ASS, REC. BY: Marcus REF: CS/E	G1200A683/Uyf3
	IGNMENT
From: Date:	Veh No: FBP 83570 Yr Regn: 6/19
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP))WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: FB2 £857 D	Make: Horla Supra GTR c.c 149
at Workshop m/s Enofice	Colour Gry A/C: Insured / Std / NI / NA
of	Sp.Reading 14602 T/Radio: Insured / Std / NI / NA
Insured: XC 4829 R	Eng/No:
Policy No.	C/No: MHIKB2119KK095701
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Ingradr / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /SIRm / STD A/Rim or
	Tyre Size: F: 90 - 80 - 17
(Policy Condition)	R: 120-70-17
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 IRC
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. mm L/Bal. mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 6/9/20 D.O.I. 10/9/20
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS 2634	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	for ols, 115 504
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
23/9/20 2/5 \$ 1/00 confirms wh	mR Teo (red \$3420.50, 75%)
	Days Of Repair: 3 Resurvey No. of Trip: 3 Survey Fee:
Date/Time, File Return to?	Transportation:
2) 23 9 20 Typist Add Fee	: Site Insp (\$)s +Rs,sı
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
(Lump Sum) I.B.I: (\$ \$1100 =)	: Weekend (\$
	V 200 to 100 to

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 08/09/2020 15:53

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 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.
- 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.

	ACCIDENT STATEMENT	
Date Of Report	08/09/2020 15:36	
Date Of Accident	06/09/2020 09:00	
Exact Location Of Accident	TEBAN GARDENS ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBP8957D	
Insured/Policyholder		
Name Of Registered Owner	SU TAO	
NRIC No	SXXXX737F	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-98475629	

OFFICE-98475629

Alternative Phone No Vehicle Particulars

Manufacturer HONDA

Model SUPRA GTR 150 MANUAL

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?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

MOTORCYCLE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

THIRD PARTY

Fleet Policy

Policy Number

5117955731 TP

Cover Note Number

Driver

Name of Driver SU TAO NRIC No SXXXX737F Date Of Birth 07/07/1971 Occupation OUTDOOR Date Of Driving Pass 18/07/2008

Driving Experience 12 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-98475629

Fax Number

Contact Number OFFICE-98475629

EMail Address NOEMAIL Address

BLK 25 #11-178 TEBAN GARDENS ROAD

Postcode

600025

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

2

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

· V

Number of vehicles (including own vehicle) involved in the accident

2

NO

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

YES

Was any other material or property damaged?

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

NANYANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7929999 - FAX NO: 67912972

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

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

XE4889R

Vehicle Make/Model/Colour

UD TRUCKS/GKB5ALDHCQA

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

WANG XIAOJUN

NRIC/Passport Number

GXXXX220N

Contact Number

81066849

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 15

No. Of Passenger (Including Driver)

	DETAILS OF INJURED PERSON 1	
Name	SU TAO	
Approximate Age	49	
Injuries Sustain		
Injured person in which vehicle?	FBP8957D	
Were seat belts worn?		
Was this injured conveyed to hospital by ambulance?	YES	
Address	BLK 25 #11-178 TEBAN GARDENS ROAD	
Postcode	600025	

Sketch Plan

SKETCH PLAN

MPORTANT NOTICE

- 1. Replie Papers correctly the details of the accident to screed up the claims process.
- I This form must be completed by the Policyholder and or the Authorised Oriver
- I information provided must be as truthful and accurate as possible. Any within mill apresentation or withholding of material ects may antwonspication companies to repudrate 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 Sox false reporting may be referred to the Police for Investigation
- 6. The report will be forwarded by the insurers of the G.A. Records Management Centre established by the General insurance Association of Sulgapore (GrA) for archiving and that indies of this report will for a fee be made available upon application by
- By the ladgment 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)
 - understand acknowledge, agree and content that
 - 1) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use distince and/or process my personal data/personal information set out in this [form] and any other personal information provided by the or postessed 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 incurer(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 purpote is:
 - (ii) processing handling and/or dealing with my claims including the settlement of the claims and any necessary missingations relating to the claims.
 - (ii) investigating the accident ane/or my claims:
 - (in certaing out and/or dealing with my instructions or responding to any enquiries by me
 - us) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me which could styping disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packagesh and/or
 - (v) complying with spalicable law in administering, processing, handling and/or dealing with my claims (collectively the "Furposet"
 - (b) all insurer(s) who have resured vehicle(s) involved in this accident and the Insurers' (a wvers/law firms, may/are dermitted to token, use, diadose and/or process my Personal Information for one or more of the above Purposes, and
 - my Paradnan information may/can be disclosed by any of the insurers and/or G.A to their third party service providers on agents (including their lawyers) (aw turns), which may be sited outside of Singapore, for one or more of the above Purposes
 - 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 an future claims
 - it e information to collected under (6) above may be shared / disclosed
 - in to all insurers and for any other third parties that assist in evaluating, investigating, controlling or managing haud equipors, raw enforcement and government agencies as reasonably required for the purposes stated, or

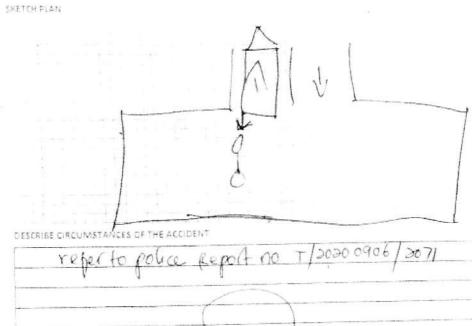
a) for complying with requirements under any regulations, laws or court orders

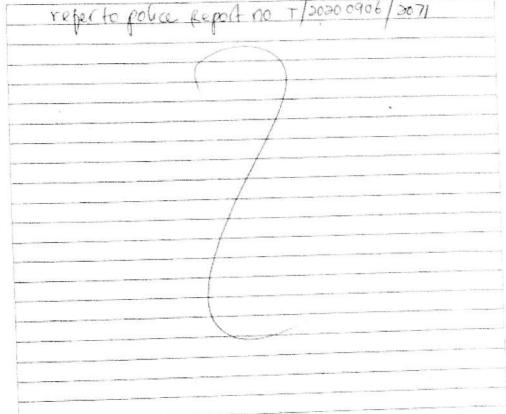
Date & Terr

IDAC KAKIBUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933

Tel: 67416697 Fax: 67492305 * cooking the street som som som som

hore NEICH NAME





DECLARATION I/We declare the foregoing particulars are :

Date & Time - 8 SEP 2028 Date & Time

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933
Singapore 415933
Singapore 415933
Singapore 415933
Singapore 415933
Singapore 415931
Singapore 415931
Singapore 415931
Singapore 415931
Singapore 415931
Singapore 415931
Singapore 415933
Singapore 415933





Report No. T/20200906/2071

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/09/2020 16:58		lade:	Vide Report No.: E/20200906/0079	Station Diary No.: 91	
Informan	t's Particu	ılars			
Name of Informant: SU TAO			Address: APT BLK 25 TEBAN GARDENS ROAD #11-178 SINGAPORE 600025		
ID Type / ID No.: NRIC NO / S7168737F		37F	Contact No.: Home/Office: Mobile: 98475629		
Nationality: CHINESE			Email:		
Sex: Age: Date of Birth: Male 49 07/07/1971			Type of Informant:		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Motorcycle delivery man		man	Driving Licence Information: Class: 2B,3,4,5	Date of Expiry:	

General Infor	mation of the Accident	基础 · · · · · · · · · · · · · · · · · · ·			
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/09/2020 09:00	Type of Location: Car Park	
Location: TEBAN GARI	DENS ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collis Between Mov	ion: ring Vehicles - Head To R	ear	i d	Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBP8957D	Motorcycle	HONDA	SUPRA GTR 150 MANUAL	Black	Slightly Damaged	0
XE4889R	Lorry				No Damage	0

Details of Vehicle Insurance			
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





04/07/2020

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

Limited

Report No. T/20200906/2

03/07/20

CONTINUATION OF REPORT

5117955731

Details of V	ehicle Insurance	Harry Control		
Vehicle No.	Insurance Company	Insurance No	Effective	Evning D

NTUC Income Insurance Co-Operative

Details of Perso	n Involved					
Any Pedestrian Ir	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	edestriar	n Cross	sing: NA
Rider						
Name	SU TAO		and the state of t	ID No		S7168737F
Related Vehicle	FBP8957D (Motorcy	FBP8957D (Motorcycle)		Conta	act No.	98475629
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date		Class: 2B,3,4,5 Date of Expiry: NIL	
Date Treatment	06/09/2020		Date Disc	-		9/2020
			Degree o			
Driver						
Name	WANG XIAOJUN	WANG xIAOjUN		ID No.		G8205220N
Related Vehicle	XE4889R (Lorry)	XE4889R (Lorry)		Conta	act No.	81066849
Hospital/Clinic	NIL		- CONSTRUCTION OF THE CONS	Class Driving Licend Expiry	ig	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	BPM-10-PA-
No. of Days grant	ted Medical Leave	NIL	Degree o		Slight	

Brief Details.

FBP8957D

On the above mentioned date, time and place, I met with a traffic accident at the carpark of Teban Gardens.

My vehicle (FBP8957D) was behind a lorry (XE1889R) which was at a gantry. The lorry driver then were out of his vehicle to tap his EZ-Link card at the gantry as it was unable to detect the Lorry's IU Unit. After that, the lorry then reversed abit because there was a hump in front of the lorry. Not knowing that I was behind the lorry, He reversed into my vehicle and caused me to fall over to my right. I then shouted for help and the vehicle stopped. The lorry driver went down to help me and call ambulance. Ambulance at TP were at scene and I was conveyed to Ng Teng Fong General Hospital. I was given 3 days MC.





3 of 3 Report No. T/20200906/207

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

	35474885 stating the report number as reference.
Signature Of Officer Recording The Report	Signature Of Informant:
Sgt 2 AL-ASYRAF BIN AZMAN	Su Zao
Signature Of Interpreter:	Date/Time:
Not applicable	06/09/2020 16:58
	· · · · · · · · · · · · · · · · · · ·
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Staff Sgt MUHAMMAD NOOR BIN ABOUL SINGAP	DOE
RAHMAN	THE COLUMN
Contact No.: 65476201	
Authentication Stamp NP168	7
V/1 07.5	
	SIGNATURE

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7168737F





SU TAO

苏

CHINESE

CHINA

Date of birth 07-07-1971 M

168737-





CHINESE

19-01-2009

APT BLK 25 TEBAN GARDENS ROAD #11-178 SINGAPORE 600025

S7168737F

06/05/2014







OU AND LICENSED TO DRIVE VEHICLES IN THE FOLLOWING BLA

Class 2B Motorcycles =< 200 cc 18 Jul 2 Section 2 Sectio

明朝 明明 明明

Mailife Westing Die ist

r Court Court State (In 1917) and the Mail Court Court Bell Bell Annels (Albert 1917). Billion of the court of the Mail Court of the Court Court Court Court of the Court of t

ROAD TRANSPORT (ANEXIMENT) ACT, ROBE (MALAYSA). Bernandarah (Malaysa)

Certificate Number 3, 5117051711

1. Index mark and Registration Number of Vehicle

Charsis Number

Name of Policyholder

3 Effective Date of this rence

4. Espay Date of Insultable

5 Persons or Classes of Persons ontitled to drive #

(a) Named Original Doly.
Provided that the period driving is permitted in accordance with the Horning to Other laws or regulation of the Motor Vehicle or has been so permitted and is not disqualified by under of a Court of Line or by realist of ally enactment or regulation in that behalf from driving the Motor Vehicle.

MILLERYLLINKERISTOL

TU YAO,

(M Hil 20/0

03 nd 2021

6 timitations as to Used

(a). Use for social distrectic and pleasure purposes and in connection with the Policyholder's business of profession.

(b): Policy down not cover.

(a) the for hire by reward.

(b) the forracing pace making, reliability trial or speed testing.

(i) the for the carriage of goods (other than samples) in connection with any frade or husiness

(d) the for any purpose in consection with the Motor Trade

Timetations rendered ineperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act. (Chapter 189) and Section 95 of the Rhad Transport Act. 1987 (Molaysia), are not to be included under these headings.

(ACISS (SECTION 1)	N/A
CXCESS (SECTION 2)	N.A
INSURF WHITE OF	: N/A
NAMED DRIVER (3)	SUTAIT
MANUE DRIVER (2)	N; A
HIPL CURCLASS COMPANY	10/A
SURFINSURIE	N A

4/We hereby Cortily that the Policy to which this continues relates is expending a continue with the provisions of the Motor Vehicles (There Policy Reds) and Compensation) Act (Chapter 1983) and Part IV of the Board Hattippert Act, 1987 (Malaysia).

Agrees

 $A \sim 1.14 cm (N.P.11.4.1D) \left(p(p(n) e^{p_1/2}) (11.1) \right)$

Pate of Issue

24 hon 2020 1353 hrs

For ISTUCINCOME INSURANCE CO DELEATIVE LIMITED

A CONSTRUCTION OF THE SECOND O

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	737F
Vehicle No.:	FBP8957D
Vehicle to be Exported:	No
Intended Deregistration Date:	15 Sep 2020
Vehicle Make:	HONDA
Vehicle Model:	SUPRA GTR 150 MANUAL
Primary Colour:	Black
Manufacturing Year:	2019
Engine No.:	KB21E1091692
Chassis No.:	MH1KB2119KK095701
Maximum Power Output:	*
Open Market Value:	\$1,993.00
Original Registration Date:	27 Jun 2019
First Registration Date:	27 Jun 2019
Transfer Count:	1
Actual ARF Paid:	\$299.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	*
PARF Rebate Amount:	\$0.00
COE Expiry Date:	26 Jun 2029
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$3,000.00
COE Rebate Amount:	\$2,634.00
Total Rebate Amount:	\$2,634.00
e information contained herein is correct as at 08 Sep 2020	Mr. Alleria Charles

ОК

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel: 67527740 Fax: 67528669 Co. Reg No. 201202259N

FRGO

Name

: Su Tao

Accident Date:

06-Sep-20

Vehicle No: FBP8957D

Honda Supra Vehicle Model: GTR150

Manual

Estimated Repair Costs

- 01	Estimated Repair Costs		- C (A)	
<u>Qty</u>	Description	Am	Amount S(\$)	
	<u>List Items</u>			
1	Handle bar	Sus	88.00 X	
1	Handle bar end - RATI 1/5	5 (1.5	32.00	
1	Handle bar inner bracket	11 \$	68.00 ×	
1	Side mirror - REH N () \$2.00	scas	120.00	
1	Clutch lever	511\$	70.00	
1	Fairing assy (1 set)	1 \$	550.00 🗸	
1	Front footrest bracket	118	65.00 X	
1	Front footrest - L/H	9>\$	50.00	
1	Gear pedal	11 \$	42.00	
1	Rear footrest - L/H	11 \$	40.00	
1	Rear footrest bracket	11 \$	78.00	
1	Side stand	11 \$	75.00X	
1	Main stand	11 \$	95.00 X	
1	Front fork assy	Suffly S	680.00	
1	Fork under bracket	But s	220.00	
1	Front brake disc	11\$	95.00 🗙	
1	Front rim	1 \$	395.00	
1	Front rim shaft	cu7\$	50.00	
1	Front rim bearing	1ers	42.00	
		\$	2,855.00	
	not Authorica	Less 10% \$	285.50	
	100/ 110/ Wallot	\$	2,569.50	

1/5# 1100 3 Longs. The she Ather

LKK Auto Consultants hence notify the Reporer of the following: aged part(s) during resurvey

s on a "Without Prejudice" basis

1-1226

Supplementary item(s) is allowed is subject to final approval from Insurance Company

Acknowledged by Repairer Signature:

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883 Tel: 67527740 Fax: 67528669

Co. Reg No. 201202259N

Name

: Su Tao

Accident Date:

06-Sep-20

Honda Supra

Vehicle No: FBP8957D

Vehicle Model: GTR150

Manual

Estimated Repair Costs

		- 30	\$	840.00
4	To provide labour	297		400.00
3	To provide rear body repair		\$11	280.00 🗶
2	To check wiring and reset headlamp focusing		\$ 11	80.00 🗶
1	To provide towing service		\$11	80.00
S/No.	<u>Labour</u>			
			\$	1,111.00
1	Bearing cone	100		85.00_
2	Fork oil seals	*	7	56.00 ×
2	Fork oils	11	800	30.00 🗴
1	Rear box bracket	11	\$	180.00
1	Rear box	11	\$	280.00 X
1	Grab box	11	\$	480.00 X
	Special Net Items			

Singapore Dollars: Four Thousand Five Hundred Twenty and Cents: Fifty only

EROFIA MOTOR TRADING PTE LTD