

22/03/2002

ASS. REC. BY:

REF: CS3 / CT1 19018334 / Hqf302

Special Instruction:

Surveyor: Hock Am

ASSIGNMENT (Office)

From (Person): Irene Tay Hui Ping of CT1

Date/Time: 17.10.19 13:01 PM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: FBA 8825

Insured: SJL 4711Z

at Workshop m/s: motoplex

Tel: 67476774

of 10 Eka Bukit Road 2 #01-24

Policy No: DMPCS 30445119000

Claim No: SNM19D 204710002

Sum Insured:

Excess:

Make of Veh:

D.O.A. 5.10.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 17.10.19 1:41 PM

Person Contacted: Ah Beng

Vehicle: IN/OUT

Date/Time	Action/Instruction (X) Estimate
	FBA 8825 - NA / CT1 19017568 / 24 D.O.A - 05/10/2019
	SJL 4711Z - NA / CT1 19017563 / 24 D.O.A - 05/10/2019
06/11/19	Dismantle: 22/10/2019 Submit PRS.

A.S.S. REC. BY: H. ANNREF: CT2

PRs

## ASSIGNMENT

From:

Date: 17.10.2019

Estimated Cost:

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

To Inspect Vehicle No: FBA 8825at Workshop m/s motoplexof 10 kaki Bukit Road 2 #01-24

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS my

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

Yr Regn: 25/91/2006

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

Truck / Trailer or

Make:

Honda CB400 c.c. 184399

Colour:

Yellow A/C: Insured / Std / NI / NA

Sp. Reading:

38892 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JH2NC39965M100353

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: 120/60/2R17  
R: 160/60/2R17

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

TOYO / YOKO or

Front

R/Bal. 5 mm BS

L/Bal.

mm BS

D.O.A.

5/10/19 D.O.I. 17/10/19

Survey held at

motoplex

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

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

Date / Time Action / Instruction

MV 9000

PV 3960

NV 5000

RECEIVED 06 NOV 2019

Range → 1.5 - 2k

repair days → 2 day

25/10/2019

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

Date/Time, File Return to?

2)

Rep. Format:

PRs

Lump Sum / L.B. / C

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

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

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

190

190

Al mag - 97 47 7223

## ...CLAIM SUBFOLDER...(New Assignment)

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Oct 2019		17 Oct 2019 13:01 <a href="#">Assign</a>				<a href="#">New Assignment</a> <a href="#">Cancel Case</a>

[Main](#)[Reference](#)[Claim Details](#)[Documents](#)[Show All](#)

## CLAIM SUBFOLDER DETAILS

[\[Created by insurer\]](#)

Insured:			
Main Claimant:	MOHAMAD HALIF BIN HUSAIN		
Vehicle Reg. No.:	FBA882S	Date of Loss:	05/10/2019 16:00 - :59
Claim Type:	TP / SNM19D204710C02	Policy/Cover Note No.:	DMPCSN30445119000
Vehicle Reg. No. (Insured):	SJL4711Z	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Motoplex Pte Ltd (HQ) 10 KAKI BUKIT ROAD 2, # 01-24 FIRST EAST CENTRE, 417868 Kaki Bukit - Tel: 67476774		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 29/10/2019]		
Adj Asg. Remarks:	PLEASE SURVEY AND REVERT		

## ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.



## ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Enquire Vehicle Transfer Fee

### Vehicle Details

Vehicle No.  
FBA8825

Make / Model  
HONDA / CB400

Vehicle Type :  
P00 - Passenger Motorcycle/Autocycle/Moped

Vehicle Scheme :  
Normal

Propellant :  
Petrol

Motor No. :  
-

Power Rating :  
-

Maximum Laden Weight :  
329 kg

Year Of Manufacture :  
2005

Lifespan Expiry Date :  
-

PQP Paid :  
\$6,337.00

Road Tax Expiry Date :  
24 Jan 2020

Inspection Due Date :  
24 Jan 2020

CO2 Emission :  
-

CO Emission :  
-

NOx Emission :  
-

Vehicle Attachment 1 :  
No Attachment

Chassis No. :  
JH2NC39965M100353

Engine No. :  
NC23E3000356

Engine Capacity :  
399 cc

Maximum Power Output :  
-

Unladen Weight :  
190 kg

Original Registration Date :  
25 Jan 2006

COE Category :  
D - Motorcycle

COE Expiry Date :  
24 Jan 2026

PARF Eligibility Expiry Date :  
-

Intended Transfer Date :  
24 Oct 2019

CEV/VES Rebate Utilised Amount :  
-

HC Emission :  
-

PM Emission :  
-

### Fees To Be Paid For Transfer

Transfer Fees	\$25.00
Road Tax Renewal - 6 months (25 Jan 2020 to 24 Jul 2020)	\$83.00
Road Tax Renewal - 12 months (25 Jan 2020 to 24 Jan 2021)	\$165.00

### Message

The fees above do not include any late road tax fees, which apply if road tax or lay-up has expired. You can use the digital service Enquire Road Tax Payable to check if there are any late road tax fees. Any road tax that has been paid for the vehicle will be transferred to the next owner.

Print

Save as PDF

Copy as Text

OK →

DOA = 5/10/19

MV 9000

PV 3960

NV 5000

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	621B
Vehicle Details	
Vehicle No.:	FBA882S
Vehicle to be Exported:	Yes
Intended Deregistration Date:	24 Oct 2019
Vehicle Make:	HONDA
Vehicle Model:	CB400
Primary Colour:	Black <i>yellow</i>
Manufacturing Year:	2005
Engine No.:	NC23E3000356
Chassis No.:	JH2NC39965M100353
Maximum Power Output:	-
Open Market Value:	\$6,802.00
Original Registration Date:	25 Jan 2006
First Registration Date:	25 Jan 2006
Transfer Count:	6
Actual ARF Paid:	\$1,021.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	24 Jan 2026
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$6,337.00
COE Rebate Amount:	\$3,960.00
<b>Total Rebate Amount:</b>	<b>\$3,960.00</b>

The information contained herein is correct as at 24 Oct 2019

OK



(7)

Bike model

Type

Any

Price From

Any

Price To

Any

Class

Any

MORE SEARCH OPTIONS

Q SEARCH ☐ VIEW ALL (/LISTING/USEDBIKES/LISTING/)

REPORT ERROR (/LISTING/LISTING/ERROR/USEDBIKE/14258/)

+ ADD TO SHORTLIST

Share

SHARE (WHATSAPP://SEND?TEXT=HTTPS://WWW.SGBIKEMART.COM.SG/LISTING/USEDBIKE/HONDA-HONDA-CB400-SUPER-4-SPEC-3/14258/)

## Honda CB400 Super 4 Spec 3

Listing Type	Paid Ad
Brand	Honda (/listing/usedbike/brand/honda/)
Model	Honda CB400 Super 4 Spec 3 (/listing/usedbike/model/honda-cb400-super-4-spec-3/)
Engine Capacity	399cc
Classification	Class 2A (/listing/usedbike/model/motorcycle-for-sale/class/class-2a/)
Registration Date	10/10/2007
COE Expiry Date	09/10/2027 (7 years 11 months left)
Mileage	-
No. of owners	-
Type of Vehicle	Street Bikes (/listing/usedbike/model/motorcycle-for-sale/street-bikes/)

Price: SGD\$10500

## DETAILS

Well Maintain Condition. Loan Available, Welcome Trade In. Come Visit Us At Southern Motor. Blik 1006 Bukit Merah Lane 2 #01-10 S(159762). Interested Buyers Are Welcome To Negotiate.

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 Authorized 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	08/10/2019 17:38
Date Of Accident	05/10/2019 18:20
Exact Location Of Accident	ALONG TPE TO PASIR RIS BEFORE PUNGGOL WAY EXIT
Country/State of Loss	SINGAPORE

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number	FBA882S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMAD HALIF BIN HUSAIN
NRIC No	S9027621B
Email Address	ALEPEERAH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91830396
Alternative Phone No	OFFICE-91830398
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
<b>Insurance Company</b>	
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	D19MTMC01005253
Cover Note Number	
<b>Driver</b>	
Name of Driver	MOHAMAD HALIF BIN HUSAIN
NRIC No	S9027621B
Date Of Birth	31/07/1990
Occupation	INDOOR
Date Of Driving Pass	12/05/2017
Driving Experience	2 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91830396
Fax Number	
Contact Number	OFFICE-91830396
Email Address	ALEPEERAH@GMAIL.COM

Address BLK 217C SUMANG WALK #02-218  
 Postcode 823217  
 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 SIDE SWIPE  
 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 3  
 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) 2  
 Passenger 1  
 NAME: : MUNIRAH BINTE AZALI  
 GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name PUNGGOL N.P.C  
 Police Station Address ROAD: 21A TEBING LANE , POSTCODE: 828837 , 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: T/20191005/2107.

#### 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 SJL4711Z  
 Vehicle Make/Model/Colour  
 Details Of Properties VEHICLE B  
 Vehicle Category PRIVATE CAR  
 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

MOHAMAD HALIF BIN HUSAIN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBA882S

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

**DETAILS OF INJURED PERSON 2**

Name

MUNIRAH BINTE AZALI

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBA882S

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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 willful 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.

X 


Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/PIN No.:

Sketch Plan #2 Pg. 1

### SKETCH PLAN


  
 A = FBI 883S  
 B = STL 4711Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

## DECLARATION

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

Policyholder's Signature

Date &amp; Time:

CONFIDENTIAL - VS

Driver's Signature

Driver's Signature  
(If driver is not the policyholder)

Date & Time:

---

**Reporting Centre Personnel's Signature**

Name:

NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20191005/2107

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-8049999

1 of 3

Report No. T/20191005/2107

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/10/2019 19:08		Vide Report No.:	Station Diary No.: 66
<b>Informant's Particulars</b>			
Name of Informant: MOHAMAD HALIF BIN HUSAIN		Address: APT BLK 217C SUMANG WALK #02-218 SINGAPORE 823217	
ID Type / ID No.: NRIC NO / S9027621B		Contact No.: Home/Office: Mobile: 91830398	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 29	Date of Birth: 31/07/1990	Type of Informant: Vehicle Owner
Race: Malay		Language: English	Institution / School Name:
Occupation: Driving instructor/tester		Driving Licence Information: Class: 2B,2A,3,4 Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/10/2019 16:20	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 TAMPINES EXPRESSWAY PUNGGOL WAY Along TPE towards Pasir Ris before Punggol Way exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBA882S	Motorcycle	HONDA	CB400	Yellow	Slightly Damaged	1
SJL4711Z	Car	HONDA		Yellow	Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20191005/2107

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999

2 of 3

Report No. T/20191005/2107

## CONTINUATION OF REPORT

Vehicle Owner			
Name	MOHAMAD HALIF BIN HUSAIN	ID No.	S9027621B
Related Vehicle	FBA882S (Motorcycle)	Contact No.	91830396
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

**Brief Details.**

On the 5th October 2019 at about 1620hrs, I was riding my motorcycle FBA 882S along TPE towards Punggol Way when suddenly one car SJL 4711Z which was behind me, hit the rear right side of my motorcycle. My pillion was my wife name Munirah Binte Azall, S9134629Z, hp : 91830396. I managed to balance myself when the accident happened. Both vehicles stopped at the left side of the road. Me and the driver exchanged our particulars and we left subsequently. Due to the accident, my motorcycle's rear right foot rest and the exhaust pipe were damaged. My wife's right ankle was bruised. She has yet to seek medical attention.



**SINGAPORE  
POLICE FORCE**



T/20191005/2107

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049899

3 of 3

Report No. T/20191005/2107

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Staff Sgt ZAKI FAHMY RAZALI <i>[Signature]</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 05/10/2019 19:06
Officer In Charge Of Case: TP / AEIT / ✓ SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp NP188	SN 085
Signature: <i>[Signature]</i>	

Police For

### ...CLAIM SUBFOLDER...(Pending for Survey Report)

#### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Oct 2019		17 Oct 2019 13:01 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

<b>Main</b>	<b>Reference</b>	<b>Claim Details</b>	<b>Documents</b>	<a href="#">Show All</a>
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#### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	-, Co. Reg. No.: -		
Main Claimant:	<b>MOHAMAD HALIF BIN HUSAIN</b>		
Vehicle Reg. No.:	<b>FBA882S</b>	Date of Loss:	05/10/2019 16:00 - :59 [164 Months and 10 Days From LTA Reg Date (Man Yr)]
Claim Type:	<b>TP / SNM19D204710C02</b>	Policy/Cover Note No.:	DMPCSN30445119000
Vehicle Reg. No. (Insured):	<b>SJL4711Z</b>	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	<b>Motoplex Pte Ltd (HQ)</b> 10 KAKI BUKIT ROAD 2, # 01-24 FIRST EAST CENTRE, 417868 Kaki Bukit - Tel: 67476774		
Handling Insurer:	<b>China Taiping Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: 6389 6111 ... [Handled by <b>Irene Tay Hui Ping</b> - 638986192]		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>LEE HOCK ANN</b> ] ... [Final Rpt due 29/10/2019]		
Adj Asg. Remarks:	PLEASE SURVEY AND REVERT		

#### ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

#### ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)












































Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents















\*FBA882S (SNM19D204710C02)  
[SJL4711Z]  
TP  
MOHAMAD HALIF BIN HUSAIN  
Oct 5 2019 4:00PM  
[-]  
Motoplex Pte Ltd

Upload Documents | Upload Photos | Compose New Letter

View View in Browser

Photos/Images			3 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	24/10/19 17:19	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
2	24/10/19 17:19	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
3	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
4	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
5	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
6	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
7	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
8	24/10/19 17:20	General View	 Load JPG	<input checked="" type="checkbox"/>
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33	24/10/19 17:21	General View	 Load JPG	<input checked="" type="checkbox"/>
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39	24/10/19 17:21	General View	 Load JPG	<input checked="" type="checkbox"/>
40	24/10/19 17:21	General View	 Load JPG	<input checked="" type="checkbox"/>
41	24/10/19 17:21	General View	 Load JPG	<input checked="" type="checkbox"/>
42	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
43	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>



Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
44	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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46	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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59	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
60	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
61	24/10/19 17:21	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
62	24/10/19 17:22	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/CTI19018334/HQF3E2

Date: 13/11/2019

## REFERENCE

Handling Insurer: China Taiping Insurance  
(Singapore) Pte. Ltd.

Policy No: DMPCSN30445119000

Claimant  
Vehicle No : FBA882SInsured  
Vehicle No : SJL4711Z

Date of Loss: 05/10/2019

Nature of Claim: TP

Claim  
No: SNM19D204710C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: FBA882S

Make &amp; Model: HONDA CB400, 399cc

Engine No: NC23E3000356

Reg. Date: 25/01/2006 (Man. Year: 2005)

Chassis No: JH2NC39965M100353

Colour: Yellow

Odometer: 38892 km

Engine Capacity: 399 cc

Market Value/New Car

N/A

Price:

Sum Insured (S\$): Market Value/New Car Price

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes  
Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

## CONDITION OF TYRES

Front Tyre Size: 120/60Z R17

Rear Tyre Size: 160/60Z R17

Front Left Side: Bridgestone 5 mm

Rear Left Side: Bridgestone 5 mm

Front Right Side: 0 mm

Rear Right Side: 0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment: 17/10/2019

Date Inspected: 17/10/2019 Inspected At:

Motoplex Pte Ltd (HQ)  
10 KAKI BUKIT ROAD 2, # 01-24  
FIRST EAST CENTRE  
Singapore 417868

Estimated Period of Repair: 2.0 days

Adjuster: LEE HOCK ANN

Manager: SHIAU CHAN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.  
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$1,500.00 - \$2,000.00

## REPAIR DETAILS

<b>Reference</b>		
<b>Part Source:</b>	(Last Synchronised: 13 Nov 2019)	
<b>Parts:</b>	N/A	HONDA CB400 399cc (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for FBA882S)	
<b>Validity:</b>	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

## Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >