

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

Date: 27 January 2021

To : LKK

By Fax: 6256-4315

Attn :

Bryan

Tel :

VEHICLE NO : FBB 3815L

Yamaha RXZ

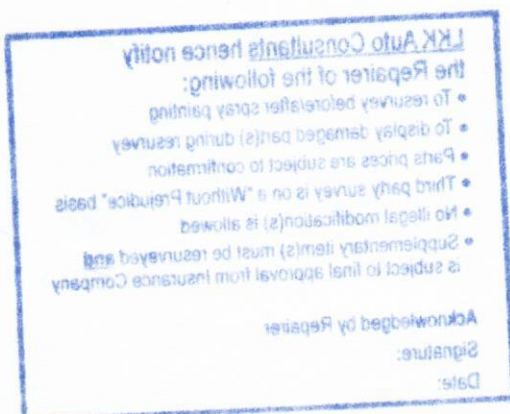
ACCIDENT DATE: 25 January 2021

Description	Qty	Quotation \$
1 Handle Bar L/RH <i>2 set</i>	2	180.00 <i>2L</i>
2 Clutch Lever <i>44</i>	1	75.00 <i>X</i>
3 Brake Lever <i>CW</i>	1	68.00 <i>✓</i>
4 Fork Tube <i>2 set</i>	1 set	480.00 <i>2L</i>
5 Fork Under Bracket <i>2 Den</i>	1	230.00 <i>2L</i>
6 Fork Oil Seal <i>2 New</i>	1	120.00 <i>2L</i>
7 Front Mudguard <i>new</i>	1	150.00 <i>X</i>
8 Head Lamp <i>discharge / broken</i>	1	580.00 <i>✓ 268.00</i>
9 Head Cowling <i>discharge / broken</i>	1	230.00 <i>✓ 230.00</i>
10 Front Signal L/RH <i>discharge / broken</i>	2	130.00 <i>✓ 110.00</i>
11 Lamp Stay <i>2 set</i>	1	160.00 <i>X ✓ 98.00</i>
12 Front Brake Disc <i>new</i>	1	250.00 <i>X</i>
13 Front Rim <i>new</i>	1	320.00 <i>X</i>
14 Exhaust Pipe <i>new</i>	1	550.00 <i>X 480.00</i>
15 Front Footrest RH <i>cut / torn</i>	1	85.00 <i>✓</i>
16 Footrest Bracket <i>new</i>	1	190.00 <i>X</i>
17 Brake Reservoir <i>SP</i>	1	150.00 <i>X</i>
18 Mirror <i>HP</i>	2	160.00 <i>X</i>

Sub-Total 4,108.00

Less 10% 410.80

Sub-Total 3,697.20



1869.00

1682.10

VEHICLE NO : FBB 3815L

Yamaha RXZ

Nett items

- | | |
|--|--------------|
| 1 Towing fee 44 | 40.00 X |
| 2 Remove & replace parts, align & etc | 250.00 150/- |
| 3 Remove & replace fork tube, top up
fork oil | 150.00 80/- |
| 4 Remove & replace front disc, front
rim & exhaust pipe | 120.00 30/- |
| 5 Re-connect electrical wiring | 60.00 30/- |

Special Nett items

- | | |
|--------------------------------|----------|
| 1 Meter Assy broken | 540.00 ✓ |
|--------------------------------|----------|

Sub-Total 1,160.00
Nett Total 4,857.20

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair commences, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion
Thank you

SG 98 MOTOR PTE LTD

29/01/2024 @ 1730hrs

HA (Hatched)

2/30m

4 days

LKK Auto

8

2512.10

1/5 2000/-

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:

Date:

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 Submission	27/01/2021 17:59 (SGT)
Date of Accident	25/01/2021 15:00 (SGT)
Exact Location of Accident	Woodlands Ave 12, Singapore
Additional Location Information	WOODLAND AVE 12
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBB3815L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ASNAWI AZMAN BIN KASMAN
NRIC No	SXXXX596C
Email Address	ASNAWIAZMAN11@GMAIL.COM
Mobile Phone No	(Phone) +65-82098087
Alternative Phone No	(Office) +65-82098087

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	YAMAHA / RXZ
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	Sompo
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	D20MTMC01001013
Cover Note Number	07/02/2020 TO 14/03/2021

DRIVER

Name of Driver	ASNAWI AZMAN BIN KASMAN
NRIC No	SXXXX596C
Date Of Birth	22/07/1999
Occupation	Indoor

Date Of Driving Pass	06/12/2019
Driving experience	1 YEAR AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-82098087
Alt. Phone Number	(Office) +65-82098087
Email Address	ASNAWIAZMAN11@GMAIL.COM
Address	BLK 328 ANG MO KIO AVE 3 #02-2004
Address complement	-
Postcode	560328
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	Collision - Major/Minor Rd
Weather Conditions	DRIZZLING
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
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	Ang Mo Kio South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004519999
Alt. Police Station Phone No	(Fax) +65-65535679
Police Station Address	81 Ang Mo Kio Ave 3 Singapore 569929
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN AND POLICE REPORT

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	PC6786X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NG AH LEONG
NRIC No	SXXXX599Z

Contact Number (Phone) +65-98302191
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ASNAWI AZMAN BIN KASMAN
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained LEFT KNEE FRACTURE AND ABRASION ON THE RIGHT
ELBOW AND ARM AREA
Injured person in which vehicle? FBB3815L
Were seat belts worn? No
Was this injured conveyed to hospital by ambulance? No

WITNESS DETAILS

WITNESS 1

Name ADI
Phone (Phone) +65-88316982
Email -

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 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.
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.

Sketch Plan

<p>ADi 88316982</p> <p>Witness who saw the accident →</p>	
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[Signature]

Policyholder's Signature / Date & Time

[Signature]

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



Witnessed by Reporting Centre Personnel

AH LIM MOTOR COMPANY

Date of accident: 25/1/2021 Time: 1500 hrs Location: Woodlands ave 12
 My Vehicle A: FBB3815L Vehicle B: PC6786X Vehicle C: _____

SKETCH PLAN

Describe Circumstances of the Accident.

On 25th of January 2021 around 3:00 pm, I was riding along Woodlands Ave 12 towards Woodlands ave 5. It was drizzling at that time. The condition of road ~~was~~ is slow moving on left and middle lane. I was riding on the first lane when I saw a van from the middle lane drastically change to the right lane although signal light is on causing my bike to hit the right tail light of the van, Resulting front of my bike broken. Causing myself to suffer fracture on my left knee and abrasion on my right arm, and I received 10 days mc from Khoo Tek Puat hospital. Thankfully there's a driver name "Adi" come to offer help and he witness the whole accident.

Note: Please take note that your Insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel



AH LIM MOTOR COMPANY



SINGAPORE POLICE FORCE



T/20210126/2022

1 of 3

Report No. T/20210126/2022

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/01/2021 11:15	Vide Report No.:	Station Diary No.: 35
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Informant's Particulars			
Name of Informant: ASNAWI AZMAN BIN KASMAN SENEN		Address: APT BLK 328 ANG MO KIO AVENUE 3 #02-2004 SINGAPORE 560328	
ID Type / ID No.: NRIC NO / S9922596C		Contact No.: Home/Office: Mobile: 98302191	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 21	Date of Birth: 22/07/1999	Type of Informant: Rider
Race: Javanese		Language: English	Institution / School Name:
Occupation: National Service Full Time		Driving Licence Information: Class: 2B	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/01/2021 15:00	Type of Location: Straight Road
Location: WOODLANDS AVENUE 12				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBB3815L	Motorcycle	YAMAHA	RXZ	Black	Slightly Damaged	0
PC6786X	Van				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBB3815L	TENET SOMPO INSURANCE PTE. LTD.	D20MTMC0100101 3	07/02/2020	14/03/2021



SINGAPORE POLICE FORCE



T/20210126/2022

2 of 3

Report No. T/20210126/2022

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Rider		Use of Pedestrian Crossing: NA	
Name	ASNAWI AZMAN BIN KASMAN SENEN	ID No.	S9922596C
Related Vehicle	FBB3815L (Motorcycle)	Contact No.	98302191
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	25/01/2021	Date Discharge	25/01/2021
No. of Days granted Medical Leave	10	Degree of Injury	Serious
Driver			
Name	NG AH LEONG	ID No.	S1228599Z
Related Vehicle	PC6786X (Van)	Contact No.	98302191
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/01/2021 at about 1500hrs, I was riding my motorcycle; FBB3815L, along Woodlands Avenue 12 towards Gambas, at lane 1. A van, PC6786X, from lane 2, then made an abrupt lane change onto my lane. I was unable to avoid it and as a result, its rear then collided with my side. I then fell sideways from motorcycle.

I then went to Khoo Teck Puat Hospital and was given a 10 days MC from 25/01/2021 to 03/02/2021 reference Khane211943675.



SINGAPORE
POLICE FORCE



T/20210126/2022

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

3 of 3

Report No. T/20210126/2022

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:

F /

Sgt 3 MASHIDAYAT BIN MASZENI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/01/2021 11:15

Officer In Charge Of Case:

TP / AEIT /

Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN

Contact No.: 65476185

Classification Of Case:



SINGAPORE
POLICE FORCE
LIVE, LAUGH, LOVE, LEAVE

SN 75

Authentication Stamp

NP168

SIGNATURE