

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

INV No.

TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX

SINGAPORE 069110

INV Date 11/11/2021 Reference CS/EOI210

Reference CS/EQI21006335/Etf3e2

AC2107769

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. FX 512S

Insured Veh. GBH 8098A

Claim No. DM21HO00790 / SL

Policy No.

Accident Date 14/05/2021

Inspection Date 02/06/2021

Description	Total
Survey Inspection	160.00
Digital Photographs	
Transportation	
Subtotal	160.00
GST (7%)	11.20
Grand Total	171.20

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

KHM



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		Affiliated to Federation Internation	nale Des Experts En Aut	omobile	
	EQ INSURANCE C	OMPANY LTD	Re	f: CS/EQ	l21006335/Etf3e2
	5 MAXWELL ROAI #17-00 TOWER BL MND COMPLEXSI		Da	te: 11/11/2	2021
			Co	de: EQI	
1.		Policy Particulars	:- THIRD PARTY CL	.AIM	
	Insured Veh.	GBH 8098A	Veh. Inspected	FX 512	S
	Policy No.		Coverage (\$)	0.00	
	Claim No.	DM21HO00790 / SL	Excess (\$)	0.00	
	Assign From	STEVE LIM	Assign Date	02/06/2	2021
2.		Vehicle Partic	culars & Condition		
	Make & Model	LEXMOTO ZSF TD125	c.c	123	
	Engine No.	HIDDEN	Year of Reg.	2017	
	Chassis No.	LTZPCJLL5F0300559	Colour	RED	
	Odometer	-	Steering	IN OR	DER
	Brakes	IN ORDER	Modification	SPOR1	TS RIM
	General	FAIR			
3.			ons of Tyres		
		Size	Make	Balan	ce
	R/H Front Tyre	3.00-18	METZELER	4 mm	
	L/H Front Tyre			mm	
	R/H Rear Tyre	80/90-18	METZELER	4 mm	
	L/H Rear Tyre			mm	
4.		•	on of Damages		
	THE VEHICLE SUS	STAINED DAMAGES AT THE O/S	S AND N/S BODY.		
	DAMAGES SEE DI	ETAILS.			
5.		General	Information		
	Accident Date	14/05/2021	Inspection Date	02/06/2	2021
	Survey held at	48 Toh Guan Road East 02-140			
	Repairer	UNIQUE MOTORSPORTS			
5a.		Re	emarks		
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT PREJUDICE" B E HAVE NOT AUTHO	ASIS. RISED REPA	AIRS.
5b.		Estimate I	Days of Repair		
	ESTIMATED NORI	MAL PERIOD FOR REPAIR:	3 V	orking Days	S



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Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FX 512S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	HANDLE BAR	BENT	50.00	50.00
1	SET MIRROR	CUT	30.00	30.00
1	SIGNAL LIGHT (R/H)	NOT NECESSARY	30.00	-
1	BRAKE LEVER	CUT	15.00	15.00
1	GEAR PEDAL	NOT NECESSARY	45.00	-
1	CUSTOMIZED DECAL (STICKER)	NECESSARY	80.00	80.00
			250.00	175.00
	<u>LABOUR</u>			
	SPRAY PAINTING WORKS.		350.00	250.00
	TOWING CHARGES FROM ACCIDENT SCENE.		50.00	50.00
	LABOUR COST.		350.00	180.00
	FORK ALIGNMENT.	NOT NECESSARY	200.00	-
			950.00	480.00
	GRAND TOTAL		1,200.00	655.00

RECOMMENDED COST OF REPAIRS		655.00
(REPAIR COST NOT CONCLUDE)		

Report Ref No. CS/EQI21006335/Etf3e2



Automotive Assessor

St. S.

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

SF0E215H0001 / F.T Fasttrack ENTRY DATE & TIME: 17/05/2021 13:13 (SGT) SUBMITTED BY: Freddie Tan VERSION: 1 (17/05/2021 13:13 (SGT))



SINGAPORE ACCIDENT STATEMENT

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
- 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' Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

17/05/2021 13:13 (SGT) 14/05/2021 15:06 (SGT) 718 Bedok Reservoir Rd, Block 718, Singapore 470718

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

FX512S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

UNIQUE MOTORSPORTS PTE LTD 2XXXXX910H daphne@uniquemotorsports.com.sq (Phone) +65-96300043 +65-68446378

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission CC

Zongshen **ZXR125**

Private use

No - Reporting only Motorcycle Manual 125

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

NTUC Income Insurance Co-operative Ltd ThirdParty Yes 5110358789-01-000035 5110358789-01-000035

DRIVER

Name of Driver Passport No/FIN

MOHAMAD KHAIRUL ADHAM BIN MOOHD ARIFIN GXXXX049L

Date Of Birth 28/11/1994 Occupation Outdoor Date Of Driving Pass 16/08/2018 Driving experience 2 YEARS AND 9 MONTHS Gender Male Mobile Number (Phone) +65-82457828 Alt. Phone Number Email Address khairuladham94@gmail.com Address 419 RACE COURSE RD Address complement Postcode 218666 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 No Collision Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 1 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? No 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? No Was notice of intended Prosecution given?

CIRCUMSTANCES OF ACCIDENT

If yes, against whom?

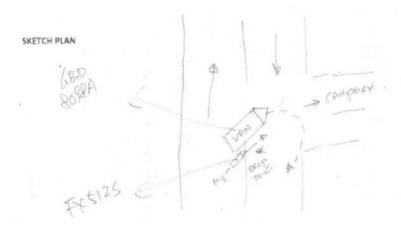
ON THE 14TH OF MAY AT ABOUT 1505HR I WAS ON MY WAY DELIVERY TO BEDOK RESERVOIR. MY INTENSION TO RIGHT TURE TOWARDS THE CARPARK I WAS BEHIND RIGHT SIDE OF A VAN ALSO TURNINE R IGHT VAN WAS MAKING A HUGE U-TURN. I THOUGHT VAN WAS TURNING RIGHT TO CARPARK, I EMERGENCY BRAKE MY BIKE ITS FELT NO INJURY ON MY PART.

No

PLEASE REFER TO FB VIDEO UPLOADED FOR REF. DETAIL AS FOLLOWS ON 14/05/21 BEDOK RESERVOIR RD GBH8098A. NO PYSICAL CONTACT ON VAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON	THE THIN OF MAY WE ARREST KOS WAS I WAS ON MY DELIVERY
	BEDOK RESERVOIR.
	MY INTENSION TO PRIGHT TOKK SOUMED THE CARPACK
	I WE BENILD RIGHT SIDE OF A VAN, PASO TURNING PRICE
-	VAND WAS MAKINE A MUGE U-TURN.
	I THOUGHT YOU WAS FURNING RIGHT TO CARPARK, I WAS
*****************	Facilit -
-	1. EMEREENCY BLAKE MY BINE & ITS FELT
	NO INJURY ON MAY PART.
_	PLEME REFER TO TO FILL VIOCO UPLOPRED FOR PEF.
	DETALL & FULLOWS OF 14 MAY 2021 BEDOK RESERVOIR
	# G8H 8098 A.
4	NO PYCICAL CONTACT ON VAN
2000	QUE MUNUKSTUKIS PTE LTD
	GS1 Hed County Avenue 6
251	THE STATE STATES OF THE STATES
7	X-9435 A17883 Singaport 417883

DECLARATION RS/UKTS / TE LTD:
/We declare the foreigning ball before are true in every respect.
1 (Sign Bluff) Avenue 6
102-54/55 Autobay 8 Krikl Bluklt
6-54/55 Autobay 8 Krikl Bluklt
6-54/56 Autobay 8 Krikl Bluklt
6-

Policyholders Signature Date & T

Oriver's Signature
(If driver is not the policyholder)
Date & Time: 17 / M A Y

Accident report SF0E215H0001



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PHOTOGRAPHS FOR VEHICLE NO. FX 512S

INSPECTION















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