/FIN	G7647518R
Email Address	BIP143_35@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81160638
Alternative Phone No	OTHERS-81160638

### Vehicle Particulars

Manufacturer	HONDA
Model	CBR1000RR
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5073609592-02 TPFT
Cover Note Number	

### Driver

Name of Driver	IBRAHIM BIPLAB
Passport No/FIN	G7647518R
Date Of Birth	01/02/1981
Occupation	OUTDOOR
Date Of Driving Pass	26/04/2013
Driving Experience	4 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81160638
Fax Number	
Contact Number	OTHERS-81160638
Email Address	BIP143_35@YAHOO.COM

Address	BLK 557 #14-982 BEDOK NORTH STREET 3
Postcode	460557
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 involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 30 BEDOK NORTH ROAD , <b>POSTCODE:</b> 469676 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2449999 - <b>FAX NO:</b> 62447258
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 Witness 1

Name	MR LIU
Phone Number	87777780
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGE8760C
Vehicle Make/Model/Colour	HONDA CRV 2.0 A
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KNIGHT HASSELL GEORINA
NRIC/Passport Number	S2691214H
Contact Number	96955896

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

#### DETAILS OF INJURED PERSON 1

Name	IBRAHIM BIPLAB
Approximate Age	37
Injuries Sustain	
Injured person in which vehicle?	FBG5145Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 557 #14-982 BEDOK NORTH STREET 3
Postcode	460557

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:

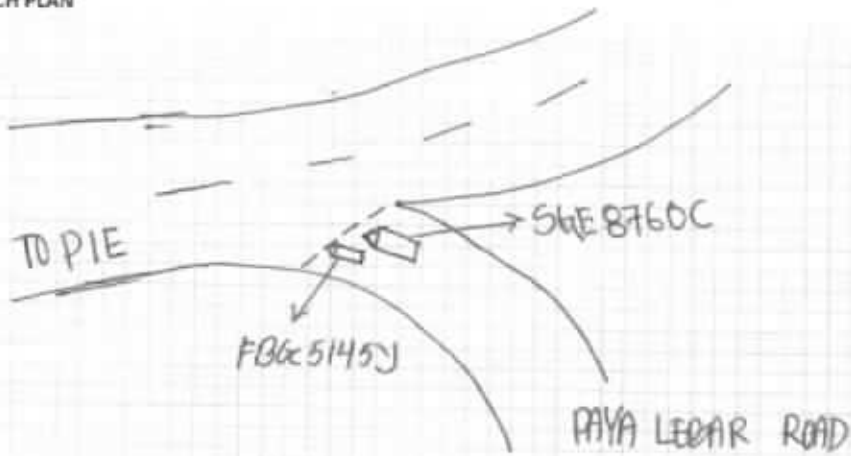
10 APR 2018

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

IDAC KAKI BUKIT (VAC)  
23 Kaki Bukit Ave 4  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: [feedback@singnet.com.sg](mailto:feedback@singnet.com.sg)  
Name:  
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

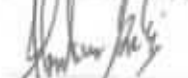
Refer

To police Report.

bip43-35@yahoo.com

DECLARATION

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



Policyholder's Signature

Date & Time:

10 APR 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IOAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: [vackb@singnet.com.sg](mailto:vackb@singnet.com.sg)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

# Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20180407/2109

Police Station Of Origin  
Bedok North N.P.C.  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449998

1 of 3

Report No: T/20180407/2109

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2018 17:28		Vide Report No. G/20180406/0203		Station Diary No. 109	
<b>Informant's Particulars</b>					
Name of Informant: IBRAHIM BIPLAB			Address: APT BLK 557 BEDOK NORTH STREET 3 #14-982 SINGAPORE 460557		
ID Type / ID No. NRIC NO / G7647518R			Contact No. Home/Office: Mobile: 81160638		
Nationality: BANGLADESHI			Email:		
Sex: Male	Age: 37	Date of Birth: 01/02/1981	Type of Informant Rider		
Race: Bangladeshi			Language:		Institution / School Name
Occupation: CAD DRAFTSMAN			Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/04/2018 19:00	Type of Location: Straight Road
Location: Along Road 1 PAYA LEBAR ROAD				
Slip road towards PIE Changi				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: Yes

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG5145Y	Motorcycle	HONDA	CBR1000RR	White	Seriously Damaged	0
SGE8760C	Car				Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBG5145Y	NTUC Income Insurance Co-Operative Limited	5073609592-02	29/12/2017	28/12/2018

# Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20180407/2109

Police Station Of Origin  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469675  
Tel No: 1800-2449999

2 of 3

Report No. T/20180407/2109

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	IBRAHIM BIPLAB	ID No	G7647518R
Related Vehicle	FBG5145Y (Motorcycle)	Contact No.	81150638
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	06/04/2018	Date Discharge	06/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	KNIGHT HASSELL GEORINA	ID No	S2591214H
Related Vehicle	SGE8760C (Car)	Contact No.	96955896
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 the 8th April 2018 at about 7pm, I was driving my motorcycle, FBG5145Y, along Paya Lebar Road and was at the slip road heading towards PIE Changi. I was the first vehicle and was stationary before the slip road, when suddenly a car, SGE8760C, that was behind me hit the right side of my motorcycle and dragged me and my motorcycle to the left kerb.

I fell onto the grass patch and felt pain on my ankle. I called for the police and ambulance. Traffic police came down vide incident number G/20180406/0203. I was conveyed to Tan Tock Seng hospital and was discharged on the day itself. I also received 3 days MC for my injury.

I wish to state that I have a camera attached on my motorcycle however I am not sure if it had recorded the accident. I also wish to state that there is a witness namely Mr Liu, contact number, 8777 7780.

Individual Statement



SINGAPORE  
POLICE FORCE



T/20180407/2109

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

3 of 3

Report No: T/20180407/2109

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:

G /

Sgt 2 MOHAMED NASZRUL BIN MOHD HELMI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

07/04/2018 17:28

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMED SUFIAN BIN SLIDIN

Contact No: 65476367

Classification Of Case:

Authentication Stamp  
NP158





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
 6 Raffles Quay #18-00 Singapore 048580  
 Tel (65) 6224 0010 Fax (65) 6224 0030  
 Operating Hours : Monday to Friday, 09:00 – 17:00  
 UEN: S665100200 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : \_\_\_\_\_ Vehicle Registration No: FDG 5145Y  
 Name (as shown in NRIC): Ibrahim Noplan NRIC/FIN/Passport No: G7647518R  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address : \_\_\_\_\_ Singapore ( )  
 Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
 Email Address : \_\_\_\_\_  
 Date of Accident : 6 APR 2018 Time of Accident : 1900  
 Place of Accident : Paya Lebar Rd Towards PIE  
 Insurance Company: NTUC

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Type of accident should be 'Head to Rear'.

Policyholder / Driver's Signature  
 Date: 11 APR 2018

**IDAC KAKI BUKIT (VAC)**  
 23 Kaki Bukit Ave 4  
 Singapore 415933  
 Tel: 67416697 Fax: 67492305  
 Email: vac@idac.com.sg  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Date:



## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

Date Of Report	07/04/2018 14:31
Date Of Accident	06/04/2018 19:00
Exact Location Of Accident	SLIP RD OF PAYA LEBAR TO PIE CHANGI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGE8760C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KNIGHT HASELL CHRISTOPHER KARL
NRIC No	S2691213Z
Email Address	CHASSELL@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97818124
Alternative Phone No	OFFICE-97818124

### Vehicle Particulars

Manufacturer	HONDA
Model	CR-V-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P10046350R00
Cover Note Number	

### Driver

Name of Driver	KNIGHT HASELL GEORGINA
NRIC No	S2691214H
Date Of Birth	22/05/1967
Occupation	INDOOR
Date Of Driving Pass	11/08/1999
Driving Experience	18 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96955896
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	530 EAST COAST ROAD #14-01
Postcode	458970
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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	MARINE PARADE NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4428999 - FAX NO: 62447678
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT NO: T/20180406/2166 STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

#### 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	FBG5145Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	IBRAHIM BIPLAB ALI AHMMED
NRIC/Passport Number	G7647518R
Contact Number	81160638
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	IBRAHIM BIPLAB ALI AHMMED
Approximate Age	
Injuries Sustain	SLIGHTLY INJURIES
Injured person in which vehicle?	FBG5145Y
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
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.
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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 lodging 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/are 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 (a) 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

Vehicle No  
A - SEEP7600  
B - F865745Y

Legend

Vehicle

Bike

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report no. 1/20180406/2166.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.  
Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

Policyholder's Signature \_\_\_\_\_

Date &amp; Time:

Driver's Signature \_\_\_\_\_

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

**Palabras clave:**

NRDC/FIN No. \_\_\_\_\_

### Sketch Plan #3



Sketch Plan #4





**SINGAPORE  
POLICE FORCE**



T/20180406/2166

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

1 of 3

Report No. T/20180406/2166

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 06/04/2018 21:20		Vide Report No.: G/20180406/0203		Station Diary No.: 78	
<b>Informant's Particulars</b>					
Name of Informant: KNIGHT HASSELL GEORGINA			Address: 530 EAST COAST ROAD #14-01 SINGAPORE 458970		
ID Type / ID No.: NRIC NO / S2691214H			Contact No.: Home/Office: Mobile: 96955896		
Nationality: BRITISH			Email:		
Sex: Female	Age: 50	Date of Birth: 22/05/1967	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Occupational therapist			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident: Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/04/2018 19:00	Type of Location: Bend
Location: Along Road 1 PAYA LEBAR ROAD ALONG PAYA LEBAR SLIP ROAD ENTERING INTO PIE(CHANGI), PIE EXIT 11			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBG5145Y	Motorcycle			White	Slightly Damaged	0
SGE8760C	Car	HONDA	CRV	Silver	Slightly Damaged	0

**Details of Person Involved**

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



## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180406/2166

2 of 3

Report No. T/20180406/2166

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

## CONTINUATION OF REPORT

<b>Rider</b>			
Name	IBRAHIM BIPLAB ALI AHMMED		ID No. G7647518R
Related Vehicle	FBG5145Y (Motorcycle)		Contact No. 81160638
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
<b>Driver</b>			
Name	KNIGHT HASSELL GEORGINA		ID No. S2691214H
Related Vehicle	SGE8760C (Car)		Contact No. 96955896
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 06/04/2018 at around 1900hrs, I was driving along the Paya Lebar road and I entered into the slip road. I then stopped at the stop line and looked on my right to look out for the oncoming traffic along the slip road that goes to PIE (Changi). Once it was cleared, I was ready to move off and I slowly start to drive off and suddenly, there was a motorcycle on my left who also came from the slip road with me. When I stopped at the slip road, there was no motorcycle around me but once I moved off, the motorcycle appeared from the inner lane on the left side and our vehicles collided side by side. My vehicle sustained some scratches and dents to the left passenger side, close to the tyre, whereas the motorcycle's exhaust came off and sustained some scratches too. The rider informed me that his right ankle was hurt and he was limping, hence he called for the traffic police, ambulance, his insurance company, the tow truck and also his wife, who all appeared at the scene at the same time less than 10 minutes. Subsequently, I managed to take down the particulars of the rider and then he was conveyed to the hospital. There was a witness who approached and informed me that he saw what happened and he offered his help. He was driving a van (G8B3848S) and he informed me that he was willing to be a witness. The TP IO, Meera, then informed me to lodge a traffic accident report.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999



T/20180406/2166

3 of 3

Report No. T/20180406/2166

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:

G /

Sgt 2 DEMI HUW ZONG LING

*Dem*

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMED SUFIAN BIN SUDIN

Contact No.: 65476367

Signature Of Informant:

*[Handwritten Signature]*

Date/Time:

06/04/2018 21:20

Classification Of Case:



SINGAPORE  
POLICE FORCE

*Dem*

Authentication Stamp

NP166

SIGNATURE


**Budget  
Direct  
insurance**
**Certificate of Insurance**
 Comprehensive Car Policy  
 Policy Number: P10046350R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) (Republic of Singapore), Motor Vehicles (Third-Party Risks And Compensation) Rules, 1996 Edition (Republic of Singapore), Road Transport Act, 1987 (Malaysia), Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

**Certificate Number P10046350R00 (Comprehensive / Named Driver Plan)**

1) Vehicle Registration Number	:	SGE8760C
Chassis Number	:	JHLRD58406C202026
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	28/03/2018 (00:00)
3) Date / Time of Expiry of Insurance	:	27/03/2019 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Knight Hassell Christopher Karl
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Knight Hassell Christopher Karl (19/02/1966)
Named Driver(s) / Date of Birth	:	Knight Hassell Georgina (26/05/1967)
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes and for the occasional business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		
8) Finance Company	:	NA

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on  
 19/02/2018

**Auto & General Insurance (Singapore) Pte. Limited**  
 Trading as Budget Direct Insurance



Simon Birch

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**  
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2691214H



Name

KNIGHT HASSELL GEORGINA



Race

CHINESE

Date of birth

22-05-1967

Country/Place of birth

UNITED KINGDOM

Sex

F

IC 191214H



9372531



NRIC No. S2691214H



Nationality

BRITISH

Date of issue

08-05-2015

Address

53B EAST COAST ROAD  
#14-01  
SINGAPORE 458970

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars <= 2000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 11 Aug 1999

NP 426A



Licence No. S2691214H

Accident Photo



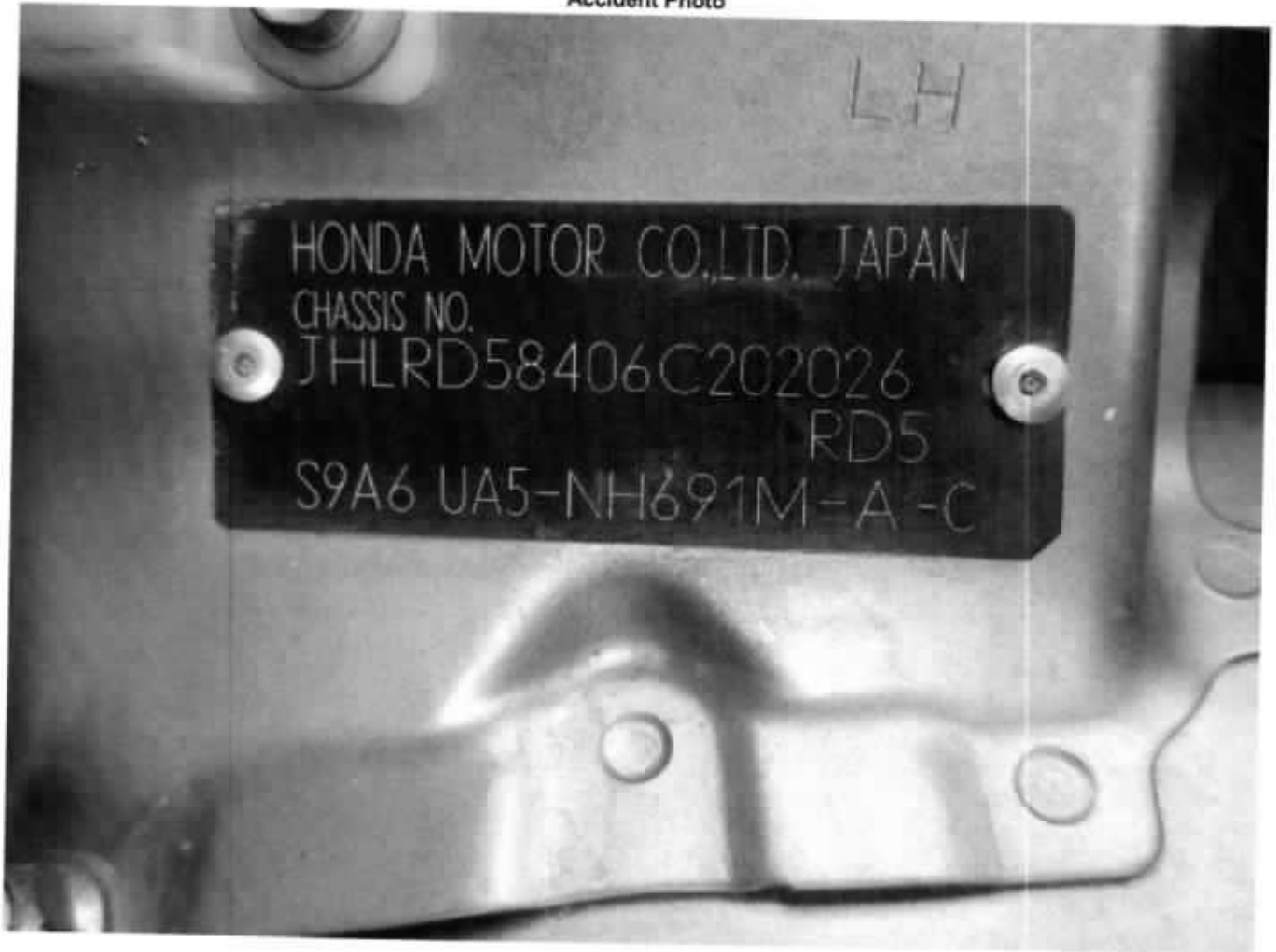
Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Your Ref: C10001491

Date: 02<sup>nd</sup> July 2019

Our Ref: CS3/LAW18007189/Gsd3e2-1

**M/s Tan Kok Quan Partnership**

1 Wallich Street #07-02

Guoco Tower

Singapore 078881

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: FBG 5145Y**

**INSURED VEHICLE: SGE 8760C**

**ACCIDENT DATE: 06/04/2018**

We thank you for your instruction on 24/06/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of FBG 5145Y from M/s Pro-option Services.
- b) Final Repair Bill of FBG 5145Y from M/s FTA Performance Pte Ltd.
- c) Singapore Accident Statement and Police Report of Vehicles FBG 5145Y and SGE 8760C.
- d) Colour damaged vehicle photographs of FBG 5145Y.

Pre-Repair Inspection Date : 18/04/2018 at M/s FTA Performance Pte Ltd, 8 Kaki Bukit Avenue 4, #07-26 Premier @KB, Singapore 415875.

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

1. Information Recorded: -

Registration Number	: FBG 5145Y
Make & Model	: Honda CBR1000RR
Chassis Number	: JH2SC59A1CK400769
Year of Registration	: 2011
Engine Capacity	: 999 cc

2. We recommend that the repairs of the entire damage require about 4 (Four) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3581 FAX: 6256 4315

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

Page No.:1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBG 5145Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR NUMBER PLATE HOLDER	BENT / DEFORMED	129.00	129.00
1	CLUTCH LEVER	BENT	45.00	45.00
1	CLUTCH LEVER HOLDER	NOT NECESSARY	65.00	-
1	HANDLE TUBE LHS	NOT NECESSARY	240.00	-
1	SET HANDLE END BALANCER	END SCRAPED	44.00	44.00
1	PILLION FOOT PEG BRACKET	BROKEN	128.00	128.00
1	REAR SEAT FAIRING	WARPED / TABS FRACTURED	645.00	329.00
1	REAR SUBFRAME ASSY	TO REPAIR SEE LABOUR	889.00	-
1	SIDE FAIRING LHS	CRACKED	1,095.00	778.00
1	FUEL TANK COVER	END BROKEN	900.00	800.00
2	FRONT FORK ASSY LHS / RHS	NOT NECESSARY	3,200.00	-
	LESS 10% DISCOUNT		-738.00	-225.30
			6,642.00	2,027.70
<b>SPECIAL NETT ITEMS</b>				
1	EXHAUST MUFFLER ASSY (SN)	BENT / CRACKED	2,800.00	1,800.00
1	REAR NUMBER PLATE (SN)	BENT	12.00	12.00
1	PILLION FOOT PEG, LHS (SN)	ABRADED	75.00	75.00
1	SET FRONT FOOT PEG / BRACKET / GEAR PEDAL (SN)	NOT NECESSARY	255.00	-
1	PILLION FOOT PEG, RHS (SN)	ABRADED	75.00	75.00
1	HAND GRIP (SN)	DEFORMED	36.00	36.00
1	SET BODY STICKER / STRIPE (SN)	NECESSARY	400.00	200.00
1	FUEL TANK COVER PAD (SN)	NECESSARY	45.00	45.00
			3,698.00	2,243.00
<b>LABOUR</b>				
	TOWING FEE (2X)		60.00	50.00
	LABOUR. INCLUSIVE OF THE REPAIR OF REAR SUBFRAME ASSY.		750.00	300.00
	SPRAY PAINTING OF THE AFFECTED PARTS AND NECESSARY AREAS.		800.00	200.00
			1,610.00	550.00
<b>GRAND TOTAL</b>			<b>11,950.00</b>	<b>4,820.70</b>



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,850.00
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Report Ref No. CS3/LAW18007189/Gsd3e2-1

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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