

ASS. REC. BY:

REF: es/FCI/9016140/71y03

Special Instruction:

Assigner: auth vth

ASSIGNMENT (Office)

WS

From (Person): Merina Chia

of FCI

Date/Time: 11:00am @ 11/9/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBJ 9677L

Insured:

SHA 93249

at Workshop m/s

HKL Jim Team

Tel:

62727292

of

Blk 1008 Bkt Merah Lane 3 #01-24

Policy No:

Claim No:

D1800 7767 MFST

Sum Insured:

Excess:

Make of Veh:

D.O.A.

27/10/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

apd

H.O.D. Endorsement:

Date/Time:

11:45am @ 11/9/19

Person Contacted:

James

Vehicle:

IN/OUT

| Date/Time | Action/Instruction | Estimated |
|-----------|---------------------------------------|------------|
| | FBJ 9677L - CI / TPD 18022198 / Ze | 27/10/2018 |
| | SHA 93249 - CI / TPD 18022199 / Ze | 27/10/1 |
| 13/9/19 | sent Preli Revise by email | |
| 23/9/19 | Repair Limit \$5200/- inform Workshop | |
| 10/10/19 | Workshop want to Total loss | |
| 18/11/19 | Merina said can issue Report | |

Merina.chia@msfirstcapital.com.sg
65073856

Tanfer

REF:

hina FCI

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop n/s: _____
 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: \$8K.
 IDAC Accident Rpt: Consistent? : Yes or No
 GIA / PR Seen: Consistent? : Yes or No
 Est. Repairs: days Res.: Yes or No
 Turn Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Kenny Vehicle: IN / OUT

Ven No: FBJ9677E Yt Regn: 2015 Jan
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Kymco K-XCT200I cc 199
 Colour: white NC: Insured / Std / NI / NA
 Sp. Reading: _____ T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: RFB082000F1000195
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Mod: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 120/70R14
 R: 140/70R14
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or
 Front: _____ Rear: _____
 R/Bal: 5 mm R/Bal: 5 mm
 L/Bal: _____ mm L/Bal: _____ mm
 D.O.A. _____ D.O.I. 11/1/19 e
 Survey held at AKL
 Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time | Action / Instruction |
|-----------------|---|
| | Inform w/s repair cost \$5200. |
| <u>18/11/19</u> | Submit total loss (Uneconomical Repair) |
| | $MV = \$8000F$ $LTA = \$2720-63$ $Nett = \$5279-37$ |

estimate Netto \$2611

RECEIVED 27 NOV 2019

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report
 1) _____
 Date/Time, File Return to? _____
 2) 27/11/19 Typist
 Report Format : _____
 Lump Sum / I.B.I. (\$) _____

Days Of Repair: 6
 Resurvey No. of Trip: _____

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

Survey Fee: _____
 Transportation: _____
 S + PG, SI _____
 Photos _____
 Others _____
 TOTAL: 379

$3 \times 15 = 45$
 $45 + 170 = 215$

Yvonne Wong (LKK Auto)

From: HKL Lim Team Motorsport <hkllimteam@gmail.com>
Sent: Friday, November 15, 2019 11:17 AM
To: Merina Chia
Cc: Yvonne Wong (LKK Auto)
Subject: Re: FBJ9677L / SHA9324G D18007767MFSH Liability
Attachments: FBJ9677L 10.jpg; FBJ9677L 11.jpg; FBJ9677L 12.jpg

Dear Merina ,

Please find document attached LOD & process Cheque payment & write Client name Ng Ah Kwee .

On Tue, Nov 12, 2019 at 12:29 PM HKL Lim Team Motorsport <hkllimteam@gmail.com> wrote:
HI Merina

Our requirement total loss \$5200 + towing \$40 total \$5240

On Wed, Oct 23, 2019 at 12:08 PM CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg> wrote:
Without Prejudice

Dear Sir/Madam,

Please check with our Surveyor /LKK to finalise the total loss amount .

Thank you.

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

From: HKL Lim Team Motorsport [mailto:hkllimteam@gmail.com]
Sent: Tuesday, October 22, 2019 3:25 PM
To: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Cc: Merina Chia <Merinachia@msfirstcapital.com.sg>
Subject: Re: FBJ9677L / SHA9324G D18007767MFSH Liability

HI Merina

RESEND

RESEND

Yvonne Wong (LKK Auto)

From: HKL Lim Team Motorsport <hkllimteam@gmail.com>
Sent: Monday, September 23, 2019 5:50 PM
To: Taufikh (LKKAuto)
Subject: Re: FBJ9677L REPAIR LMIT

Follow Up Flag: Follow up
Flag Status: Flagged

Noted

On Mon, Sep 23, 2019 at 11:03 AM Taufikh (LKKAuto) <Taufikh@lkkauto.com> wrote:

Hi Keong,

Please take note repair limit for this motor is \$5200.

Regards

Taufikh

Lkk Auto



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

--
Thank You.

Best Regards

James Lim (Keong)

Tel: +65 9242 3895



BLK 1008 #01-24 Bukit Merah Lane 3, Singapore 159722
Tel: +65 6275-6656, 6275-6566 Fax: 6272-9291

Yvonne Wong (LKK Auto)

From: Yvonne Wong (LKK Auto)
Sent: Friday, September 13, 2019 5:47 PM
To: 'CWS Motor Claims'
Cc: 'Merina Chia'; SUR
Subject: SURVEY ASSESSMENT - D18007767MFSH/1 FBJ9677L
Attachments: FBJ9677L DOA 27102019 REVERT.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle FBJ9677L
Date of survey : 11/09/2019
Number of days : 6 days

Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto)
Sent: Wednesday, September 11, 2019 11:47 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Merina Chia' <MerinaChia@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18007767MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Wednesday, 11 September 2019 11:00 AM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Merina Chia <MerinaChia@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D18007767MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

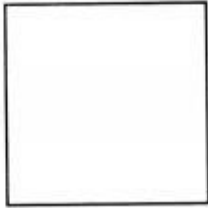
Please find attached the necessary documents for survey.

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

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

Best Regards,
Admin Team
Claim Workflow System
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

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



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

MOTOR SURVEY ASSIGNMENT

| | | |
|---------------------------|------------------------------------|--------------------------------------|
| Date | 29-10-2018 | Our Ref No. D18007767MFSH |
| Accident Date | 27-10-2018 | Claim Type. Third Party |
| Insured Vehicle | SHA9324G | Third Party Vehicle. FBJ9677L |
| Survey Location | BLK 1008 #01-24 BUKIT MERAH LANE 3 | |
| Contact Person. | JAMES LIM (KEONG) | |
| Contact No. | 62756656/ 62727292 | Fax No. 62729291 |
| Survey Type | WITHOUT PREJUDICE: | |
| Appointed Surveyor | LKK AUTO CONSULTANTS PTE LTD | |
| Contact Person | NA | Fax No. 68416315 |
| Contact Number. | NA | |

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

| | | |
|--------------------------|----------------------------|--------------------------------|
| Cc : Workshop | HKL LIM TEAM MOTORSPORT | Attention. NIL |
| Cc : TP Solicitor | NA | TP Solicitor Fax No. NA |
| Officer Incharge | MERINA CHIA SAN SAN | |

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.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D18007767MFSH

Date: 13 Sep 2019

Our Ref: CS/FCI19016140/T1yd3

The Motor Claims Department
MS First Capital Insurance Ltd

Dear Sir/Madam,

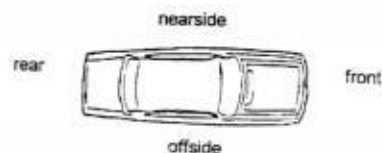
PRELIMINARY ADVICE OF VEHICLE NO. FBJ9677L .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 11/09/2019 at HKL LIM TEAM MOTORSPORT, and have the following to report:-

| | |
|--------------------------|--------------------------|
| Workshop Estimate Amount | : S\$ <u>13,792.00</u> . |
| Revised Estimate Amount | : S\$ <u>6,427.00</u> . |
| "Check" Items Amount | : S\$ <u>4,810.00</u> . |
| Market Value | : S\$ _____ . |
| LTA Reimbursement Value | : S\$ _____ . |
| Nett Value | : S\$ _____ . |

Description of Damage:

The vehicle sustained damages
at the front n/s portion



Yours faithfully

Taufikh
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 | 05/09/2019 18:58 |
| Date Of Accident | 27/10/2018 08:30 |
| Exact Location Of Accident | ALONG ENG NEO AVENUE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | FBJ9677L |
| Insured/Policyholder | |
| Name Of Registered Owner | DAVID NG AH WAH |
| NRIC No | S1736794C |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96237055 |
| Alternative Phone No | OFFICE-NOPHONE |

Vehicle Particulars

| | |
|--------------|-----------------|
| Manufacturer | KYMCO |
| Model | K-XCT200I-199CC |

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 REPORTING ONLY

Vehicle Category MOTORCYCLE

Insurance Company

| | |
|---------------------------|-------------------------------|
| Name of Insurance Company | AXA INSURANCE PTE LTD |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | VMZ/P1867165 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | DAVID NG AH WAH |
| NRIC No | S1736794C |
| Date Of Birth | 21/01/1966 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 19/11/1986 |
| Driving Experience | 31 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96237055 |
| Fax Number | |
| Contact Number | OFFICE-NOPHONE |
| E-Mail Address | NOEMAIL |

| | |
|---|--------------------------------|
| Address | BLK 15 MASRSILING LANE #07-169 |
| Postcode | 730015 |
| 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 | COLLIDED INTO MOTORCYCLIST |
| 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? | 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 | WOODLANDS WEST N.P.C |
| Police Station Address | ROAD: 1 WOODLANDS STREET 12 , POSTCODE: 738622 , 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 POLICE REPORT (REPORT NO.: T/20181031/2095)

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 | SHA9324G |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name DAVID NG AH WAI

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBJ9677L

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode



SINGAPORE POLICE FORCE



T/20181031/2095

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

1 of 3

Report No. T/20181031/2095

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|--------------------------|
| Date/Time Report Made: 31/10/2018 16:30 | Vide Report No.: D/20181027/0052 | Station Diary No.: 72 |
|--|-------------------------------------|--------------------------|

Informant's Particulars

| | | | | | |
|---|------------|------------------------------|--|--|----------------------------|
| Name of informant: NUR LILIAN MONIQ BINTI JOHN | | | Address: APT BLK 15 MARSILING LANE #07-169 SINGAPORE 730015 | | |
| ID Type / ID No.: FIN NO / G6994990N | | | Contact No.: Home/Office: Mobile: 87548028 | | |
| Nationality: MALAYSIAN | | | Email: | | |
| Sex: Female | Age: 29 | Date of Birth: 20/03/1989 | Type of Informant: NEXT OF KIN | | |
| Race: Malay | | | Language: English | | Institution / School Name: |
| Occupation: Hotel receptionist | | | Driving Licence Information: Class: Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|-----------------------------|--------------------|--|------------------------------------|
| Type of Accident: | Fatal Attended by Police | Drink Drive: No | Date/Time of Accident: 27/10/2018 08:30 | Type of Location: Straight Road |
| Location: Along Road 1 ENG NEO AVENUE | | | | |
| ALONG ENG NEO AVENUE BY ENG NEO AVENUE TOWARDS BUKIT TIMAH ROAD | | | | |
| Lamp Post Number: 9 | | | | |
| Weather: | | Road Surface: | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: | |
| Type of Collision: | | | Anyone conveyed by ambulance: Yes | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No. of Passengers |
|-------------|------------|------|-------|-------|-----------|-------------------|
| FBJ9677L | Motorcycle | | | | | 0 |
| SHA9324G | TAXI | | | | | 0 |

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20181031/2095

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

3 of 3

Report No. T/20181031/2095

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.

| | |
|---|--|
| <p>Signature Of Officer Recording The Report: SN 127 J/ Sgt 2 MOHAMED FAEZ BIN MOHAMED SAHID Signature : </p> | <p>Signature Of Informant: </p> |
| <p>Signature Of Informant: Not applicable</p> | <p>Date/Time: 31/10/2018 16:30</p> |
| <p>Officer In Charge Of Case: TP / FAIT / SI VILTON HIA WEE SIANG Contact No.: 65476228</p> | <p>Classification Of Case:</p> |

Authentication Stamp
NP168



**SINGAPORE
POLICE FORCE**



T/20181031/2095

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

2 of 3

Report No. T/20181031/2095

CONTINUATION OF REPORT

| | | | | |
|-----------------------------------|-----------------------------|--|--|-----------------------------------|
| Name | DAVID NG AH WAH | | ID No. | S1736794C |
| Related Vehicle | FBJ9677L (Motorcycle) | | Contact No. | NIL |
| 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 |
| Name | NUR LILIAN MONIQ BINTI JOHN | | ID No. | G6994990N |
| Related Vehicle | NIL | | Contact No. | 87548028 |
| 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 27/10/2018 at about 1115hrs, I received a call from my husband's number however, on the other line was an investigation officer by the name of Vilton Hia, to informed me that my husband namely: David Ng Ah Wah had met with an accident and passed away at the scene. He then informed me to come down to Traffic Police HQ at Ubi as soon as possible. During that material time, I was not in the right state of mind thus I send my brother-in-law to go to the TP HQ to meet up with the IO.

I wish to state that as of now I do not know anything about the accident or how it happened as investigation is still on going. I only received a few information about the accident through social media, Facebook, STOMP.

I am lodging this report for record purpose.



SINGAPORE POLICE FORCE



T/20181031/2095

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

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| ID Type / ID No.: FIN NO / G6994990N | | | Contact No.: Home/Office: Mobile: 87548028 | |
| Nationality: MALAYSIAN | | | Email: | |
| Sex: Female | Age: 29 | Date of Birth: 20/03/1989 | Type of Informant: NEXT OF KIN | |
| Race: Malay | | | Language: English | Institution / School Name: |
| Occupation: Hotel receptionist | | | Driving Licence Information: Class: Date of Expiry: | |

General Information of the Accident

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| Location: Along Road 1 ENG NEO AVENUE | | | | |
| ALONG ENG NEO AVENUE BY ENG NEO AVENUE TOWARDS BUKIT TIMAH ROAD | | | | |
| Lamp Post Number: 9 | | | | |
| Weather: | | Road Surface: | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: | |
| Type of Collision: | | | Anyone conveyed by ambulance: Yes | |

Details of Vehicle Involved

| Vehicle No | Type | Make | Model | Color | Condition | No. of Passengers |
|------------|------------|------|-------|-------|-----------|-------------------|
| FBJ9677L | Motorcycle | | | | | 0 |
| SHA9324G | TAXI | | | | | 0 |

Details of Person Involved

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

9/4/2019

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details

| | |
|-----------------------------|-------------------------|
| Vehicle No.: | FBJ9677L |
| Vehicle Type: | P01 - Passenger Scooter |
| Vehicle Attachment 1: | No Attachment |
| Vehicle Scheme: | Normal |
| Vehicle Make: | KYMCO |
| Vehicle Model: | K-XCT200I |
| Chassis No.: | RFBD82000F1000195 |
| Propellant: | Petrol |
| Engine No.: | SK40B1000219 |
| Engine Capacity: | 199 cc |
| Maximum Power Output: | - |
| Maximum Laden Weight: | 344 kg |
| Unladen Weight: | 176 kg |
| Year Of Manufacture: | 2014 |
| Original Registration Date: | 20 Jan 2015 |
| Lifespan Expiry Date: | - |
| OE Category: | D - Motorcycle |
| Quota Premium: | \$4,353.00 |
| OE Expiry Date: | 19 Jan 2025 |
| Road Tax Expiry Date: | 27 Oct 2018 |
| Inspection Due Date: | 19 Jul 2019 |
| Planned Transfer Date: | 04 Sep 2019 |
| CO2 Emission: | - |
| NO Emission: | - |
| HC Emission: | - |
| PM Emission: | - |



HKL LIM TEAM MOTORSPORT

Blok 1008 #01-24, Bukit Merah Lane 3, Singapore 159722
Email: support@hklimmotorsport.com.sg

Tel: 6275 6656, 6275 6566, 62727292 Fax: 6272 9291
Website: www.hklimmotorsport.com.sg

~~FBP 0410C~~ FBS 9677L

- 1 front fork assy lh / rh
- 2 front fork under bracket
- 3 steering cone bearing set
- 4 body frame alignment
- 5 front fender
- front wheel rim
- 6 front wheel shalf
- 7 front wheel bearing 2 pcs
- 8 front wheel bearing oil seal
- 9 front brake disc
- 10 iu unit
- 11 handle bar
- 12 handle bar top cover
- 13 handle bar low cover
- 14 front no plate
- 15 brake lever lh / rh
- 16 side mirror lh / rh
- 17 head cowling lh / rh
- 18 head cowling plate lh / rh
- 19 head cowling inner panel lh / rh
- 20 head v cover
- 21 head v cover panel
- 22 windshield
- 23 windshield panel
- 24 windshield panel guard
- 25 tailboard lh
- 26 side stand
- 27 main stand
- 28 top box
- 29 top box bracket
- 30 radiator head
- 31 radiator cap
- 32 horn
- 33 battery cover
- 34 rear foot rest
- 35 usb
- 36 seat lock cable
- 37 ignition switch set
- 38 radiator

p420

| | |
|----------------|-------|
| \$800.00 | ? |
| \$350.00 | ? |
| \$220.00 | ? |
| Labow \$700.00 | 250 |
| \$220.00 | x |
| \$550.00 | x |
| \$60.00 | x |
| \$40.00 | x |
| \$10.00 | x |
| \$290.00 | x |
| \$180.00 | can |
| \$220.00 | bt |
| \$90.00 | can |
| \$85.00 | can |
| \$12.00 | mis |
| \$160.00 | int |
| \$180.00 | dis |
| \$400.00 | can |
| \$500.00 | ? dis |
| \$50.00 | dis |
| \$150.00 | dis |
| \$80.00 | dis |
| \$250.00 | mis |
| \$55.00 | mis |
| \$25.00 | mis |
| \$290.00 | can |
| \$80.00 | bt |
| \$150.00 | del |
| \$180.00 | mis |
| \$150.00 | can |
| \$70.00 | ? |
| \$35.00 | ? |
| \$35.00 | ? |
| \$45.00 | ? |
| \$120.00 | can |
| \$55.00 | x |
| \$120.00 | *? |
| \$380.00 | ? |
| \$400.00 | ? |



HKL LIM TEAM MOTORSPORT

Bik 1008 #01-24, Bukit Merah Lane 3, Singapore 159722
Email: support@hklilmotorsport.com.sg

Tel: 6275 6656, 6275 6566, 62727292 Fax: 6272 9291
Website: www.hklilmotorsport.com.sg

- 39 seat bar lh
- 40 towing
- 41 labour
- 42 compartment
- 43 compartment cover
- 44 compartment box cover
- 45 compartment box padel
- 46 compartment center cover
- 47 inner panel lh / rh
- 48 inner panel lh cover
- 49 fr fork panel
- 50 intake panel
- 51 lower lh panel
- 52 lower lh cowl
- 53 foot panel lh
- 54 fuel tank cover
- 55 meter assy
- 56 meter panel
- 57 vbelt cover
- 58 head light
- 59 head light socket lh / rh
- 60 head light bulb lh / rh
- 61 air box cover
- 62 brake hose lh / rh
- 63 side fairing lh / rh
- 64 side fairing panel lh / rh
- 65 battery

TOTAL

\$150.00 x
labour \$40.00 ✓
labour \$850.00 300 ✓
\$180.00 in ✓
\$90.00 in ✓
\$80.00 6.00 ✓
\$35.00 in ✓
\$120.00 in ✓
\$180.00 dis ✓
\$45.00 dis ✓
\$45.00 in ✓
\$120.00 in ✓
\$120.00 cut ✓
\$150.00 cut ✓
\$80.00 in ✓
\$120.00 ? dis ✓
\$680.00 in ✓
\$120.00 dis ✓
\$320.00 cut ✓
\$900.00 in ✓
\$60.00 in ✓
\$40.00 in ✓
\$80.00 cut ✓
\$240.00 ?
\$440.00 ?
\$160.00 ?
\$180.00 x

\$13,412.00

(amp stay - \$380 H-)

13/9/19

Tan Joon 97445749

'wp' 11/9/19 @ 3:50pm

lumpsum

Repair after repair

To check repair limit.

sure 11/9/19

26 days

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer
Signature:
Date: