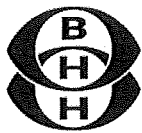


[> Back to OneMotoring](#)**Enquire Transfer Fee**

Vehicle Details			
Vehicle No. :	FBG4998J		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	TRIUMPH		
Vehicle Model :	TIGER 800 MANUAL		
Chassis No. :	SMTTRE15B8D561335		
Propellant :	Petrol		
Engine No. :	B562537		
Engine Capacity :	800 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	-		
Unladen Weight :	210 kg		
Year Of Manufacture :	2012		
Original Registration Date :	11 Aug 2012		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$1,896.00		
COE Expiry Date :	10 Aug 2022		
Road Tax Expiry Date :	10 Feb 2020		
Inspection Due Date :	10 Aug 2020		
Intended Transfer Date :	26 Aug 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			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

[OK](#)[Print](#)



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. : 34638

AIG ASIA PACIFIC INSURANCE PTE LTD
CHARTIS BUILDING
78 SHENTON WAY
#07-16
SINGAPORE 079120
MOTOR CLAIMS DEPT

DATE : 23/08/2019
CLAIM NO. : 11409
POLICY NO. :

FROM : RAYMOND

VEHICLE NO. : FBG4998J
MAKE/MODEL : TRIUMP / TIGER800 MANUAL

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	BOX REAR (TRIUMPH) ASSY	REPLACE	1.00	\$985.00	985.00
2	BRACKET COWLING FRONT	REPLACE	1.00	\$408.00	408.00
3	BRACKET WINSHIELD	REPLACE	1.00	\$79.00	79.00
4	COVER COWLING FRONT LOWER LH	REPLACE	1.00	\$158.00	158.00
5	COVER FRONT BEAK CENTER	REPLACE	1.00	\$192.00	192.00
6	COVER SIDE UPPER LH	REPLACE	1.00	\$118.00	118.00
7	COVER TANK CENTER	REPLACE	1.00	\$313.00	313.00
8	CRASH BAR (SWMOTECH) P/N: 63781	REPLACE	1.00	\$506.00	506.00
9	FOOTREST REAR LH	REPLACE	1.00	\$118.00	118.00
10	GUARD HANDLE (BARKBUSTER) SET	REPLACE	1.00	\$299.00	299.00
11	HEADLIGHT ASSY	REPLACE	1.00	\$810.00	810.00
12	ION FOOTREST (SW MOTECH) P/N: 63793	REPLACE	1.00	\$142.00	142.00
13	LABOUR P/N: 06766 - FOR DISMANTLING AND ASSEMBLING OF PARTS QUOTED		1.00	\$400.00	400.00



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: 2002-10383
ISO 9001: 2015

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
14	MUDGUARD FRONT	REPLACE	1.00	\$408.00	408.00
15	PANEL COCKPIT LH	REPLACE	1.00	\$75.00	75.00
16	PEDAL GEAR (TOURATECH) FOLDABLE	REPLACE	1.00	\$185.00	185.00
17	PROTECTOR HEADLIGHT KIT	REPLACE	1.00	\$153.00	153.00
18	STAND MAIN	REPLACE	1.00	\$576.00	576.00
19	STAND SIDE	REPLACE	1.00	\$378.00	378.00
20	STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT P/N: 32921	REPLACE	1.00	\$12.00	12.00
21	SUPPORT COVER FRONT BEAK	REPLACE	1.00	\$56.00	56.00

SUB TOTAL \$6,371.00

GST @ 7 % \$445.97

GRAND TOTAL \$6,816.97

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



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 9001:2015

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	13/08/2019 10:03
Date Of Accident	08/08/2019 18:55
Exact Location Of Accident	PAN ISLAND EXPRESSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG4998J
Insured/Policyholder	
Name Of Registered Owner	IVAN TAY KIAN TIONG
NRIC No	S8126730H
Email Address	IVANT088@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93629099
Alternative Phone No	OFFICE-93629099

Vehicle Particulars

Manufacturer	TRIUMPH
Model	TIGER 800-800CC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MC/00515210/10
Cover Note Number	

Driver

Name of Driver	IVAN TAY KIAN TIONG
NRIC No	S8126730H
Date Of Birth	27/08/1981
Occupation	INDOOR
Date Of Driving Pass	09/09/2002
Driving Experience	16 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93629099
Fax Number	
Contact Number	OFFICE-93629099
EMail Address	IVANT088@GMAIL.COM

Address	BLK 235 TAMPINES STREET 21 #07-511
Postcode	521235
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 - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE TRAFFIC ACCIDENT REPORT AND SKETCH PLAN ATTACHED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJX5767T
Vehicle Make/Model/Colour	NISSAN / SYLPHY / BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KEN
NRIC/Passport Number	
Contact Number	96433443
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	IVAN TAY KIAN TIONG
Approximate Age	37
Injuries Sustain	
Injured person in which vehicle?	FBG4998J
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 235 TAMPINES STREET 21 #07-511
Postcode	521235

Sketch Plan Pg. 1


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:


13/08/19

0944hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name: Tan Chok Lok

NRIC/FIN No.: 97115235R

Sketch Plan #2 Pg. 1

SKETCH PLAN


Refer to Sketch Plan attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Refer to Traffic Accident Report No. T/20190810/7003 attached.

DECLARATION

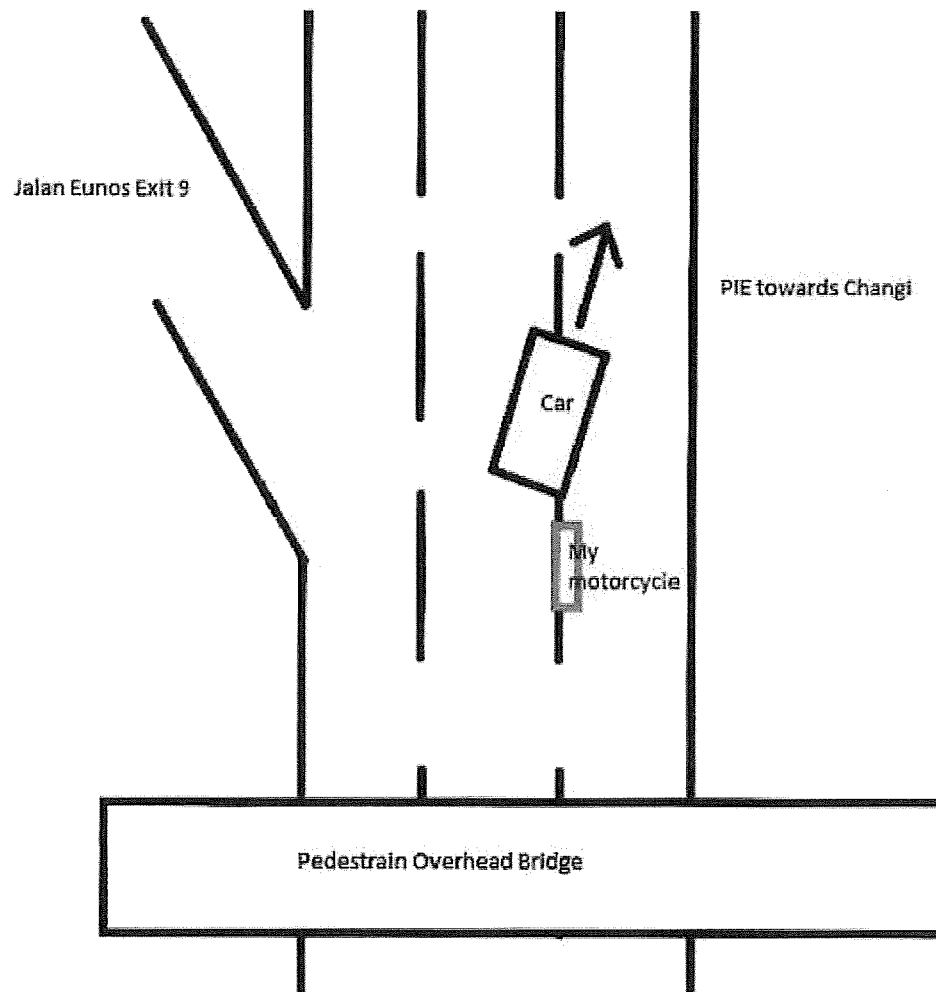
I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature
Date & Time: 13/08/12 0944hrs

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


Reporting Centre Personnel's Signature
Name: Tan Chok Lok
NRIC/FIN No.: 67115235R

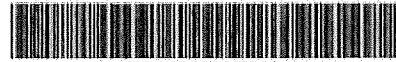
Accident Sketch Plan



Traffic Accident Report



**SINGAPORE
POLICE FORCE**



T/20190810/7003

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

1 of 3

Report No. T/20190810/7003

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/08/2019 08:19		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: IVAN TAY KIAN TIONG			Address: APT BLK 235 TAMPINES STREET 21 #07-511 SINGAPORE 521235		
ID Type / ID No.: NRIC NO / S8126730H			Contact No.: Home/Office: Mobile: 93629099		
Nationality: SINGAPORE CITIZEN			Email: ivant088@gmail.com		
Sex: Male	Age: 37	Date of Birth: 27/08/1981	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Manufacturing engineering technician (general)			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/08/2019 18:55	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
FBG4998J	Motorcycle	TRIUMPH	TIGER 800 MANUAL	White		0
SJX5767T	Car	NISSAN	Sylphy	Blue		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBG4998J	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00515210/01	11/08/2018	10/08/2020

Traffic Accident Report



**SINGAPORE
POLICE FORCE**



T/20190810/7003

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

2 of 3

Report No. T/20190810/7003

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJX5767T	AIG ASIA PACIFIC INSURANCE PTE. LTD.			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	IVAN TAY KIAN TIONG	ID No.	S8126730H
Related Vehicle	FBG4998J (Motorcycle)	Contact No.	93629099
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	08/08/2019	Date Discharge	08/08/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	KEN	ID No.	NIL
Related Vehicle	SJX5767T (Car)	Contact No.	96433443
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 of August 2019 around 6.55pm I was travelling on PIE towards Changi on my motorcycle alone without pillion at a speed of around 60-70km/h. Traffic was slow moving at around 60km/h. I was in between lane 1 and 2. At the vicinity of Jalan Eunos exit, a car on lane 2 about 1-2 car length in front of me with plate number SJX5767T made a sudden lane change from lane 2 to lane 1. I saw the front of the car turn out and immediately braked but the car at the rear right side still made contact with the front of my motorcycle. I fell and the car came to a stop on lane 1. Driver alighted vehicle and walked towards me. He was uninjured. I suffered abrasion on all 4 limbs and chest pain. After exchanging information, I proceeded out the expressway and got a tow truck and headed to Changi general hospital A&E for medical attention

Traffic Accident Report



**SINGAPORE
POLICE FORCE**



T/20190810/7003

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

3 of 3

Report No. T/20190810/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
ONG YONG HOCK
Contact No.: 65476436

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
10/08/2019 08:19

Classification Of Case:

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-19-130078

Date of Request: 13/08/2019

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 13/08/2019
Enquiry By Tan Chok Lok
TP Vehicle No. SJX5767T
Accident Date 08/08/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJX5767T	AIG Asia Pacific Insurance Pte. Ltd.	25/06/2019-24/06/2020	65-6419-3000

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-130078
Date of Request: 13/08/2019

Your Ref No: Online Purchase

Ban Hock Hin Co. Pte Ltd
No. 6 Defu Lane 4
Singapore 539410

Dear Sir/Madam,

Enquiry Date 13/08/2019
Enquiry By Tan Chok Lok
TP Vehicle No. SJX5767T
Accident Date 08/08/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque