

10/11/19

ASS. REC. BY:

REF: ES/FCI19020642/T1td3

Special Instruction:

Signature: Michael
CWS

ASSIGNMENT (Office)

From (Person): Jason Tea

of FFI

Date/Time: 4:55pm 20/11/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: FBE 5961T

Insured: SHC 39782

at Workshop m/s Pang Scooter

Tel: 6271 4618

of Blk 1006 Bukit Merah lane 2 #01-06

Policy No:

Claim No: D19007273MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 14/11/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS up

H.O.D. Endorsement:

Date/Time: 9:52am 21/11/19

Person Contacted: Michael

Vehicle IN / OUT

Date/Time	Action/Instruction	Initials
	FBE 5961T - NBA / MSU19020642/y	DJA: 14/11/2019
	SHC 39782 - NBA / MSU19020642/y	DJA: 14/11/2019
22/11 - 5:03pm	revised via preli advise email	

ASS. REG. BY:

REF:

FCI
ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop no/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:

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.

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading:

Eng/No:

C/No:

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:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

Rear

R/Bal.

L/Bal.

D.O.I.

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

1)

Date/Time, File Return to?

2)

Rep. Form:

Emp. Comp / P.P. 3/1/11

Days Of Repair:

Resurvey No. of Trip:

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

Survey Fee:

Transportation:

\$ + RS. \$

Phone

Other

TOTAL

MOTOR SURVEY ASSIGNMENT

Date	18-11-2019	Our Ref No. D19007273MFSH
Accident Date	14-11-2019	Claim Type. Third Party
Insured Vehicle	SHC3978Z	Third Party Vehicle. FBE5961T
Survey Location	BLK 1006 BUKIT MERAH LANE 2 #01-06	
Contact Person.	MICHAEL LIM	
Contact No.	6271 4618/ 0	Fax No. 6273 2632
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	PANG SCOOTER SERVICE	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JASON TEA CHEE KIAT	

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.

Denise Tay (LKKAuto)

From: Denise Tay (LKKAuto)
Sent: Friday, 22 November 2019 5:03 PM
To: Admin-D (LKKAuto); 'CWS Motor Claims'; assignments
Cc: 'Jason Tea'; SUR
Subject: RE: SURVEY ASSESSMENT - D19007273MFSH/1
Attachments: PRELI ADVISED OF FBE 5961T.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle FBE 5961T
Number of days (estimated) : 4 days

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Thursday, 21 November 2019 9:56 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Jason Tea' <JasonTea@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19007273MFSH/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, 20 November 2019 4:55 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Jason Tea <JasonTea@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19007273MFSH/1



Auto
Consultants
Pte Ltd

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

Your Ref: D19007273MFSH

Date: 22/11/2019

Our Ref: CS/FCI19020642/T1td3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. FBE 5961T

Please be informed that we had conducted the inspection of the abovementioned vehicle 21/11/2019 at the premises of M/s Pang Scooter have the following to report: -

Workshop Estimate Amount	: S\$ <u>3,930.00</u>
Revised Estimate Amount	: S\$ <u>2,115.00</u>
"Check" Items Amount	: S\$ <u>1,360.00</u>
Market Value	: S\$ _____
LTA Reimbursement Value	: S\$ _____
Nett Value	: S\$ _____

Description of Damage:

The vehicle sustained damages at the front portion.



Comments/ Present Status:

Damages Consistent.

Yours faithfully

Taufikh

Automotive Assessor



Auto
Consultants
Pte Ltd

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

Your Ref: D19007273MFSH

Date: 22/11/2019

Our Ref: CS/FCI19020642/T1td3

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Damages Consistent.

Yours faithfully

Taufikh

Automotive Assessor

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 914A

Vehicle Details

Vehicle No.: FBE5961T

Vehicle to be Exported: No

Intended Deregistration Date: 21 Nov 2019

Vehicle Make: YAMAHA

Vehicle Model: RXZ

Primary Colour: Red

Manufacturing Year: 2010

Engine No.: 5PV032114

Chassis No.: PMY5PV100A0032114

Maximum Power Output: -

Open Market Value: \$2,420.00

Original Registration Date: 21 Jun 2010

First Registration Date: 21 Jun 2010

Transfer Count: 5

Actual ARF Paid: \$363.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 20 Jun 2020

COE Category: D - Motorcycle

COE Period(Years): 10

QP Paid: \$1,452.00

COE Rebate Amount: \$107.00

Total Rebate Amount: \$107.00

The information contained herein is correct as at 21 Nov 2019

OK

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	18/11/2019 10:19
Date Of Accident	14/11/2019 19:10
Exact Location Of Accident	ALONG MUHAMMAD SULTAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	F8E5961T
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD QUFIANDY BIN MD SUAMI
Co Reg No	- 3914A
Email Address	TWOHERO1SOULS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87670759
Alternative Phone No	OFFICE-87670759
Vehicle Particulars	
Manufacturer	YAMAHA
Model	RXZ135-133CC (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72172070/E01
Driver	
Name of Driver	MOHAMMAD NAZRI BIN ABUTALIB
NRIC No	S9015775B
Date Of Birth	11/05/1990
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87670759
Fax Number	
Contact Number	OTHERS-87670759
Email Address	TWOHERO1SOULS@GMAIL.COM

Address BLK 48 LOWER DELTA ROAD
#07-19

Postcode 160048

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured FRIEND

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - OPENING DOOR OF VEHICLE

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 TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20191118/2131

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 SHC3976Z

Vehicle Make/Model/Colour HYUNDAI

Details Of Properties

Vehicle Category TAXI

Name of Driver LIM MENG CHONG

NRIC/Passport Number S1203940I

Contact Number 97682579

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLM7587S

Vehicle Make/Model/Colour

HONDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

MUHAMMAD JAMIL BIN HAMDAN

NRIC/Passport Number

S7622039E

Contact Number

96819375

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

MOHAMMAD NAZRI BIN ABUTALIB

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBE5961T

Were seat belts worn?

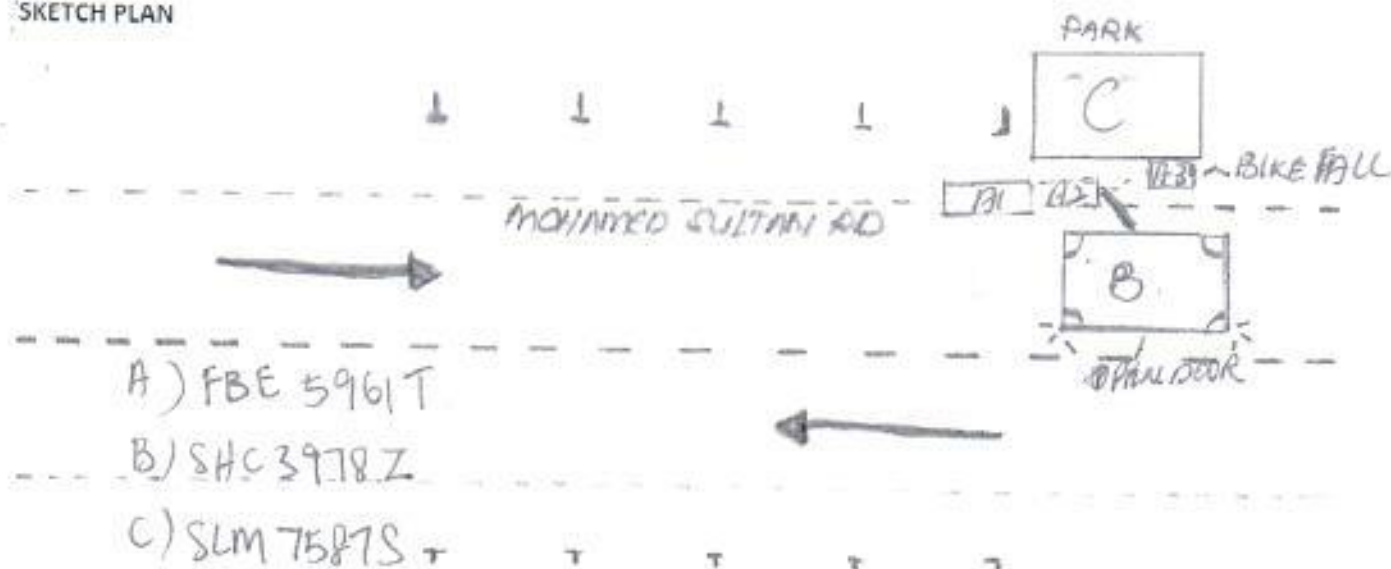
Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

(@) 1910 HRS, I WAS RIDING ALONG MOHAMMED SULTAN ROAD WHERE THE ACCIDENT TOOK PLACE. IT WAS ONLY A 2 LANE ROAD, THE EXTREME LEFT LANE WAS OCCUPIED BY THE VALET SERVICE COMPANY. I WAS MOVING ALONG AND THERE'S A TAXI ON MY RIGHT SIDE ALSO MOVING ALONG WITH ITS RIGHT SIGNAL LIGHT ON. I DID NOT KNOW THAT THE TAXI WAS ALIGHTING ITS PASSENGER, CAUSE HE (TAXI) WAS ON THE SECOND LANE OF THE ROAD.

AS I WAS MOVING ALONG, SUDDENLY PASSENGER DOOR OF THE TAXI (DOOR LEFT SIDE OF VEHICLE) OPENED, WITH SUDDENLY AND HIT ON ME. I FELL OFF MY BIKE, AND MY BIKE MOVE FORWARD AND HIT A STATIONARY PARKED VEHICLE SLM 7587Z, ON ITS RIGHT DOOR DRIVER SEAT. THE CAR WAS OWNED BY THE VALET SERVICE COMPANY. THEY'RE ALSO WITNESSING REGARDING THE TAXI OF STOPPING ON SECOND LANE WITHOUT ANY HAZEL LIGHT ON.

TAXI NO DAMAGE.

DAMAGES ON MY BIKE, AND ABIT, SCRATCHES ON ANOTHER CAR.

POLICE REPORT 7/2019/118/2131

DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time: 15/11/2019

1557 HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

[Signature] 18/11/2019

[Signature]



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

Report No. T/20191118/2131

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/11/2019 16:04	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: MOHAMMAD NAZRI BIN ABUTALIB			Address: APT BLK 48 LOWER DELTA ROAD #07-19 THE BEO CRESCENT SINGAPORE 160048		
ID Type / ID No.: NRIC NO / S9015775B			Contact No.: Home/Office: Mobile: 87670759		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 11/05/1990	Type of Informant: Rider		
Race:			Language:		Institution / School Name:
Occupation: Motorcycle delivery man			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/11/2019 19:10	Type of Location:
Location: Along Road 1 Traveling Toward Road 2 MOHAMED SULTAN ROAD RODYK STREET ALONG MOHAMED SULTAN ROAD TWDS RODYK STREET				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE5961T	Motorcycle				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE5961T	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72172070/E01	14/10/2019	17/04/2020



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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMMAD NAZRI BIN ABUTALIB	ID No.	S9015775B
Related Vehicle	FBE5961T (Motorcycle)	Contact No.	87670759
Hospital/Clinic	SHALOM CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	15/11/2019	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION

I WAS TRAVELLING ALONG MOHAMED SULTAN ROAD ON THE SECOND LANE, THERE WAS A TAXI INFRONT OF ME. I WAS MOVING ALONG BEHIND IT THEN SUDDENLY THE TAXI STOPPED WITHOUT ANY SIGNAL LIGHTS AND I SWERVED TO THE LEFT. THE DOOR ON THE LEFT OF THE TAXI SUDDENLY SWING OPEN, I QUICKLY SWERVE MY BIKE AGAIN TO PREVENT MY BIKE FROM HITTING IT THEREFORE THE DOOR HIT THE SIDE OF MY BODY AND I FELL OFF THE BIKE. NO ONE WAS INJURED.



**SINGAPORE
POLICE FORCE**



T/20191118/2131

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

3 of 3

Report No. T/20191118/2131

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:

TP /

MUHAMMAD MOINUR RAHMAN.

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

18/11/2019 16:04

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:



**SINGAPORE
POLICE FORCE**

Authentication Stamp

NP168

SIGNATURE

PANG SCOOTER SERVICE

Bik 1006 Bukit Merah Lane 2 #01-06 Singapore 159762

Tel : 6271 4618 Fax : 6273 2632

ESTIMATE REPAIR

BIKE NO.: FBE 5961T

DATE ACCIDENT : 14.11.2019

MAKE / MODEL : YAMAHA/RXZ-135

S/No	DESCRIPTION	AMOUNT
1	HEAD LIGHT ASSY	\$ 195.00
2	COWLING STAY	\$ 110.00
3	TOP COWLING	\$ 185.00
4	METER ASSY	\$ 680.00
5	LEFT HAND HANDLE BAR	\$ 145.00
6	LEFT HAND SIGNAL LIGHT	\$ 45.00
7	LEFT HAND FOOT REST BRACKET	\$ 185.00
8	SIDE STAND	\$ 95.00
9	MAIN STAND	\$ 165.00
10	TAIL BOX	\$ 195.00
11	STEERING CON (1 SET)	\$ 110.00
12	UNDER BRACKET	\$ 195.00
13	FRONT BRAKE DISC	\$ 185.00
14	FRONT WHEEL RIM	\$ 380.00
15	FORK INNER TUBE x2	\$ 350.00
16	FORK OIL SEAL x2	\$ 50.00
17	FORK OIL	\$ 80.00
	SUB-TOTAL	\$ 3,350.00
	TRANSPORT	\$ 80.00
	LABOUR	\$ 250.00
	Total	\$ 3,930.00


 Tan Jie 93495344
 24/11/19 1150 pm
 Lohpssm
 Repairing after repair
 suv@khantow.com
 4 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:

70/90 R18
 80/80 R18
 Dunlop