

Survivors

REF: CSI/ASM 20101770/R1 v1352

Special Instruction:

Part By Part: \$14382.50

Third Parties:

Claimant:

Surveyor: Absolute Appraisal Services

Workshop: Race Works

From (Person): Wong Wai Fu of ASM (AXA) Date/Time: 3-2-2020
 Estimated Cost: _____ Bill to: _____

OE TP Re-inspection: EvaluationTo Inspect Vehicle No: FN 3939CInsured: SHC 5721Jat Workshop m/s Race marksTel: 6732203of Bik 1008 Bukit Merah Lane 3 # 01-26

Policy No:

Claim No: 59M01PM8

Sum Insured:

Excess:

Make of Veh:

D.O.A. 4. June . 2019

(Client's Record)

H.O.D. Endorsement/Date:

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

Date/Time: _____ Confirmed with _____ Final Fig _____, days (Red \$ _____ / %; Original 6 days)Date/Time: 21/2/20 Submit Final Fig \$6199, 5 days (Red \$ 8183.50 57%; Original _____ days)

Date/Time	Action/Instruction
	FN 3939C - NA/INC 190 211/14 D.O.A - 04/06/2019
	SHC 5721J - NA/INC 190 10111/12 D.O.A - 04/06/2019

check mv and parts

Rasul,

Pls check repair limit.

Note mv: \$10,000 (Est) LTA: \$3939 NV: \$6061

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

RECEIVED 21 FEB 2020

Para(3) : Nett Value

Market Value : _____

Salvage Value : _____

Nett Value

Inspected/
Evaluated by:

Fee Charged:

Date:

Basic & Add
Transport
Photos
Others
Total

1) Date/Time 21/2 - typist (SMART Claim) File Pass to _____

2) Date/Time _____

File Return to _____

3) Date/Time _____ File Pass to _____

4) Date/Time _____

File Return to _____

5) Date/Time _____ File Pass to _____

6) Date/Time _____

File Return to _____




Service Request Details

Claim

S9M01PM8

Reference

None 

Loss Date

June 4, 2019

Report Date

Jun 6, 2019 10:49:00 AM

Request Date

February 3, 2020

Due Date

February 10, 2020

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Incident Only

Services

Re-inspection

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

FN3939C

Model

BIKE

Service Address

51 Ubi Avenue 1, #01-25, , 408933

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD

No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

WONG Wee Fu

6568804888

weefu.wong@axa.com.sg

Additional Instructions

3

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

[New Message](#)



paper RI

Type

 Information

Message

bike is 23years old. check for MV and parts

Reply

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	08/06/2019 14:45
Date Of Accident	04/06/2019 07:05
Exact Location Of Accident	JUNC OF BISHAN RD / BISHAN ST 22 AND BISHAN 1 & 14
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FN3939C
Insured/Policyholder	
Name Of Registered Owner	SEBASTIAN LI JUN NAN
NRIC No	S8946498F
Email Address	LI.SEBASTIAN@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96193060
Alternative Phone No	OTHERS-96193060

Vehicle Particulars

Manufacturer	HONDA
Model	NSR250R2R
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5051143086-07
Cover Note Number	

Driver

Name of Driver	SEBASTIAN LI JUN NAN
NRIC No	S8946498F
Date Of Birth	11/12/1989
Occupation	INDOOR
Date Of Driving Pass	16/07/2009
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96193060
Fax Number	
Contact Number	OTHERS-96193060
Email Address	LI.SEBASTIAN@HOTMAIL.COM

Address	BLK 419 ANG MO KIO AVENUE 10 #09-1077
Postcode	560419
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	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

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	SHC5721J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM KUAN CHONG
NRIC/Passport Number	S0156992I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	SEBASTIAN LI JUN NAN
------	----------------------

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

FN3939C

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 7 Jun 2019 1730

Driver's Signature

(If driver is not the policyholder)

Date & Time: 7 Jun 2019 1730

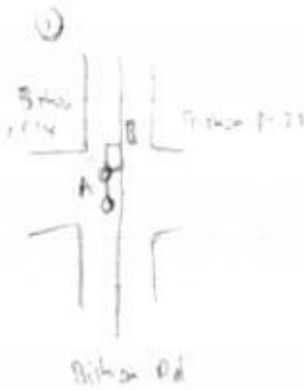
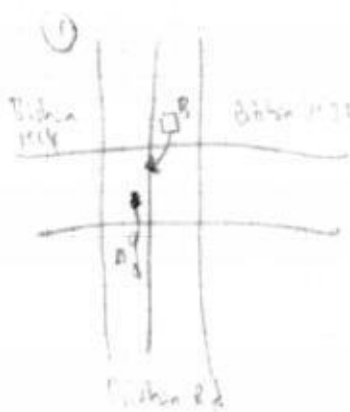
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

Sketch Plan #2

SKETCH PLAN



A - FN3934C
B - SHCS721J

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling straight along Bithan Road towards Lorne Road on lane 1. I slowed down while approaching the traffic light junction. A red taxi cab was in lane 1 opposite on the opposite side of traffic. The lights were green in my favour as we had reached the junction, he sped up to attempt a u-turn but stopped while blocking lane 1 in my direction. I tried to pull into lane 2 to avoid hitting him but was unable to do so in time. At the left side of the cab and lost consciousness for a few seconds. I regained consciousness after and looked to the side of the road. I noticed that my motorcycle had skidded to the side of the road. I noticed the taxi driver had since moved his vehicle to the side of the road before any photos could be taken of the incident.

DECLARATION

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

Policyholder's Signature
Date & Time: 2 Jun 2019 1930

Driver's Signature
(If driver is not the policyholder)
Date & Time: 2 Jun 2019 1930

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

2-8/6/2019

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





**SINGAPORE
POLICE FORCE**



E/20190604/7016

1 of 2

POLICE REPORT (NP299)

Report No. E/20190604/7016

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 04/06/2019 16:30	Vide Report No.	Station Diary No.
Name Of Informant SEBASTIAN LI JUN NAN	Address APT BLK 419 ANG MO KIO AVENUE 10 #09-1077 SINGAPORE 560419	
ID Type / ID No. NRIC NO / S8946498F	Contact No. Home/Office: Mobile: 96193060	
Nationality SINGAPORE CITIZEN	Email Address li.sebastian@hotmail.com	
Occupation Software Engineer	Sex Male	Age 29
Institution/School Name	Date of Birth 11/12/1989	Race Chinese
	Language English	
Date/Time Of Incident 04/06/2019 07:00 - 04/06/2019 07:15	Location Of Incident BISHAN STREET 22	

Brief details.

I was travelling straight along Bishan road towards Lornie road on lane 1. I slowed down while approaching the traffic light junction. A red Trans-cab taxi was in lane 1 on the opposite side of traffic. The lights were green in my favour. As he was reaching the turning pocket, he sped up to attempt a u-turn but stopped while blocking lane 1 (in my direction). I tried to filter into lane 2 to avoid hitting him but was unable to do so in time. I hit the left side of the cab and lost consciousness for a few seconds. I regained consciousness and hobbled to the side of the road. I noticed that my motorcycle had skidded to the side of the road. I noticed that the taxi driver had since moved his vehicle to the side of the road

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 04/06/2019 16:30
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



E/20190604/7016

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20190604/7016

before any photos could be taken of the incident. We exchanged driver's particulars as required and I was conveyed to hospital by ambulance.

Subjects Involved			
Suspect			
Person Name	Lim Kuan Chong		
ID Type	NRIC NO	ID No	S0156992I
Gender	Male	Age	70-70
Race	Chinese	Language	Chinese
Occupation	Taxi driver	Relation To Informant	none
Victim			
Person Name	SEBASTIAN LI JUN NAN		
ID Type	NRIC NO	ID No	S8946498F
Gender	Male	Age	29
Race	Chinese	Language	English
Occupation	Software Engineer	Address Type	
Address	APT BLK 419 ANG MO KIO AVENUE 10 #09-1077 SINGAPORE 560419		Mobile No
Is Informant A Victim?	Yes		
Person Name	SEBASTIAN LI JUN NAN (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:

04/06/2019 16:30

Classification Of Case:

Authentication Stamp

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	498F
Vehicle Details	
Vehicle No.:	FN3939C
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Feb 2020
Vehicle Make:	HONDA
Vehicle Model:	NSR250R2R
Primary Colour:	White
Secondary Colour:	Blue
Manufacturing Year:	1995
Engine No.:	MC16E1305605
Chassis No.:	MC281005539
Maximum Power Output:	-
Open Market Value:	\$7,865.00
Original Registration Date:	18 Mar 1996
First Registration Date:	18 Mar 1996
Transfer Count:	6
Actual ARF Paid:	\$1,180.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	28 Feb 2026
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$6,486.00
COE Rebate Amount:	\$3,939.00
Total Rebate Amount:	\$3,939.00
Message	
Please note that the National Environment Agency (NEA) is offering an incentive for the owner of this motorcycle to deregister the motorcycle on or before 5 April 2023.	
This motorcycle is currently eligible for an incentive of \$3,500 from NEA. If the COE is renewed from now till its deregistration on or before 5 April 2023, the incentive will be reduced to \$2,000. The last registered owner of this motorcycle will receive the incentive from NEA.	
This motorcycle will no longer be allowed for use on Singapore's roads after 30 June 2028.	
For more information, please visit http://www.nea.gov.sg/mtcincentive or contact NEA at 1800-2255-632.	

The information contained herein is correct as at 03 Feb 2020

OK

10 000
3939

6061

Repair Int
6k



Enquire Vehicle Information

Enquire Vehicle Information

Vehicle No.	FN3939C		
Vehicle No. :	FN3939C		
Vehicle Details			
Vehicle Type :	Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Make / Model :	HONDA / NSR250R2R		
Primary Colour :	White		
Secondary Colour :	Blue		
Year of Manufacture :	1995		
Maximum Laden Weight :	0 kg		
Unladen Weight :	0 kg		
No. Of Axles :	0		
Engine No. :	MC16E1305605		
Chassis No. :	MC281005539		
Engine Capacity :	249 cc		
Maximum Power Output :	-		
IU Label No. :	715248705		
Propellant :	Petrol		
Passenger Capacity :	1		
Original Registration Date :	18 Mar 1996		
First Registration Date :	18 Mar 1996		
Open Market Value :	\$7,865.00		
Additional Registration Fee Rate :	15.00 %		
Actual ARF Paid :	\$1,180.00		
PARF Eligibility :	No		
Minimum PARF Benefit :	-		
COE No. :	1996040106000153E		
COE Category :	D - Motorcycle		
COE Expiry Date :	28 Feb 2026 ✓		
Lifespan Expiry Date :	30 Jun 2028		
Quota Premium (QP) :	\$1,758.00		
PQP Paid :	\$6,486.00		
OPC Cash Rebate Eligibility :	No		
QP during COE Bidding Exercise :	\$1,758.00		
CO2 Emission:	-		
CO Emission:	-		
HC Emission:	-		
NOx Emission:	-		
PM Emission:	-		
GIRO Account Details			
GIRO Account No.Ⓢ	GIRO Bank NameⓈ	GIRO Branch NameⓈ	Payment ItemⓈ
1 1201718670	DBS Bank Ltd/POSB	iBanking	Road Tax Renewal

[Previous](#)[OK](#)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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	04/06/2019 08:55
Date Of Accident	04/06/2019 07:05
Exact Location Of Accident	BISHAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC5721J
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666

Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	

Driver

Name of Driver	LIM KUAN CHONG
NRIC No	S0156992I
Date Of Birth	25/06/1949
Occupation	OUTDOOR
Date Of Driving Pass	31/08/1972
Driving Experience	46 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97594452
Fax Number	
Contact Number	
EMail Address	NOEMAIL