

FCI

Vehicle number	FBQ9501Z
Make / Model	YAMAHA AEROX
Chassis number	MH3SG4640LJ068541
Accident date	20/12/20
Reference	2012-45

Qty	Particulars	Unit Price - SGD \$
<u>PARTS REPLACEMENT - LIST ITEMS</u>		
1	FRONT RH FAIRING	450.00 <i>cut</i>
1	FRONT RH INNER FAIRING	250.00 <i>cut</i>
1	FRONT RH HEADLAMP	350.00 <i>X</i>
1 SET	FRONT FORK	600.00 <i>X</i>
1	ENGINE COVER	150.00 <i>X</i>
1	EXHAUST COVER	180.00 <i>X cut</i>
1	EXHAUST BRACKET	90.00 <i>X</i>
1	EXHAUST SILENCER	700.00 <i>X</i>
		2770.00
	Less 10%	277.00
		2493.00
<u>PARTS REPLACEMENT - SPECIAL NETT ITEMS</u>		
1	BOX	500.00 <i>cut</i>
1	BOX BRACKET	250.00 <i>X</i>
1 SET	GEAR SHIT SHAFT OIL SEAL	24.00 <i>X</i>
2	FORK OIL SEAL	120.00 <i>cut</i>
1 BOT	FORK OIL	60.00 <i>cut</i>
	Subtotal	954.00
	Balance C/F	3447.00
<u>LABOUR AND MISCELLANEOUS CHARGES</u>		
1	TO CHECK WIRING SYSTEM	60.00 <i>30</i>
2	TO CHECK FORK ALIGNMENT	200.00 <i>100</i>
3	TO REALIGN BODY FRAME	350.00 <i>X</i>
4	TO R&R SUSPENSION, HANDLE BAR, HEADLAMP & FAIRING	400.00 <i>100</i>
5	TO SPRAY FENDER, SIDE FAIRINGS AND AFFECTED AREAS	500.00 <i>150</i>
	Subtotal	1510.00
	Grand total	4957.00

LKK Auto Consultants hereby notify the Repairer of the following:

- To resurvey before after spray painting
- To display damaged parts during resurvey
- Parts should not be reconfirmed
- Third party survey is on a "Without Prejudice" basis
- No illegal modifications is allowed
- Supplemental items must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Tanpin 97455749
HS Repair after repair 03 days
Tanpin R. Ikhantun

SINGAPORE ACCIDENT STATEMENT

MIC
F 12/7/14
R 14/7/14

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 Submission	23/12/2020 11:25 (SGT)
Date of Accident	20/12/2020 15:00 (SGT)
Exact Location of Accident	Lengkong Tiga, Singapore
Additional Location Information	BLK 112 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ9501Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	muhammad hilmi bin abdul rahman
NRIC No	SXXXX147B
Email Address	JUSBRINGIT2003@GMAIL.COM
Mobile Phone No	(Phone) +65-96946774
Alternative Phone No	+65-96946774

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Aerox
Variant	-
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 - Claiming third party
Vehicle Category	Motorcycle

INSURANCE COMPANY

Name of Insurance Company	Axa
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	-
Cover Note Number	an3181445

DRIVER

Name of Driver	muhammad hilmi bin abdul rahman
NRIC No	SXXXX147B
Date Of Birth	10/12/1987
Occupation	Indoor

Date Of Driving Pass	01/02/2017
Driving experience	3 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96946774
Alt. Phone Number	+65-96946774
Email Address	JUSBRINGIT2003@GMAIL.COM
Address	BLK 112 LENGKONG TIGA #02-213
Address complement	-
Postcode	410112
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORD BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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	SHC7157A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-

Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBQ9031M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	FA4045T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report promptly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. Accident reconstruction may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Record 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 after said.
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 processed 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) complying with 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 laws 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 based 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, regulations, 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:

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



Reporting Centre Personnel's Signature
Name:
NIC/PIN No.:

23/1/20

SKETCH PLAN #2

SKETCH PLAN

Vehicle
A - FBQ 95012
B - SHC 7157A
C - FBQ 9071M
D - FA 4095

Legend
 Car
 Motorcycle

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

DECLARATION
I/We declare the foregoing particulars are true to every respect.
Please be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy must be made within the stipulated time frame from the day of occurrence. kindly check your policy for more details.

Policyholder's Signature
Date & Time: 23/12/20

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NUC/PH No.:



**SINGAPORE
POLICE FORCE**



T/20201223/7007

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

1 of 3
Report No: T/20201223/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/12/2020 09:45 Vide Report No.: Station Diary No.:

Informant's Particulars

Name of Informant: MUHAMMAD HILMI BIN ABDUL RAHMAN		Address: 112 LENGKONG TIGA #02-213 SINGAPORE 410112	
ID Type / ID No.: NRIC NO / S8740147B		Contact No.: Home/Office: Mobile: 96946774	
Nationality: SINGAPORE CITIZEN		Email: jusbringit2003@gmail.com	
Sex: Male	Age: 33	Date of Birth: 10/12/1987	Type of Informant: Rider
Race: Indian		Language: English	Institution / School Name:
Occupation: Technical/Engineering services manager (eg shipyard manager)		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/12/2020 15:00	Type of Location:
Location: LENGKONG TIGA				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
FA4045T	Motorcycle					0
FBQ9031M	Motorcycle					0
FBQ9501Z	Motorcycle	YAMAHA	AEROX GDR155A CVT ABS	Red		0



**SINGAPORE
POLICE FORCE**



T20201223/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000

2 of 3
Report No: T20201223/7007

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SHC7157A	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBQ9501Z	AXA INSURANCE SINGAPORE PTE LTD	AN3181445	18/01/2020	17/01/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD HILMI BIN ABDUL RAHMAN	ID No.	S8740147B
Related Vehicle	FBQ9501Z (Motorcycle)	Contact No.	96946774
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Notes:
My bike (FBQ9501Z) was stationary parked at the car park of Blk 112 Lengkok Tiga. When I came back to my bike, I realized there was damages on my bike (FBQ9501Z). The collision involved three bikes included mine and one taxi (SHC7157A).

First bike - FBQ9501Z
Second bike - FBQ9031M
Third bike - FA4045T

I am lodging this report for insurance claim purpose.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000



T/20201223/7907

3 of 3

Report No. T/20201223/7907

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
VILTON HIA WEE SIANG
Contact No.: 65476232

Authentication Stamp
NP168

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

Date/Time:
23/12/2020 09:45

Classification Of Case: