





# 中国私人有限公司 CHOONG KOK AGENCY PTE LTD

Co Reg No : 198502667H  
www.cka.com.sg  
admin@cka.com.sg

Steve (LKK) ML AL  
83228813 10/6/20, 11.30 am  
3 d/s  
L/S  
AL M

MAIN SHOWROOM No. 79 Kaki Bukit Ave 1  
Shunli Industrial Park, Singapore 417352  
Tel: 6748 5455 Fax: 6748 3433

JURONG AREA Blk 343, Jurong East  
Street 31 #01-63, Singapore 600343  
Tel: 6566 6180 Fax: 6566 6606

BUKIT BATOK 50 Bukit Batok St 23  
Midview Building #01-20, Singapore 659578  
Tel: 6861 3005 Fax: 6861 3008

TOH GUAN AREA: 34 Toh Guan Road East  
#01-27, Singapore 608579  
Tel: 6316 1468 Fax: 6316 1489

4 JUNE 2020

MS FIRST CAPITAL INSURANCE LIMITED  
6 RAFFLES QUAY #21-00  
SINGAPORE 048580

ESTIMATE BILL FOR SCOMADI TL 200 FBL1878R THIRD PARTY CLAIM  
AGAINST SHC3496Y ON 6 MARCH 2020

|                                    |                 |          |
|------------------------------------|-----------------|----------|
| 1. RIGHT SIDE COVER / <i>CVT</i>   | 1PCS (Rear)     | \$180.00 |
| 2. REAR RIGHT STRIP / <i>ACE</i>   | 1PCS <i>CVT</i> | \$38.00  |
| 3. RIGHT FOOT PEDAL / <i>CVT</i>   | 1PCS            | \$80.00  |
| 4. MAIN STAND X                    | 1PCS            | \$280.00 |
| 5. SPEEDOMETER X                   | 1PCS            | \$250.00 |
| 6. DECORATION FRAME / <i>CVT</i>   | 1PCS (null)     | \$28.00  |
| 7. DECORATION STRIP / <i>CVT</i>   | 1PCS            | \$38.00  |
| 8. FRONT SHIELD / <i>CVT</i>       | 1PCS            | \$280.00 |
| 9. FRONT FORK ?                    | 1PCS            | \$250.00 |
| 10. STEERING BEARING ?             | 1PCS            | \$180.00 |
| 11. RH LEVER / <i>CVT</i>          | 1PCS            | \$180.00 |
| 12. SHAFT FRONT WHEEL / <i>CVT</i> | 1PCS            | \$68.00  |

\$ 1700.00

\$ 170.00

LESS 10%

\$1530.00

\$107.10

GST 7%

\$1422.90

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:

*Supp*  
*Labour, part & misc*

### 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 11/03/2020 12:40  
Date Of Accident 06/03/2020 08:00  
Exact Location Of Accident PIE TOWARDS LOYANG AVE  
Country/State of Loss SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number FBL1878R  
**Insured/Policyholder**  
Name Of Registered Owner MUHAMMAD RASHID BIN SENIN  
NRIC No SXXXX616A  
Email Address SOFISTIC06@GMAIL.COM  
Mobile Phone No (LOCAL) +65-88222877  
Alternative Phone No OFFICE-88222877

#### Vehicle Particulars

Manufacturer SCOMADI  
Model TL200-181CC

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

#### Insurance Company

Name of Insurance Company SOMPO INSURANCE SINGAPORE PTE. LTD.  
Type Of Coverage THIRD PARTY FIRE AND/OR THEFT  
Fleet Policy NO  
Policy Number D19MTMC01005577  
Cover Note Number

#### Driver

Name of Driver MUHAMMAD RASHID BIN SENIN  
NRIC No SXXXX616A  
Date Of Birth 30/01/1980  
Occupation OUTDOOR  
Date Of Driving Pass 30/04/2011  
Driving Experience 8 YEARS AND 10 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-88222877  
Fax Number  
Contact Number OFFICE-88222877  
EMail Address SOFISTIC06@GMAIL.COM

Address APT BLK 296 PUNGGOL CENTRAL  
#04-503  
Postcode 820296  
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 NO COLLISION  
Weather Conditions RAINING  
Road Surface WET

#### Other Information

Was any foreign vehicle involved in this accident? NO  
Number of vehicles (including own vehicle) involved in the accident 1  
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 EAST N.P.C  
Police Station Address ROAD: 3 WOODLANDS DRIVE 63, POSTCODE: 737890, COUNTRY: SINGAPORE  
Police Station Contact TEL NO: - FAX NO:  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO THE POLICE REPORT NO. T/20200306/2136 AND SKETCH PLAN FOR ACCIDENT DETAILS.

#### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Was there any audio recorded? NO

#### Details of Witness 1

Name MARTIN  
Phone Number 91505006  
Email Address

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC3496Y  
Vehicle Make/Model/Colour  
Details Of Properties  
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

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBL1878R

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

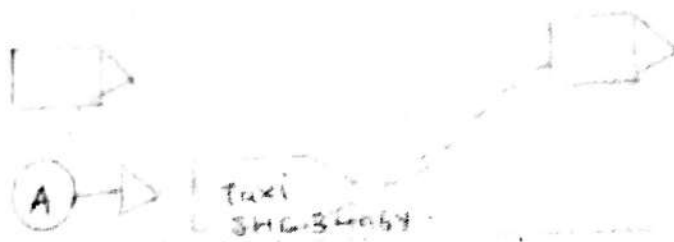
Address

Postcode

# Sketch Plan

A: F321870R

SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

IT WAS A HEAVY AND SLOW TRAFFIC I WAS RIDING ON LANE 1 WHEN  
SUDDENLY A TAXI (TAL 24467) CHANGED LANE AHEAD OF ME, WHICH MADE  
ME PANIC AND BRAKING DUE TO THE WET ROAD SURFACE I WAS  
UNABLE TO CONTROL MY MOTORCYCLE.

**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 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. 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.

Policyholder's Signature

Date & Time: 14/3/20

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



## POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20200306/2136

1 of 4

Report No. T/20200306/2136

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

## REPORT OF A TRAFFIC ACCIDENT

|   |            |                              |   |                           |                            |
|---|------------|------------------------------|---|---------------------------|----------------------------|
| Date/Time Report Made:<br>06/03/2020 19:43      |            | Vide Report No.:             |   | Station Diary No.:<br>120 |                            |
| <b>Informant's Particulars</b>                  |            |                              |   |                           |                            |
| Name of Informant:<br>MUHAMMAD RASHID BIN SENIN |            |                              | Address:<br>APT BLK 296 PUNGGOL CENTRAL #04-503 SINGAPORE<br>820296 |                           |                            |
| ID Type / ID No.:<br>NRIC NO / S8002616A        |            |                              | Contact No.:<br>Home/Office: Mobile: 86222877                       |                           |                            |
| Nationality:<br>SINGAPORE CITIZEN               |            |                              | Email:  |                           |                            |
| Sex:<br>Male                                    | Age:<br>40 | Date of Birth:<br>30/01/1980 | Type of Informant:<br>Rider   |                           |                            |
| Race:<br>Malay                                  |            |                              | Language:   |                           | Institution / School Name: |
| Occupation:<br>QUALITY & SAFETY OFFICER         |            |                              | Driving Licence Information:<br>Class: 2B,3                         |                           | Date of Expiry:            |

|   |                                 |                                    |  |                                      |
|---|---------------------------------|------------------------------------|--|--------------------------------------|
| <b>General Information of the Accident</b>            |                                 |                                    |  |                                      |
| Type of Accident:                                     | Injury<br>Conveyed By Ambulance | Drink Drive:<br>No                 | Date/Time of Accident:<br>06/03/2020 08:00 | Type of Location:<br>Straight Road   |
| Location:<br>Along Road 1<br>PASIR RIS DRIVE 12       |                                 |                                    |  |                                      |
| Weather:<br>Drizzling                                 |                                 | Road Surface:<br>Wet               |  | Road Speed Limit:                    |
| Traffic Flow:<br>One Way                              |                                 | Traffic Control:<br>Not Controlled |  | Traffic Volume:<br>Heavy             |
| Type of Collision:<br>Moving Vehicle Against - Others |                                 |                                    |  | Anyone conveyed by ambulance:<br>Yes |

| <b>Details of Vehicle Involved</b> |            |         |       |       |           |                  |
|------------------------------------|------------|---------|-------|-------|-----------|------------------|
| Vehicle No.                        | Type       | Make    | Model | Color | Condition | No. of Passenger |
| FBL1878R                           | Motorcycle | SCOMADI | TL200 | Grey  |           | 0                |
| SHC3496Y                           | Car        |         |       |       |           | 0                |

| <b>Details of Vehicle Insurance</b> |                                    |                     |            |             |  |
|-------------------------------------|------------------------------------|---------------------|------------|-------------|--|
| Vehicle No.                         | Insurance Company                  | Insurance No        | Effective  | Expiry Date |  |
| FBL1878R                            | TENET SOMPO INSURANCE PTE.<br>LTD. | D19MTMC0100557<br>7 | 10/07/2019 | 09/07/2020  |  |





**SINGAPORE  
POLICE FORCE**



T/20200306/2136

2 of 4

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

Report No. T/20200306/2136

## CONTINUATION OF REPORT

|                                   |                           |  |                                    |
|-----------------------------------|---------------------------|--|------------------------------------|
| <b>Details of Person Involved</b> |                           |  |                                    |
| Any Pedestrian Involved: No       |                           |  |                                    |
| No. of Pedestrians Injured: NIL   |                           | Use of Pedestrian Crossing: NA         |                                    |
| <b>Rider</b>                      |                           |  |                                    |
| Name                              | MUHAMMAD RASHID BIN SENIN | ID No.                                 | S8002616A                          |
| Related Vehicle                   | FBL1878R (Motorcycle)     | Contact No.                            | 88222877                           |
| Hospital/Clinic                   | CHANGI GENERAL HOSPITAL   | Class of Driving Licence & Expiry Date | Class: 2B,3<br>Date of Expiry: NIL |
| Date Treatment                    | 06/03/2020                | Date Discharge                         | 06/03/2020                         |
| No. of Days granted Medical Leave | 04                        | Degree of Injury                       | Slight                             |
| <b>Witness</b>                    |                           |  |                                    |
| Name                              | Unknown Witness           | ID No.                                 | NIL                                |
| Related Vehicle                   | NIL                       | Contact No.                            | 93824983                           |
| Hospital/Clinic                   | NIL                       | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL  |
| Date Treatment                    | NIL                       | Date Discharge                         | NIL                                |
| No. of Days granted Medical Leave | NIL                       | Degree of Injury                       | NIL                                |
| <b>Witness</b>                    |                           |  |                                    |
| Name                              | Martin                    | ID No.                                 | NIL                                |
| Related Vehicle                   | NIL                       | Contact No.                            | 91505006                           |
| Hospital/Clinic                   | NIL                       | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL  |
| Date Treatment                    | NIL                       | Date Discharge                         | NIL                                |
| No. of Days granted Medical Leave | NIL                       | Degree of Injury                       | NIL                                |

**Brief Details.**

On 06/03/2020 at about 0800hrs plus, I was riding on my motorcycle (FBL1878R) along the first lane of Pasir Ris Drive 12.

While riding, one taxi (SHC3496Y) was driving on the second lane.

Subsequently, the taxi changed lane to my lane. The taxi only signaled right while changing lane halfway. As the taxi suddenly changed lane, I jammed brake and skidded as a result. After I skidded, I fell from my motorcycle.



Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, 18th Floor, Singapore Land Tower, Singapore 048624  
 Tel: 6466 6555, Fax: 6466 1502, E-mail: sompo@sompo.com.sg  
 Co. Reg. No. 199604500N, UIC Reg. No. MUC000000000000000000

## Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Cert No./Policy No. : D19MTMC01005577  
 Insured : MUHAMMAD RASHID BIN SENIN  
 Motor Vehicle (Regn No.) : FBL1878R  
 Cover : Third Party, Fire & Theft  
 Policy Commencement Date : 10 JULY 2019 00:00  
 Policy Expiry Date : 09 JULY 2020 23:59  
 Maximum Liability (Section I) : Market value at time of loss  
 Excess\* : \$300 - Section I  
 Named Driver 1 : MUHAMMAD RASHID BIN SENIN  
 HIRE PURCHASE OWNER : CHOONG KOK AGENCY PTE LTD

\* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive\*  
 MUHAMMAD RASHID BIN SENIN

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

## Limitation: As To Use

Use only for social, domestic and pleasure purposes and  
 (a) by the insured in person in connection with his business or profession or  
 (b) in connection with the insured's business or profession

The Policy does not cover:

- (i) Use for hire or reward
- (ii) Use for racing, pacemaking, reliability trials or speed testing
- (iii) Use for the carriage of goods (other than samples) in connection with any trade or business
- (iv) Use for any purpose in connection with the Motor Trade

## Accident Reporting

It is a condition precedent to liability that the insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereafter.

For list of Accident Reporting Centres, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6461 6555.

We hereby confirm the Policy to comply with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Rules (Third Party Risks and Compensation) Rules, 1960 and the policy conditions and regulations of the Motorcycle Policy (Ref: MCY-MTMC 72).

Sompo Insurance Singapore Pte. Ltd.

Authorized Signatory

Date/Time of Issue : 09 JULY 2019 17:04

## IMPORTANT NOTICE

- Keep the Certificate in your Motor Vehicle.
- Under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act.
- On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 1107901 & ENSUPE PTE LTD (MOTORCYCLE) CI Code: MY3\_LD0324R4JMMW2AJ