



JCN AUTOLUTION PTE LTD Company Reg No. 201813305W

Address: No 8, Kaki Bukit Ave 4, #07-23, Premier@ Kaki Bukit, Singapore 415875

☎ +65 6881 1772



sales@jcngroup.com

Our Ref : FZ 9447C
Your Ref : SH 7272T

24TH Nov 2020

WITHOUT PREJUDICE

INDIA INTERNATIONAL INSURANCE PTE LTD

BY EMAIL @ motorclaim@iii.com.sg

64 Cecil Street

#04/06-00 IOB Building

Singapore 049711

Attention: Motor Claims Dept

Dear Sir/ Mdm,

CLAIMANT: MOHAMMAD ZULQURNAIN BIN ROSLI

ACCIDENT INVOLVING VEHICLES FZ 9447C AND SH 7272T ALONG BUKIT BATOK ON 06/04/2019 AT ABOUT 1945 HOURS.

We refer to the above matter.

Please find our claims as follows:-

01. Market Value minus off scrap	\$ 2,231.00
02. Loss of Use for 14 days \$70.00 per day	\$ 1,080.00
03. Survey Report Fee	\$ 500.00
04. GIA search/report & LTA search fees	\$ 7.45
05. Tow Fee	\$ 60.00
Total :	\$ 3,878.45

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A copy each of the following supporting documents is enclosed:

- (1) GIA Report for Vehicle FX9447C
- (2) Vehicle registration card
- (3) LTA search fee
- (4) Letter of Authority
- (5) Certificate of Insurance
- (6) Surveyor Report

Yours faithfully

JCN Autolution Pte Ltd

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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	27/04/2019 11:04
Date Of Accident	06/04/2019 19:45
Exact Location Of Accident	B. BATOK ST 34
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ9447C
Insured/Policyholder	
Name Of Registered Owner	MOHAMMAD ZULQURNAIN BIN ROSLI
NRIC No	S9621727G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87485920
Alternative Phone No	OFFICE-87485920

Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ-133CC (M)
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	THIRD PARTY
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	5087660941-02
Cover Note Number	

Driver

Name of Driver	MOHAMMAD ZULQURNAIN BIN ROSLI
NRIC No	S9621727G
Date Of Birth	20/06/1996
Occupation	OUTDOOR
Date Of Driving Pass	13/01/2016
Driving Experience	3 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87485920
Fax Number	
Contact Number	OFFICE-87485920
Email Address	NOEMAIL

Address	BLK 320 BUKIT BATOK STREET 33 #01-60
Postcode	650320
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	COLLISION - MAJOR/MINOR RD
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?	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	HONG KAH NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 370 BUKIT BATOK STREET 31 , POSTCODE: 650370 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5679999 - FAX NO: 65652508
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SH7272T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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	MOHAMMAD ZULQURNAIN BIN ROSLI
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FZ9447C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan


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:


Authorised Driver's Signature
Date & Time:


Liaison Officer's Signature
Date & Time:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20190417/2185

1 of 3

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20190417/2185

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/04/2019 20:17	Vide Report No.:	Station Diary No.: 83
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Informant's Particulars

Name of Informant: MOHAMMAD ZULQURNAIN BIN ROSLI	Address: APT BLK 320 BUKIT BATOK STREET 33 #01-60 SINGAPORE 650320		
ID Type / ID No.: NRIC NO / S9621727G	Contact No.: Home/Office: Mobile: 87485920		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 22	Date of Birth: 20/06/1998	Type of Informant: Rider
Race: Malay	Language:		Institution / School Name:
Occupation: FREELANCE OIL AND GAS TECHNICIAN	Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/04/2019 20:00	Type of Location: Straight Road
Location: Along Road 1 BUKIT BATOK STREET 34 ALONG BT BATOK ST 34				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FZ9447C	Motorcycle	YAMAHA	RXZ	Blue	Seriously Damaged	0
SH7272T	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ9447C	NTUC Income Insurance Co-Operative Limited	5087660941-02	26/01/2019	25/01/2020

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20193417/2185

2 of 3

Report No. T/20190417/2185

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-6679999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMMAD ZULQURNAIN BIN ROSLI	ID No.	S9621727G
Related Vehicle	FZ9447C (Motorcycle)	Contact No.	87485920
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	06/04/2019	Date Discharge	16/04/2019
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

Brief Details.

On 06/04/2019 at about 2002hrs, I was riding my motorcycle V1) FZ9447C along Bt Batok St 34 and wanted to head home. As the road was a two way one lane road, I was riding straight and I noticed there was a vehicle V2) SH7272T driving at the opposite direction towards me. V2 speed was very slow when I first noticed. There was a carpark turn in on the left, in front of where I was riding towards. V2 subsequently sped up and make an abrupt right turn towards the carpark. When V2 was making the turn, I applied brake on my vehicle V1, however I could not brake in time and collided with V2. I fell to the ground immediately and I could not stand up due to the injury I suffered on my legs. I was conscious throughout.

The driver of V2 alighted from his vehicle and made a check on me. Ambulance was called in, and I was conveyed to Ng Teng Fong Hospital by paramedics. I do not have the driver of V2's particulars and I do not know if there was any passenger in V2 at scene. On 16/04/2019, I was discharged from hospital, and I was informed by Traffic Police to lodge a traffic accident report ref to TP/IP/23431/2019.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20192417/2185

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batak Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

3 of 3

Report No. T/20192417/2185

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:

J /

Sgt 2 TAN WEI KANG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/04/2019 20:17

Officer In Charge Of Case:

TP / GIT /

SI YEO CHUN JIAN

Contact No: 65476213

SN 116

Classification Of Case:

Authentic Stamp
NP168

Singapore Police Force



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 24 Apr 2019 / 13:39:42

Receipt Date/Time : 24 Apr 2019 / 13:39:42

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190424-001712

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
(FZ9447C)				
Result of Insurance Enquiry - SH7272T				
As at 06 Apr 2019/19:45:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SH7272T Enquiry Fee 20190424133823770944	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	xxxxxxxxxxxx6038	Credit Card: Visa/MasterCard		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 1727G

Vehicle Details

Vehicle No.: FZ9447C
Vehicle to be Exported: No
Intended Deregistration Date: 07 May 2019
Vehicle Make: YAMAHA
Vehicle Model: RXZ
Primary Colour: Blue
Manufacturing Year: 2005
Engine No.: 5PV012991
Chassis No.: PMY5PV10050012991
Maximum Power Output: -
Open Market Value: \$2,438.00
Original Registration Date: 14 Dec 2005
First Registration Date: 14 Dec 2005
Transfer Count: 7
Actual ARF Paid: \$366.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 13 Dec 2020
COE Category: D - Motorcycle
COE Period(Years): 5
PQP Paid: \$3,133.00
COE Rebate Amount: \$1,071.00
Total Rebate Amount: \$1,071.00


Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 24 Apr 2019

OK

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9621727G





Name
MOHAMMAD ZULQURNAIN BIN ROSLI

Race
MALAY

Date of birth
20-06-1996

Sex
M

Country of birth
SINGAPORE





REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9621727G**

Name:
MOHAMMAD ZULQURNAIN BIN ROSLI

Birth Date: **20 Jun 1996**

Issue Date: **13 Jan 2016**



4706425



NRIC No. **S9621727G**



Date of issue
06-04-2011

Address
**APT BLK 320 BUKIT BATOK STREET 33
#01-60
SINGAPORE 650320**




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles ≤ 200 cc	13 Jan 2016

NP 428A

Licence No: **S9621727G**



THE SCHEDULE

Motorcycle Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Insured named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M4-0003030-8

Policy Number	: 5087660941-02
The Policyholder	: MOHAMMAD ZULQURNAIN BIN ROSLI BLK 320 #01-60 BUKIT BATOK STREET 33 SINGAPORE 650320

Period of Insurance	: 26 Jan 2019 To 25 Jan 2020
Sum Insured	: N/A
Premium (inclusive GST)	: S\$322.58

Interest Insured

Cover Type	: Third Party	
Named Driver (1)	: MOHAMMAD ZULQURNAIN BIN ROSLI	
Named Driver (2)	: NUR'MUHAMMAD SHAHLIHIN BIN ATAN	
Make/Model	: YAMAHA/RXZ	
Capacity	: 135cc	Number of Seater : 2
Registration Number	: FZ9447C	Registration Year : 2005
Chassis Number	: PMY5PV10050012991	Insure with COE : N/A
Excess (Section 1)	: N/A	NCD Entitlement : 20%
Excess (Section 2)	: N/A	
Hire Purchase Company	: N/A	

Memo A : N/A

Endorsement Operative: M1

Agency	: LI JIAN (00000602270)
Date of Issue	: 25 Jan 2019 10:55 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors



Chief Executive

Payment Authorisation Form

Date: _____

Attention: Motor Claims Department

Dear Sir/Madam,

The Road Accident involving vehicles no. _____

FZ 9447C

and

SH7272T

along

BUKIT BATOK ST 34

on

6/4/19

1945H

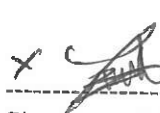
I/We, (Name) MOHAMMAD ZULQURNAIN BIN ROSLI, of (RCB/NRIC/Passport No.) S96217276 is the owner of vehicle no. FZ 9447C which was involved in the above mentioned accident with your insured vehicle no. SH7272T.

I/We hereby authorised any settlement payment due to me arising from the above-mentioned accident to be made payable to my appointed repairer M/s JCN Autolution Pte Ltd.

I/We hereby agreed to indemnify M/s JCN Autolution Pte Ltd against all claims and/or damages which may arise from all actions taken for and on my/our behalf.

I/We hereby affirmed that the above-mentioned statement to be true and correct.

Yours faithfully,



Signature of Owner/Company
(Company's stamp if applicable)

Name:

RCB/NRIC/Passport No.:

Address:

JCN AUTOLUTION PTE LTD

(RCB NO. 201813305W)

NO.1 KAKI BUKIT AVE 6, BLK D #01-85, AUTOBAY@KAKI BUKIT S 417883

CONTACT: +65 6881 1772/ +65 9677 5772 EMAIL: erik@jcngroup.com

Letter of Authority

RE: The Road Accident involving vehicles no. F2 9447C
_____ and SH7272T along
_____ BUKIT BAYU ST 34
on 6/5/19 1945H.

1. I/ We, hereby appointed **JCN AUTOLUTION PTE LTD** to be my agent and I/We authorised my said agent to give you all instructions pertaining to the conduct of my **Third-Party Claim** including instructions to commence legal proceedings in court in my name/our name against the respective insurer/owner/driver or company, if applicable.
2. **** My said agent has my authority to decide on my behalf whether to accept any offer of settlement from the respective insurer/owner/driver or company.**
3. I understand and agreed that until I revoke my said agent's authority in writing to you, I am bounded by all instructions given by my said agent to you.
4. **** Upon settlement of the Third-Party Claim and in case the settlement monies were sent to me/us by the insurers/owner/company, I/We undertake to make payment to JCN Autolution Pte Ltd for the costs of repairs settled and related expenses and disbursement incurred.**
4. The above-mentioned vehicle is to be repair at **JCN Autolution Pte Ltd** on my own will without any inducement, threat or promise.

x 

Signature of Owner/Company
(Company's stamp if applicable)
Name:
RCB/NRIC/Passport No.:
Address:

JCN AUTOLUTION PTE LTD

(RCB No. 201813305W)

NO.1 KAKI BUKIT AVE 6, BLK D #01-85, AUTOBAY@KAKI BUKIT S 417883

CONTACT: +65 6881 1772/ +65 9677 5772 EMAIL: erik@jcngroup.com

COPY

PAL'S

APPRAISER PTE LTD
No. 1 Kaki Bukit Ave 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883
Tel: 8181 8802 Fax: 6747 1017 Registration No: 201000268D

Billing Name & Address

Mohammad Zulqurnain Bin Rosli
Blk 320 Bukit Batok Street 33
#01-60
Singapore 650320

Invoice No: 05-19007/DY

Date: 03 June 2019

Vehicle No: FZ 9447 C

Model: Yamaha RXZ

Item	Description	Amount S\$
1	Date of inspection : <u>08 May 2019</u> A copy of the total loss report Correspondence, postage and etc	
2	Photography Services: - Develop photographs - Storage of digital photographs - Submission of photographs <u>49</u> copies	
3	Transportation Charges	
	Total:	<u>\$ 500.00</u>
	SDLS : FIVE HUNDRED ONLY	

Notes:

1. All cheque payment should be "Crossed" and made payable to "Pal's Appraiser Pte Ltd"
2. All cheque should have our "Invoice No." written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



Official Stamp

PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Avenue 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883 Tel: 8181 8802 Fax: 6747 1017

Registration No.: 201000268D

Our Ref: TP/05-19007/DY/2019

13 May 2019

Mohammad Zulqurnain Bin Rosli
Blk 320 Bukit Batok Street 33
#01-60
Singapore 650320

Dear Sir

INSPECTION AND ASSESSMENT OF A DAMAGED VEHICLE FZ 9447 C ACCIDENT ON 6 April 2019

We thank you for your instruction on 8 May 2019, we have inspected the vehicle at JCN Autolution Pte Ltd, No.39 Woodland Close, #01-34/35 Mega @ Woodland, Singapore 737856.

VEHICLE PARTICULAR

Registration No.	: FZ 9447 C	Colour	: Red
Make/Model	: Yamaha RXZ	Speedo Reading	: 51262
Original Regn. Date	: 14 Dec 2005	Normal Rim	: Sport
Engine Capacity	: 133cc	PARF Eligibility	: No
Chassis Number	: PMY5PV10050012991	Min PARF	: -
Engine Number	: 5PV012991		

VEHICLE CONDITION

General Condition	: In order
Body Work	: In order
Steering	: Damage after accident
Foot Brake	: In order
Hand Brake	: In order

TYRE CONDITION

Front Tyre	: 4.00mm	Size	: 90/80 - 18	Made by	: Dunlop
Rear Tyre	: 6.00mm	Size	: 90/80 - 18	Made by	: IRM

DESCRIPTION OF DAMAGES

The vehicle sustained a severe impact damages on the front o/s and n/s portion, front forks bent, fuel tank dented, front sport rim bent, front handle bar bent, front headlamp damage, rear exhaust pipe dented, and etc.

For detail of the damages, kindly refer to the forty nine (49) copies of photographs attached herein.

VEHICLE VALUE

We have checked the vehicle pre-accident average market value, as at the time of accident is about **S\$3,300.00** (Three Thousand And Three Hundred Only). COE / PARF rebate is about **S\$1,069.00** (One Thousand And Sixty Nine Only).

Therefore, market value of **S\$3,300.00** less **S\$1,069.00** balance liability will be about **S\$2,231.00** (Two Thousand Two Hundred And Thirty-One Only).

COST OF REPAIR

There is no estimate submitted by the repairer. Due to the damages sustain, in our opinion, it is not economical to repair the damage vehicle and is to be treated as Total Loss.

IMPORTANT

As instructed we have not authorize the repair.

Please note that this report rendered by us herein is solely on our independent opinion, which is base on the available documents and inspection of the vehicle.

WITHOUT PREJUDICE, we trust this report will be of assistance to you in dealing with this matter.

If you have any query or discrepancy of this report, kindly inform us within two (2) weeks, or the report will be treated as correct.



Qualified Appraiser

Disclaimer

The rate and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rate and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

