From (Person	Hastizul Farhan	of	SPF	D	nte/Time: 20/9/2019
Estimated Co			Bitl to:		
od (II) w	STTP RES / OD RES	/EVA/INV/M	V I-CS		
	chicle No: FBD			Insured: _	GBB 7921L
at Workshop	m/s Glen Enter	prise		_ Tel: _	62969939
(10)	Serangoon Road	j .			
olicy No:	O .		Claim No: _	AEMD	105 009 2019 094
Sum Insured:			Excess:		
					PIOC/8/76 A.O.
CHent's Recor	d)	RS		I	P.O.D. Endorsement:
CRent's Recor CA / REV			sted: Stephanie		H.O.D. Endorsement:
CHent's Recor CA / REV Date/Time;	/ REP. / REV 24 H	Person Contac	sted: Stephanie		H.O.D. Endorsement:
CHent's Recor CA / REV Date/Time;	/ REP. / REV 24 H	Person Contac	sted: Stephanie		H.O.D. Endorsement:
Make of Veh Client's Recor CA / REV Date/Time; Date/Time	Action/Instruction PBD HSTOA	Person Contact	stephanie		H.O.D. Endorsement:
CHent's Recor CA / REV Date/Time;	/ REP. / REV 24 H	Person Contact	stephanie		H.O.D. Endorsement:

11.5

Birreuur Orl. REF:	SPF.	
Sineyor Dic.	ASSIGNMENT	(-2024) PA Yr Regn. 05 Mar 200
	FBD USTO	A VIRON OS Mar 200
From: Date:	Veh No: Veh No: Type: M.Car / M.Cycle / Bus / Va	n / Lorry / Taxi / Prime Mover /
Estimated Cost:	T T	
OD (TP) WS / TP RES / OD RES / EVA / INV / I		X-1R cc B5
To Inspect Vehicle No:	Make: Yamaha.	A/C: Insured / Std / NI / NA
at Workshop m/s BILN EMERP	203/3	T/Radio: Insured / Std / NI / NA
of	Sp.Reading 3931 Z	1/Radio: Insured / Std / Ni / NA
Insured:	Eng/No: ,	-1/2
Policy No.	C/No: 45330	
Claims No.	Gen. Cond: Godd / Fair / Poor /	
Sum Insured: Excess:	Steering: Inorder / Jammed / Le	
(Client's Record)	Brake: Indeder / Jammed / Le	
Make of Veh:	Modi: (Nil) / S/Rim / STD A/R	A STANDARD CONTRACTOR OF THE STANDARD CONTRACTOR
	Tyre Size: F: SO	(90 -17" (MaxX)
(Policy Condition)	Ř: 90	(80-17 (Dun)
Remark: The veh had commenced its	N/S O/S BS / DUN / EXNOVA / GY / FS /	LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or	
Bal. or Market Value:	Front	Rear
IDAC Accident Rport: Consistent?	: Yes or No R/Bal. , mm	R/Balmm
GIA / PR Seen: Consistent?	: Yes or No L/Bal. mm	L/Bal. mm
Est. Repairs: 3 days Res.:	Yes or No D.O.A.	0.0.1. 23-09-19
Lum Sum: 2 % _ 3 Val.:	Yes or No Survey held at	5 5pm
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear	OSN NIS I UIC I Rooftop or
	Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame	Body Structure affected due to collision.
Date / Time Action / Instruction	<u> </u>	2
Supmit preci v	report, vehicle not sent in	A Lov repair.
Sommer had a	yar (valiation is sail is	(1.1)
repair range	RECEIVED 1 0 MAR 202	20
	\- h11	
	\$1050-51/00	
11/2-150-1 A	Rehaw dang 3- Total 3	
wlekend - 0	Repair days 3 - Total 3	
Date/Time, File Pass to? : Preli. Repo	ort Days Of Repair:	
1993 TUPIST : Final Repo	ort . Resurvey No. of Trip:	Survey Fee: 22
Date/Time, File Return to?		Transportation:
2)	Add Fee: Site Insp (\$)S+RS,SI
	: Interview (\$) Photos
Report Format :	:Tech. Invs (\$) Others

Nivitha (LKK Auto)

From:

Hafizul Farhan RAHMAT (SPF) < Hafizul_Farhan_RAHMAT@spf.gov.sg>

Sent:

Friday, 20 September 2019 3:55 PM

To:

assignments; Admin-D (LKKAuto)

Cc:

SUR; Frankie THAY (SPF)

Subject:

Pre-repair survey of FBD4570A (vs GBB7921L DOA: 27/8/2019)

Message Classification: Unclassified
Our Ref: AEMD/105/009/2019/094

Dear Nivitha,

Kindly conduct the pre-repair survey on FBD 4570A at:

Glen Enterprise Pte Ltd 1102 Serangoon Rd Singapore 328196

Contact: Stephanie, Tel 6296 9939

Thank you.

Veh (n

Best Regards,

Hafizul Farhan Bin Rahmat AEMD / PLD Singapore Police Force DID: (65) 6478 4840 | FAX: (65) 6478 4848





WARNING. "Privileged/Confidential information may be contained in this message. If you are not the intended addressee, you must not copy, distribute or take any action in reliance thereon. Communication of any information in this email to any unauthorized person is an offence under the Official Secrets Act (Cap 213). Please notify the sender immediately if you receive this in error."

From: Admin-D (LKKAuto) admin-d@lkkauto.com>

Sent: Friday, 12 July 2019 4:50 PM

To: Hafizul Farhan RAHMAT (SPF) < Hafizul Farhan RAHMAT@spf.gov.sg>; assignments

<assignments@lkkauto.com>

Cc: Frankie THAY (SPF) < Frankie THAY@spf.gov.sg>; SUR < sur@lkkauto.com>; Olivia Lau (LKKAuto)

<olivialau@lkkauto.com>

Subject: RE: Post survey of SMG8995K (vs GZ8938Y DOA: 25/6/2019)

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that vehicle is not in the workshop, repairer will arrange.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.

aroresaru.	ACCIDENT STATEMENT
Date Of Report	04/09/2019 16:56
Date Of Accident	27/08/2019 04:50
Exact Location Of Accident	CAR PARK BLK 481 JURONG WEST ST 4
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBD4570A
Insured/Policyholder	
Name Of Registered Owner	ENG KIAN HONG
NRIC No	S7209604E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83882959
Alternative Phone No	OTHERS-83882959
Vehicle Particulars	
Manufacturer	YAMAHA
Model	135LC-134CC ES
Exact Purpose for which vehicle was being used at time of accident	PARKED STATIONARY
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/19-395706-CA
Cover Note Number	05/03/2019-04/03/2020
Driver	
Name of Driver	ENG KIAN HONG
NRIC No	S7209604E
Date Of Birth	27/03/1972
Occupation	OUTDOOR
Date Of Driving Pass	08/09/1990
Driving Experience	28 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83882959
Fax Number	(LOCAL) +65-83882959
Contact Number	OTHERS-83882959

NOEMAIL

Address

BLK 481 JURONG WEST STREET 41 #10-204

Postcode

640481

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

DWNE

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

COLLIDED INTO PARKED VEHICLE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

NO

ambulance?

...

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

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

REFER TO POLICE REPORT: T/20190827/2074.

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

GBB7921L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

GOVERNMENT

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) Involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (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:
 - 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.

1/2

Policyholder's Signature Date & Time: 和

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

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

GIARMC SketchPlanForm V3

SKETCH PLAN NOUA VILLE DESCRIBE CIRCUMSTANCES OF THE ACCIDENT plice DECLARATION I/We declare the foregoing particulars are true in every respect. TO Policyholder's Signature Date & Time: 31/08/19 Driver's Signature Reporting Centre Personnel's Signature (If driver is not the policyholder)
Date & Time: 31 | 8 8/19 Name: NRIC/FIN No.:

GIARMC SketchPlanForm_V3





T/20190827/2074

Police Station Of Origin:

Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

1 of 3

Report No. T/20190827/2074

REPORT OF A TRAFFIC ACCIDENT

	ne Report I 019 13:07	Made:	Vide Report No.: Station Dia			
Informant's Particulars			建建设的建设设施的 证据,但是1000年的			
	f Informant: AN HONG		Address: APT BLK 481 JURONG WES SINGAPORE 640481	T STREET 41 #10-204		
	/ ID No.: O / S72096	04E	Contact No.: Home/Office:	Mobile: 83882959		
Nationa SINGAF	lity: PORE CITIZ	EN	Email:	<u> </u>		
Sex: Male	Age:	Date of Birth: 27/03/1972	Type of Informant: Vehicle Owner			
Race: Chinese			Language: English	Institution / School Name:		
Occupat Bus driv			Driving Licence Information:	Date of Expine		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/08/2019 04:5	Type of Location Car Park
at Blk 481 Jur Weather:	ST STREET 41 ong West St 4, Open sp	ace carpark at the m Road Surface:	otorcycle lot.	Road Speed Limit:
Clear				•
Clear Traffic Flow: Two Way		Traffic Control:	1 1	Traffic Volume:

Details of V	ehicle Involve	d Market		DESIGNATION OF	District the second	
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBD4570A	Motorcycle			Black	Seriously	0





T/20190827/2074

Police Station Of Origin: Clementi N.P.C

Report No. T/20190827/2074

2 of 3

20 Clementi Avenue 5 SINGAPORE 129858-Tel No: 1800-8729999

CONTINUATION OF REPORT

Brief Details.

On 26/08/2019 at about 2130hrs, I last parked my motorcycle at Blk 481 Jurong West st 41, open space carpark at one of the motorcycle lot. On 27/08/2019 at about 0450hrs, when I returned to my motorcycle. I discovered that the front of my motorcycle is seriously damaged, I found a piece of paper behind the back seat of my motorcycle.

The note wrote, "Owner of motorcycle (FBD 4570A) your vehicle was involved in an accident with police van while your motorcycle was parked. Traffic police had attended to the accident. Please lodge accident report NP 168 incident o J/20190826/0126 IO in charge Jerry 65476213)."





Police Station Of Origin: Clementi N.P.C

Report No. T/20190827/2074

3 of 3

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

CONTINUATION OF REPORT

S	ke	te	h	P	la	n
-	2		••		ıaı	

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 Re D / Sgt 2 LIH JUN JUN	port;	Signature Of Informant:	
Signature Of Interpreter: Not applicable		Date/Time: 27/08/2019 13:07	
Officer In Charge Of Case: TP / GIT /		Classification Of Case:	
SI MOHAMMAD ABD LIAM BIN PALIL Contact No.: 65476248 POLICE FORCE	E A	SN 37	
Authentication Stamp NP168	1		
	516657118		

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID:	604E	
kanan mara Maranda merena adak perdagan dan berangan pengahan 193	Carried State Control of the Control	The state of the s
Vehicle No.:	FBD4570A	
Vehicle to be Exported:	No	
Intended Deregistration Date:	23 Sep 2019	
Vehicle Make:	YAMAHA	
Vehicle Model:	X-1R	
Primary Colour:	Red	
Manufacturing Year:	2009	
Engine No.:	453302667	
Chassis No.:	453302667	
Maximum Power Output:		
Open Market Value:	\$1,886.00	
Original Registration Date:	05 Mar 2009	
First Registration Date:	05 Mar 2009	
Transfer Count:	3	
Actual ARF Paid:	\$283.00	
When the Art and the state of t	· · · · · · · · · · · · · · · · · · ·	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:		
PARF Rebate Amount:	\$0.00	SHIGHT HERE AND ADDRESS OF THE PARTY OF THE
COE Expiry Date:	29 Feb 2024	
COE Category:	D - Motorcycle	
COE Period(Years):	5	
PQP Paid:	\$1,599.00	
COE Rebate Amount:	\$1,417.00	
Total Rebate Amount:	\$1,417.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 23 Sep 2019

ОК



MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212C) 4 Shenton Way. # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 msig.com.sg

MOTORCYCLE INSURANCE SCHEDULE

DATE OF ISSUE: 14/03/2019

AGENCY: A0074-001-10001

COMMERCIAL AGENCY PTE LTD

POLICY NO: MSD/VMS/19-395706-CA

INSURED:

NAME:

ENG KIAN HONG (HUANG JIANFENG)

ADDRESS: 481 JURONG WEST ST 41

#10-204 SE 640481 NRIC NO: S7209604E

DATE OF BIRTH: 27/03/1972 (46 yrs) DRIVING EXP: 08/09/1990 (28 yrs)

CONTACT NO: 83882959

BUSINESS OR PROFESSION:

BUS DRIVER

05/03/2019

12:01AM

PERIOD OF INSURANCE FROM:

TO 04/03/2020

CUBIC CAPACITY: 135

MAKE OF VEHICLE:

REGISTRATION NUMBER:

FBD4570A YAMAHA

YEAR OF REGISTRATION:

2009

INSURED ESTIMATE OF VALUE: PMV

PREVAILING MARKET VALUE

SEATING CAPACITY: 2

AUTHORISED DRIVERS:

THE INSURED ONLY.

ENDORSEMENTS APPLICABLE: 2C 2K 3Q M23 97 - INSURED

PREMIUM:

160.00

EXCESS: \$300(FIRE&THEFT) \$600(ENDT 2K)

GST @ 7%

11.20

TOTAL:

171.20

NO CLAIM BONUS OF 20% IS ALLOWED

NAME OF EMPLOYER AND/OR HIRE PURCHASE OWNER:

REPLACING POLICY NO: MSD/VMS/17-375538-CA

Sanction Limitation and Exclusion Clause

No Insurer shall be deemed to provide cover and no Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers



GLEN ENTERPRISE PTE LTD

1102 SERANGOON ROAD SINGAPORE 328196 TEL: 62969939 FAX: 62964038 Campany Registration No. 200711752E Email: mcs.auto@yahoo.com.sg

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS				
Date of Accident :	27.08.2019	Days of Repair :	3	
Vehicle No :	FBD4570A	Chassis No :	453302667	
Make & Model :	YAMAHA 1345LC	Engine No :	453302667	
Year of Manufacture :		Reg Date :	05.03.2009	

Estimate on Parts

No.	Qty	Spare Parts Description	Cost F	Price	Remark	
	1	Front Fender (Black) / QV	\$	65.00		
	1 set	Front Flasher Light Assy / Cl	\$	130.00		
	1 set	Front Body Under & A	\$	85.00		
	1	Signal Light RH / CAA	\$	35.00	11141	
	1 pair	Fork Assy	\$	95.00	50(SN)	loga
	1	Brake Disc X / A/A/	\$	185.00		
	1	Front Rim X 7/V	\$	180.00		
	1	Handle Bar / 197	\$	70.00		
	1	Brake Lever RH 🐣 /	\$	35.00		
	1	Clutch LH X	/ \$	35.00		
	1 pair	Handle Grip (RH & LH)	\$	28.00		
	1 pair	Balancer (RH & LH) / Cut	\$	25.00		
	1 pair	Mirror (RH & LH) / Cul	\$	60.00		
	1	Reservoir Cap & W	\$	18.00		
	1	Radiator Assy / Cut	\$	280.00		
	1 set	Center Body Cowling (Black)	\$ Cust	95.00		
	1	Foot (brake) Pedal RH / Cut	\$	55.00		
	1 set	Rider Footrest with Bracket X	SNN	45.00		
	1	Protector of Muffler / 00	\$	60.00		
	1	Rear Box	\$	95.00		

(A) Total (S\$)	\$	1,508.40	
(A) Minus 10% (S\$)	-\$	167.60	
(A) Sub total (S\$)	\$	1,676.00	

978 280.2 00 X

No.	Labour Charges	Amount	
1	Fork Oil & Fork Oil Seal	\$	80.00
2	Check lighting & Wiring Connection	\$	60.00
3	Remove, Replace, Repair & Re-align all accident Affected Parts	\$	380.00

Gross Labour Fee (S\$) \$ 770.00

COS	ST OF CLAIMS	
Parts	\$	1,508.40
Labour	\$	1,320.00
Towing	\$	50.00
Gross Total (S\$)	\$	2,878.40
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		2278.40

This Claim is handled by: Stephanie

2 Days. Walla Composit. Composit reposit. After reposit photos. Gno Qiay - Sr88 0282

23/9/19.

100

1310,2 2%, 1050

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:



ESTIMATED NORMAL PERIOD FOR REPAIR:

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 Internati	ionale Des Experts En Autom	obile
AUTO	MOTIVE ENGIN	EERING & MGT DIVISION	Ref : CS/SPF190167	21/Gtf3s2
ACCIDENT CLAIMS SECTION (SPORE POLICE FORCE) POLICE LOGISTICS BASE (PLB) 1 HEMMANT ROADSINGAPORE 438675		Date: 12-03-2020		
ATTN:	: HAFIZUL FARH		Code: SPF	
1.			s :- THIRD PARTY CLAI	
	Insured Veh.	GBB 7921L	Veh. Inspected	FBD 4570A
	Policy No.		Coverage (\$)	0.00
	Claim No.	AEMD/105/009/2019/094	Excess (\$)	0.00
	Assign From	HAFIZUL FARHAN	Assign Date	20/09/2019
2.	司信品质量原	Vehicle Par	ticulars & Condition	
	Make & Model	YAMAHA X-1R	c.c	135
	Engine No.	HIDDEN	Year of Reg.	2009
	Chassis No.	4S3302667	Colour	BLACK
	Odometer	39312	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
3.		Cond	itions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	80/90-17	MAXXIS	4 mm
	L/H Front Tyre			mm
	R/H Rear Tyre	90/80-17	DUNLOP	4 mm
	L/H Rear Tyre			mm
4.		Descrip	tion of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE FE	RONT PORTION AND O/S	BODY.
	DAMAGES SEE D	ETAILS.		
5.	本文 体表表示		ral Information	STAR DESCRIPTION
	Accident Date	27/08/2019	Inspection Date	23/09/2019
	Survey held at	GLEN ENTERPRISE PTE LTD)	
	POSE VERSON TO A DESCRIPTION OF THE	1102 SERANGOON ROAD SI	NGAPORE 328196	
5a.			Remarks	
1 1	B)THE INSPECTION	HAS NOT SEND IN FOR REPAIR ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS,"	ITHOUT PREJUDICE" BAS	SIS. SED REPAIRS.
5b.	MARKET STATE OF THE STATE OF TH		te Days of Repair	BORELS SALES

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. FBD 4570A

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT FENDER (BLACK)	CRACKED	65.00	65.00
	SET FRONT FLASHER LIGHT ASSY	CRACKED	130.00	130.00
	SET FRONT BODY UNDER	сит	85.00	85.00
1	SIGNAL LIGHT RH	CRACKED	35.00	35.00
	BRAKE DISC	NOT NECESSARY	185.00	-
1	FRONT RIM	NOT NECESSARY	180.00	1-
1	HANDLE BAR	BENT	70.00	70.00
	BRAKE LEVER RH	NOT NECESSARY	35.00	0.
100	CLUTCH RH	NOT NECESSARY	35.00	-
	PAIR HANDLE GRIP (RH & LH)	NOT NECESSARY	28.00	a -
	PAIR BALANCER (RH & LH)	сит	25.00	25.00
	PAIR MIRROR (RH & LH)	сит	60.00	60.00
	RESERVOIR CAP	сит	18.00	18.00
1	RADIATOR ASSY	сит	280.00	280.00
1	SET CENTER BODY COWLING (BLACK)	сит	95.00	95.00
	FOOT (BRAKE) PEDAL RH	сит	55.00	55.00
	SET RIDER FOOTREST WITH BRACKET	NOT NECESSARY	45.00	
	PROTECTOR OF MUFFLER	DENTED	60.00	60.00
1	REAR DOOR	· CHECK	95.00	
	LESS 10% DISCOUNT		-158.10	-97.80
	Control of the contro		1,422.90	880.20
-1	PAIR FORK ASSY (SN) (LOCAL REPAIR)	BENT	95.00	50.00
100	LESS 10% DISCOUNT		-9.50)
			85.50	50.00
	SPECIAL NETT ITEMS			500001900000
1	FORK OIL & FORK OIL SEAL (SN)	NECESSARY	80.00	2012000
	24 30		80.00	80.00

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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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	LABOUR			
	CHECK LIGHTING & WIRING CONNECTION.	NOT NECESSARY	60.00	100
	REMOVE, REPLACE, REPAIR & RE-ALIGN ALL ACCIDENT AFFECTED PARTS.		380.00	200.00
	SPRAY PAINTING.		250.00	100.00
			690.00	300.00
	GRAND TOTAL		2,278.40	1,310.20

RECOMMENDED COST OF REPAIRS	· 经建设是 5000 - 500	1,310.20
(REPAIR COST NOT CONCLUDE)		
(EXCLUDE CHECK ITEMS \$\$85.50 NETT)		

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THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$1,050.00 - \$1,100.00

RECOMMENDED REPAIR DAYS: 3

WEEKENDS: 0 TOTAL DAYS: 3

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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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