

08/11/13 wef
ASS. REC. BY: Paul

REF:

CS3/ASM21003932/Rivf3

106P

ASSIGNMENT

COE EXPIRY: 2028/1/1

From: _____ Date: _____

Estimated Cost: _____

OD TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: AK 9992

at Workshop m/s: BMW MOTORRAD

of 315, ALEXANDRA RD

Insured: SBK 1122T AXA

Policy No. _____

Claims No. S1M033R9

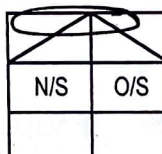
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value: 20K

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: AK 9992 Yr Regn: 2008 / 069

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: B.M.W R1200GS C.C. 1170

Colour: MULTI A/C: Insured / Std / NI / NA

Sp. Reading: _____ T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WB103130192445832

Gen. Cond: Good Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 120/70ZR17

R: 180/55ZR17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. _____ mm L/Bal. _____ mm

D.O.A. 22/02/21 D.O.I. 26/03/21

Survey held at BMW MOTORRAD

Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Repair Int - 15K

ESTIMATE RANGE OF REPAIR - (7K-8K) / 10 days

6/7/21 Submit CTL-MV:\$20,000 (est) LTA: \$4041 NV:\$15,959

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 6/7/21-Typist

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS, SI

Photos

Others

TOTAL

Report Format: CTL

Lump Sum / I.B.I: (\$ _____)

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 04/03/2021 03:03 (SGT)
Date of Accident 22/02/2021 20:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information OUTSIDE BAYCOURT CONDO (461A UPPER EAST COAST ROAD)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number AK999Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHEW TZE MENG JENSEN
NRIC No S7142106F
Email Address jensentmchew@gmail.com
Mobile Phone No (Phone) +65-97610760
Alternative Phone No +65-97610760

VEHICLE PARTICULARS

Manufacturer BMW
Model R1200 GS
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
Transmission Manual
CC 1170

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd.
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number PNMC2019-0000438
Cover Note Number -

DRIVER

Name of Driver CHEW TZE MENG JENSEN

NRIC No S7142106F
 Date Of Birth 27/11/1971
 Occupation Indoor
 Date Of Driving Pass 25/07/1995
 Driving experience 25 YEARS AND 7 MONTHS
 Gender Male
 Mobile Number (Phone) +65-97610760
 Alt. Phone Number +65-97610760
 Email Address jensentmchew@gmail.com
 Address Kew Residencia, 353 Kew Crescent
 Address complement -
 Postcode 465965
 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 - Cross Junction
 Weather Conditions Clear
 Road Surface Dry

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 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

I TURNED RIGHT AFTER STOPPING AT THE BAYSHORE TRAFFIC LIGHT AND WAS GOING STRIGHT IN THE DIRECTION OF BEDOK CAMP WHEN A CAR (SBK1122T) SUDDENLY TURNED RIGHT FROM THE OPPOSITE LANE TO GO INTO BAYCOURT CONDO AT 461A UPPER EAST COAST ROAD. THAT WAS WHEN I HIT THE SIDE OF HIS CAR. I HAVE RIGHT OF WAY AND HE FAILED TO KEEP A LOOKOUT FOR ONCOMING TRAFFIC.

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 SBK1122T
 Vehicle Manufacturer Skoda
 Vehicle Model Superb

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHEW TZE MENG JENSEN
Address	Kew Residencia, 353 Kew Crescent
Address Complement	-
Post Code	465965
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	AK999Z
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

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 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. 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.

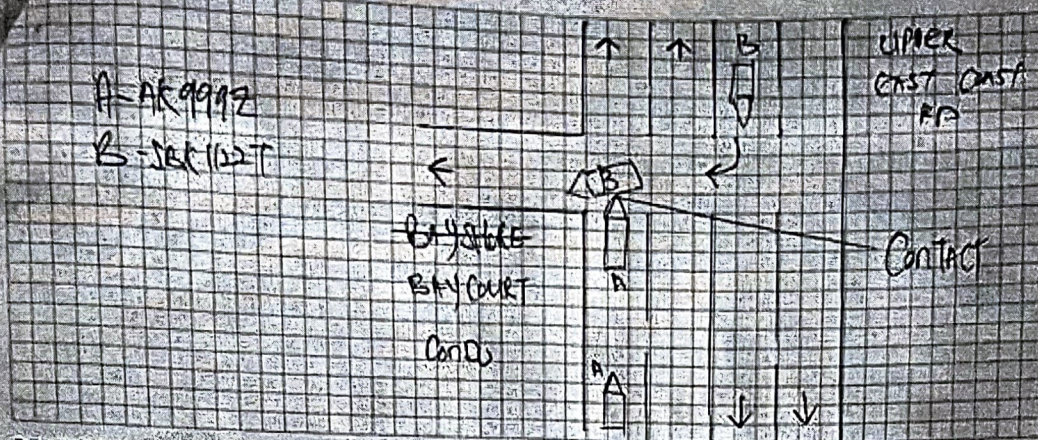

Policyholder's Signature
Date & Time:

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

REFER TO ATTACHED STATEMENT.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Chen

Policyholder's Signature _____
Date & Time: _____

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

Date & Time:

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Inquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	106F
Vehicle No.:	AK999Z
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Mar 2021
Vehicle Make:	B.M.W.
Vehicle Model:	R1200 GS
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	122EF34087150
Chassis No.:	WB10313019ZU45832
Maximum Power Output:	-
Open Market Value:	\$21,481.00
Original Registration Date:	06 Oct 2008
First Registration Date:	06 Oct 2008
Transfer Count:	0
Actual ARF Paid:	\$3,223.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	31 Jan 2028
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$5,910.00
COE Rebate Amount:	\$4,041.00
Total Rebate Amount:	\$4,041.00

The information contained herein is correct as at 29 Mar 2021

OK

BMW R1200GS Adventure

Listing Type	Free Ad
Brand	BMW (/listing/usedbike/brand/bmw/)
Model	BMW R1200GS Adventure (/listing/usedbike/model/bmw-r1200gs-adventure/)
Engine Capacity	1170cc
Classification	Class 2 (/listing/usedbike/model/motorcycle-for-sale/class/class-2/)
Registration Date	06/10/2008
COE Expiry Date	05/10/2028 (7 years 6 months left)
Mileage	101000km
No. of owners	2
Type of Vehicle	Sport Tourers (/listing/usedbike/model/motorcycle-for-sale/sport-tourers/)

Price: ^{SGD}\$20000

DETAILS

Oct 2008 BMW R1200GS For Sale.

As At Jun 2019 Before Covid-19, I Spent S\$12,340.18 Fully Overhaul.

Will Show All Receipts To Keen Buyer.

Previously Intended To Keep This Bike, But Now I Have Changed My Mind.

My Loss Is Your Gain.

You Will Have Peace Of Mind As All Working Engine Parts Are Brand New.

This Saves You Money As Most Major Repairs Are Done.

Number Plate Will Be Retained.

Used As Daily Transportation.