

2/03/2002

ASS. REC. BY:

REF:

CS/FCI 19012506/Msf302

Special Instruction:

5

(cws)

Surveyor

Morris

ASSIGNMENT (Office)

From (Person):

Sithara

of

FCI

Date/Time:

16.7.19 9.31a.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBN 9265X

Insured:

SHC0671C

at Workshop m/s

Ban Hock Hin Co Pte Ltd

Tel:

of

Policy No:

Claim No:

D19004601MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

05.07.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

16.7.19 11.00a.m

Person Contacted:

Raymond

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SHC0671C X

FBN 9265X X

18/07/19

@ 09:21 am revised PA to Sithara via email.

(08/11/13) wef
ASS. REC. BY: Marcus

REF:

Fc1/

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: FBN 9265X
at Workshop m/s BMH
of _____
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: _____
(Client's Record)
Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: \$ 7800/-
IDAC Accident Rpt: _____ Consistent?: Yes or No
GIA / PR Seen: _____ Consistent?: Yes or No
Est. Repairs: 3 days Res.: Yes or No
Lum Sum: 1.31 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

N/S	O/S

Veh No: FBN 9265X Yr Regn: 1 19
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Yamaha NMAX 155 c.c. 155
Colour: Grey A/C: Insured / Std / NI / NA
Sp. Reading: 16458 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: MH 35G431000009198
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modi: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 110/70-13
R: 130/70-13
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or
Front _____ Rear _____
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. _____ mm L/Bal. _____ mm
D.O.A. 5/7/19 D.O.I. 16/7/19
Survey held at _____
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear of 1/5 body
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction
23/8/19 Confirmed fire / by #767-50 with Raymond.
(\$ 774.50 Red - 50%)

RECEIVED 26 AUG 2019

Date/Time, File Pass to?

1) 26/8/19
Type: 4
Date/Time, File Return to?

2) _____

☐ : Preli. Report
☒ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech. Invs (\$ _____)
☐ : Weekend (\$ _____)

____ S + RS ____ SI

Photos

Others

TOTAL

Report Format :

Lump Sum (I.B.) (\$ 767.50 P/P)

100
50
90
77
227

MOTOR SURVEY ASSIGNMENT

Date	15-07-2019	Our Ref No. D19004601MFSH
Accident Date	05-07-2019	Claim Type. Third Party
Insured Vehicle	SHC0671C	Third Party Vehicle. FBN9265X
Survey Location	NO. 6 DEFU LANE 4	
Contact Person.	RAYMOND	
Contact No.	62816520/ 0	Fax No. 62842969
Survey Type	WITHOUT PREJUDICE:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

15/7/19 awaiting
Raymond call
back ... till 5.58p
not receive any call
from Raymond.
* Pls call again
on 16/7/19

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	BAN HOCK HIN CO. PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	SITHARA	

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.

> **Back to OneMotoring****Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:	Company
Owner ID:	0288K

Vehicle Details

Vehicle No.:	FBN9265X
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Jul 2019
Vehicle Make:	YAMAHA
Vehicle Model:	NMAX155 ABS
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	G3H6E0011683
Chassis No.:	MH3SG431000009198
Maximum Power Output:	-
Open Market Value:	\$2,506.00
Original Registration Date:	07 Jan 2019
First Registration Date:	07 Jan 2019
Transfer Count:	0
Actual ARF Paid:	\$376.00

Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	06 Jan 2029
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$2,509.00
COE Rebate Amount:	\$2,376.00
Total Rebate Amount:	\$2,376.00

The information contained herein is correct as at 16 Jul 2019

OK

Enquire Transfer Fee

Vehicle Details	
Vehicle No. :	FBN9265X
Vehicle Type :	P01 - Passenger Scooter
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	YAMAHA
Vehicle Model :	NMAX155 ABS
Chassis No. :	MH3SG431000009198
Propellant :	Petrol
Engine No. :	G3H6E0011683
Engine Capacity :	155 cc
Maximum Power Output :	-
Maximum Laden Weight :	295 kg
Unladen Weight :	128 kg
Year Of Manufacture :	2018
Original Registration Date :	07 Jan 2019
Lifespan Expiry Date :	-
COE Category :	D - Motorcycle
Quota Premium :	\$2,509.00
COE Expiry Date :	06 Jan 2029
Road Tax Expiry Date :	06 Jul 2020
Inspection Due Date :	06 Jan 2022
Intended Transfer Date :	15 Jul 2019
CO2 Emission :	-
CO Emission :	-
HC Emission :	-
NOx Emission :	-
PM Emission :	-
Late renewal fee(s) will be imposed if road tax / lay-up has expired. Please use Enquire Road Tax Payable for 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	
	<div>Amount Before GST (S\$)</div> <div>GST Amount (S\$)</div> <div>Amount After GST (S\$)</div>
Transfer Fee :	<div>25.00</div> <div>-</div> <div>25.00</div>
Total Amount Payable :	<div></div> <div></div> <div>25.00</div>

You may print this page for reference.

OK Print

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Thursday, 18 July 2019 9:21 AM
To: 'Sithara'; 'CWS Motor Claims'
Cc: assignments; SUR
Subject: RE: SURVEY ASSESSMENT - D19004601MFSH/1
Attachments: FBN 9265X - Preli Advise -.pdf

Dear Sithara,

Enclosed preliminary revised of vehicle FBN 9265X.

Thank you.

Best Regards,

Shirley Hiew | 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) [mailto:admin-d@lkkauto.com]
Sent: Tuesday, 16 July 2019 9:31 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>
Subject: RE: SURVEY ASSESSMENT - D19004601MFSH/1

Dear Sir/Madam,

Thank you for your assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | 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: Monday, 15 July, 2019 4:06 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Sithara <Sithara@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19004601MFSH/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.



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19004601MFSH

Date: 18 July 2019

Our Ref: CS/FCI19012506/Usf3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

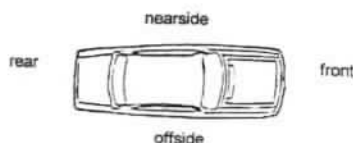
INITIAL INSPECTION REPORT OF VEHICLE NO. FBN 9265X

Please be informed that we had conducted the inspection of the abovementioned vehicle on 16/07/2019 at the premises of M/s Ban Hock Hin Co Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$ 1,542.00
Revised Estimate Amount	: S\$ 812.00
"Check" Items Amount	: S\$
Total	: S\$
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

Description of Damage:

The vehicle sustained damages at the rear portion & n/s body.



Comments/ Present Status:

Damages Consistent.

Repair days: 3 days

Yours faithfully,

Marcus Chua

Automotive Assessor

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

ACCIDENT STATEMENT	
Date Of Report	06/07/2019 17:32
Date Of Accident	05/07/2019 16:15
Exact Location Of Accident	IN FRONT AL MALIK 30 WOODLANDS AVE 1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBN9265X
Insured/Policyholder	
Name Of Registered Owner	BAN HOCK HIN COMPANY PRIVATE LIMITED
Co Reg No	197000288K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68216520
Vehicle Particulars	
Manufacturer	YAMAHA
Model	NMAX155 ABS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	AVFMSB0000591904
Cover Note Number	
Driver	
Name of Driver	MA GUOQIANG
NRIC No	G2832610L
Date Of Birth	07/10/1986
Occupation	OUTDOOR
Date Of Driving Pass	11/07/2016
Driving Experience	2 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82640720
Fax Number	
Contact Number	
Email Address	NOEMAIL

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

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	NO
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)	0

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

MY BIKE WAS PARKED IN FRONT AL MALIK AT 30 WOODLANDS AVE 1 . SUDDENLY A GUY TOLD US THE BIKE WAS COLLIDED BY VEHICLE B . NO INJURIES INVOLVED.

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	SHC671C
Vehicle Make/Model/Colour	HYUNDAI / I40 1.7L CRDI AT ABS AIRBAG 4DR
Details Of Properties	NA
Vehicle Category	TAXI
Name of Driver	UNKNOWN DRIVER
NRIC/Passport Number	
Contact Number	UNKNOWN
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

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 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 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.
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 making 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.

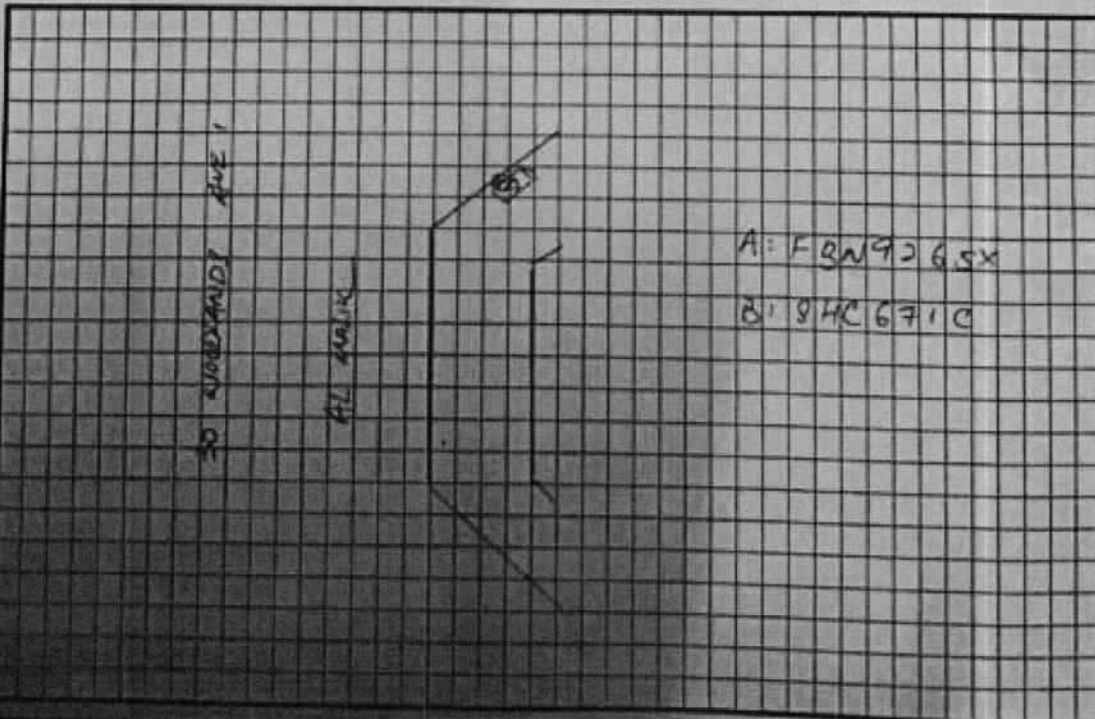
**VERIFIED BY AJAX MARS
REPORTING OFFICER
JUN KEAT**

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

MY BIKE WAS PARKED IN FRONT AL MALIK AT 30 WOODLANDS AVE 1 .
SUDDENLY A GUY TOLD US THE BIKE WAS COLLIDED BY VEHICLE B . NO
INJURIES INVOLVED.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
WONG JUN KEAT

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

6 July 2019 at 5:08 PM

Date/Time:

6 July 2019 at 5:08 PM



BAN HOCK HIN
Co., Pte Ltd

Co.Reg.No: 197000288K
MOTORCYCLE ACCESSORIES | SERVICE CENTRE
MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL
WORKS | LEASING & RENTALS | FLEET SALES | INSURANCE SALES

QUOTATION

Customer :

FIRST CAPITAL INSURANCE LTD
06 RAFFLES QUAY #21-00
SINGAPORE 048580

NO. : 34425

DATE : 12/07/2019
CLAIM NO. : 11383
POLICY NO. : AVFMSB0000591904
FROM : RAYMOND

VEHICLE NO. : FBN9265X
MAKE/MODEL : YAM / NMAX155 ABS

*not added
to bill*

3 days

16/7/19

p/p \$767.50

(Page 1 of 3)

S/N	Description	Action	Qty	Unit Price	Amount
1	BALANCER P/N: 55166	REPLACE	1.00	\$10.00	<i>buy</i> 10.00
2	BELLY PAN P/N: 58094	REPLACE	1.00	\$35.00	<i>buy</i> 35.00
3	BOARD FOOTREST LH P/N: 59588	REPLACE	1.00	\$55.00	<i>see</i> 55.00 X
4	BOARD FOOTREST RH P/N: 59589	REPLACE	1.00	\$55.00	<i>see</i> 55.00 X
5	BOX FILTER AIR OUTER P/N: 58141	REPLACE	1.00	\$20.00	<i>buy</i> 20.00
6	COVER CLUTCH OUTER P/N: 58147	REPLACE	1.00	\$30.00	<i>buy</i> 30.00
7	EMBLEM P/N: 56578	REPLACE	2.00	\$5.00	<i>see</i> 10.00
8	EMBLEM (YAMAHA) LOGO P/N: 57069	REPLACE	1.00	\$10.00	<i>see</i> 10.00
9	HANDLE SEAT P/N: 58218	REPLACE	1.00	\$98.00	<i>see</i> 98.00 X
10	HOSE 1	REPLACE	1.00	\$15.00	<i>see</i> 15.00 X
11	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED	<i>4</i>	1.00	\$450.00	<i>200</i> 450.00
12	LAMP SIGNAL FRONT LH P/N: 59587	REPLACE	1.00	\$35.00	<i>cm</i> 35.00
13	LAMP SIGNAL FRONT RH P/N: 59592	REPLACE	1.00	\$35.00	<i>cm</i> 35.00



bizSAFE₃



S/N	Description	Action	Qty	Unit Price	Amount
14	LAMP TAIL ASSY P/N: 60928	REPLACE	1.00	\$225.00	225.00
15	MIRROR LH P/N: 58099	REPLACE	1.00	\$35.00	35.00
16	MUDGUARD REAR P/N: 62682	REPLACE	1.00	\$35.00	35.00
17	PLATE NUMBER REAR (6.5 INCH X 9 INCH) P/N: 26951	REPLACE	1.00	\$16.00	16.00
18	PROTECTOR EXHAUST P/N: 58086	REPLACE	1.00	\$38.00	38.00
19	SPRAY PAINT FRONT FENDER	Respray	1.00	\$45.00	45.00
20	SPRAY PAINT LH FRONT PANEL	1.00	1.00	\$20.00	20.00
21	SPRAY PAINT LH LOWER COVER	1.00	1.00	\$35.00	35.00
22	SPRAY PAINT RH LOWER COVER	1.00	1.00	\$35.00	35.00
23	STAND MAIN P/N: 58138	REPLACE	1.00	\$63.00	63.00
24	STICKER (MCDONALDS) SIDECOVER/WINDSHEILD P/N: 56222	REPLACE	1.00	\$18.00	18.00
25	STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT P/N: 32921	REPLACE	1.00	\$12.00	12.00
26	STOPPER MAINSTAND P/N: 54930	REPLACE	1.00	\$16.00	16.00
27	TRANSPORT CHARGES P/N: 07169	1.00	1.00	\$35.00	35.00
28	WINDSHIELD P/N: 58073	REPLACE	1.00	\$56.00	56.00

SUB TOTAL

\$1,542.00

GST @ 7 %

\$107.94

GRAND TOTAL

\$1,649.94

50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD

Acknowledge & Accepted By



RAYMOND



P-445
M
400.50
367
767.5

bizSAFE₃

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
------------	--------------------	---------------	------------	-------------------	---------------

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.



bizSAFE₃



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

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

CERT NO.: 2002-1-0383
ISO 14001 : 2015



BAN HOCK HIN
Co., Pte Ltd

Co.Reg.No: 197000288K

MOTORCYCLE ACCESSORIES | SERVICE CENTRE
MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL
WORKS | LEASING & RENTALS | FLEET SALES | INSURANCE SALES

QUOTATION

Customer :

NO. : 34425

- Rev. 1

FIRST CAPITAL INSURANCE LTD
06 RAFFLES QUAY #21-00
SINGAPORE 048580

DATE : 12/07/2019
CLAIM NO. : 11383
POLICY NO. : AVFMSB0000591904
FROM : RAYMOND

VEHICLE NO. : FBN9265X
MAKE/MODEL : YAM / NMAX155 ABS

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	BALANCER P/N: 55166	REPLACE	1.00	\$10.00 Disc %: 10.00	9.00
2	BELLY PAN P/N: 58094	REPLACE	1.00	\$35.00 Disc %: 10.00	31.50
3	BOX FILTER AIR OUTER P/N: 58141	REPLACE	1.00	\$20.00 Disc %: 10.00	18.00
4	COVER CLUTCH OUTER P/N: 58147	REPLACE	1.00	\$30.00 Disc %: 10.00	27.00
5	EMBLEM P/N: 56578	REPLACE	2.00	\$5.00 Disc %: 10.00	9.00
6	EMBLEM (YAMAHA) LOGO P/N: 57069	REPLACE	1.00	\$10.00 Disc %: 10.00	9.00
7	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED		1.00	\$200.00	200.00
8	LAMP SIGNAL FRONT LH P/N: 59587	REPLACE	1.00	\$35.00 Disc %: 10.00	31.50
9	LAMP SIGNAL FRONT RH P/N: 59592	REPLACE	1.00	\$35.00 Disc %: 10.00	31.50
10	LAMP TAIL ASSY P/N: 60928	REPLACE	1.00	\$225.00 Disc %: 10.00	202.50
11	MUDGUARD REAR P/N: 62682	REPLACE	1.00	\$35.00 Disc %: 10.00	31.50
12	PLATE NUMBER REAR (6.5 INCH X 9 INCH) P/N: 26951	REPLACE	1.00	\$14.00	14.00
13	SPRAY PAINT FRONT FENDER		1.00	\$45.00	45.00



bizSAFE₃



Address: No. 6, Delu lane 4, Singapore 539410 | Telephone: +65 6281 6520 | Web: www.bhh.com.sg
Fax: (Main) +65 6281 2830, (Spare Parts) +65 6285 7530, (Insurance/Project) +65 6284 2969, (Accounts) +65 6281 6759

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

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
14	SPRAY PAINT LH FRONT PANEL		1.00	\$20.00	20.00
15	SPRAY PAINT LH LOWER COVER		1.00	\$35.00	35.00
16	STICKER (MCDONALDS) SIDECOVER/WINDSHEILD P/N: 56222	REPLACE	1.00	\$18.00	18.00
17	TRANSPORT CHARGES P/N: 07169		1.00	\$35.00	35.00
SUB TOTAL					\$767.50
GST @ 7 %					\$53.73
GRAND TOTAL					\$821.23

50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD



RAYMOND

Acknowledge & Accepted By

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.



bizSAFE₃






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 Internationale Des Experts En Automobile			
MS FIRST CAPITAL INSURANCE LTD		Ref : CS/FCI19012506/Usf3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 12-09-2019	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 671C	Veh. Inspected	FBN 9265X
Policy No.		Coverage (\$)	0.00
Claim No.	D19004601MFSH	Excess (\$)	0.00
Assign From	SITHARA	Assign Date	16/07/2019
2. Vehicle Particulars & Condition			
Make & Model	YAMAHA NMAX155	c.c	155
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	MH3SG431000009198	Colour	GREY
Odometer	16458	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	110/70-13	MICHELIN	6 mm
L/H Front Tyre			mm
R/H Rear Tyre	130/70-13	MICHELIN	6 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY AND REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	05/07/2019	Inspection Date	16/07/2019
Survey held at	BAN HOCK HIN CO.PTE LTD NO 6 DEFU LANE 4 SINGAPORE 539410		
5a. Remarks			
A)DAMAGES CONSISTENT TO ACCIDENT REPORT. B)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. C)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working 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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBN 9265X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BALANCER	CUT	10.00	10.00
1	BELLY PAN	CUT	35.00	35.00
1	BOARD FOOTREST LH	SERVICEABLE	55.00	-
1	BOARD FOOTREST RH	SERVICEABLE	55.00	-
1	BOX FILTER AIR OUTER	CUT	20.00	20.00
1	COVER CLUTCH OUTER	CUT	30.00	30.00
2	EMBLEM @\$5.00	NECESSARY	10.00	10.00
1	EMBLEM (YAMAHA) LOGO	NECESSARY	10.00	10.00
1	HANDLE SEAT	TO REPAIR SEE LABOUR	98.00	-
1	HOSE 1	SERVICEABLE	15.00	-
1	LAMP SIGNAL FRONT LH	CRACKED	35.00	35.00
1	LAMP SIGNAL FRONT RH	CRACKED	35.00	35.00
1	LAMP TAIL ASSY	CRACKED	225.00	225.00
1	MIRROR LH	SERVICEABLE	35.00	-
1	MUDGUARD REAR	DEFORMED	35.00	35.00
1	PROTECTOR EXHAUST	TO REPAIR SEE LABOUR	38.00	-
1	STAND MAIN	TO REPAIR SEE LABOUR	63.00	-
1	STICKER NUMBER PLATE FRONT (BLACK)	NOT NECESSARY	12.00	-
1	STOPPER MAINSTAND	NOT NECESSARY	16.00	-
1	WINDSHIELD	NOT NECESSARY	56.00	-
	LESS 10% DISCOUNT		-	-44.50
			888.00	400.50
<u>SPECIAL NETT ITEMS</u>				
1	PLATE NUMBER REAR (6.5 INCH X 9 INCH) (SN)	BENT	16.00	14.00
1	STICKER (MCDONALDS) SIDECOVER/WINDSHIELD (SN)	NECESSARY	18.00	18.00
			34.00	32.00



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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	LABOUR. -FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED. INCLUSIVE OF THE REPAIR OF HANDLE SEAT, PROTECTOR EXHAUST AND STAND MAIN.		450.00	200.00
	SPRAY PAINT FRONT FENDER.		45.00	45.00
	SPRAY PAINT LH FRONT PANEL.		20.00	20.00
	SPRAY PAINT LH LOWER COVER.		35.00	35.00
	SPRAY PAINT RH LOWER COVER.	NOT NECESSARY	35.00	-
	TRANSPORT CHARGES.		35.00	35.00
			620.00	335.00
	GRAND TOTAL		1,542.00	767.50
RECOMMENDED COST OF REPAIRS				767.50

Report Ref No. CS/FCI19012506/Usf3e2

CHUA KANG SENG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.