"Et: CS3/AIG71007868/UVf3 sile fito BY: ASSIGNMENT From FB59198C. Cale. Veh No: Estimated Cost: Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover / OD/TP/WS/TPRES/OD RES/EVA/INV/MV Truck / Trailer or To Inspect Vehicle No: Honda Star Chloo Make: at Workshop m/s - Yed Colour A/C: . Insured / Std / NI / NA 93446 Sp.Reading T/Radio: Insured / Std / NI / NA Insured: Eng/No: Policy No. NC421601608 C/No: Claims No. Gen. Cond: Good / Fair / Poor / Burnt Sum Insured: Steering: Inordor / Jammed / Leaked / Burnt or (Client's Record) Brake: Inorder / Jammed / Leaked / Burnt or Make of Veh: Modi: NII / SKRID / STD A/RIM or . F: 160/60ZR17 Tyre Size: (Policy Condition) Remark: The veh had commenced its N/S O/S BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. TOYO/YOKO or Bal. or Market Value: \* Front Rear IDAC Accident Rport: Consistent?: Yes or No R/Bal. R/Bal. GIA / PR Seen: Consistent7: Yes or No L/Bal. L/Bal. mm Est. Repairs. Res.: Yes or No D.O.A. 17/7/7 Lum Sunt 3 Val.: Yes or No Survey held at Des. of Damages : Frt I Real I OIS I NIS I UIC I Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN / OUT Person Contacted The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction mv: 14K relate: 1422

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Add Fee:

Transportation: Site Insp (5 \_S + PS \_\_SI Interview (\$ Ftindis Tech, Inva (\$ Officers Weel and 12

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# FOR MOTORCYCLE

Replace ( √ ) → Repair (X) 3. Check (?)
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Vehicle No: FB39198C

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Rear Taillamp   3076   994192   Side Box   3077   992927   Rear Box   3076   994192   Side Fairing   3076   994192   Side Box   3077   992927   Rear Box   3078   992928   Rear Box Bracket   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   991328   3079   3	3066   993443   Rear Fender Mudflap   3067   992940   Rear Brake Disc   3068   992936   Rear Brake Disc   3068   992936   Rear Brake Caliper   3069   995236   Rear Spocket   3070   990585   Chain   3071   990580   Chain   Guard   3072   994530   Swing Arm   3072   994530   Swing Arm   3073   995245   Rear Sub frame   3073   995245   Rear RH Signal Lamp   8090438   Brake Reservoir   3074   995246   Rear RH Signal Lamp   8090438   Brake Reservoir   3075   995251   Rear Taillamp   8091119   Side Fairing Top Garnish   3076   994192   Side Box   3076   994192   Side Fairing Inner Garnish   3078   992928   Rear Box Bracket   3079   991328   Brablem   3078   992928   307

No of Items: Assessor: Theran

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	811A	
Vehicle No.:	FBJ9198C	
Vehicle to be Exported:	No	
Intended Deregistration Date:	28 Jul 2021	
Vehicle Make:	HONDA	
Vehicle Model:	CB400 SF M	
Primary Colour:	Red	
Manufacturing Year:	2014	
Engine No.:	NC42E1201601	
Chassis No.:	NC421601608	
Maximum Power Output:	•	
Open Market Value:	\$5,788.00	
Original Registration Date:	16 Dec 2014	
First Registration Date:	16 Dec 2014	
Transfer Count:	5	
Actual ARF Paid: Intended PARF Rebate Details	\$869.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	**2	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	15 Dec 2024	
COE Category:	D - Motorcycle	
COE Period(Years):	10	
QP Paid:	\$4,210.00	
COE Rebate Amount:	\$1,422.00	
Total Rebate Amount:	\$1,422.00	

The information contained herein is correct as at 28 Jul 2021

ОК

dp: 350/m 344855m/4/h

350441=14350

14h - 1422 = 12578

Bike model
Honda CB400 Super 4

Type Of Vehicle
Any

Price From
Any

Price To
Any

Class
Any

Class
Any

MORE SEARCH OPTIONS 

Q SEARCH ■ VIEW ALL (/LISTING/USEDBIKES/LISTING/)

Q SEARCH >

Honda CB400 Super 4 Revo (/listing/usedbike/honda-honda-cb400-super-4-revo/21593/)



(/listing/usedbike/honda-honda-cb400-super-4-revo/21593/)

### SGD\$11970

Reg: 19/09/2014 Type: Street Bikes

399cc 65320km

Used Honda CB400 Revo For Sale. Original Condition. COE Till 18 Sep 2024. Direct Owner Fully Paid. Bike Condition Is 8/10. Low Mileage. Accident Free. Replaced With Lithium Ion Lightweigh...

Posted on: 06/07/2021

★ PAID AD ★ DIRECT SELLER

DETAILS > (/LISTING/USEDBIKE/HONDA-HONDA-CB400-SUPER-4-REVO/21593/)

**■** COMPARE

Honda CB400 Super 4 Revo (/listing/usedbike/honda-honda-cb400-super-4-revo/21676/)





Used MotorCycles/Bikes For Sale in Singapore by Owners & Dealers - SGBikemart

(/listing/usedbike/honda-honda-cb400-super-4-revo/21676/)

## SGD\$10500

Reg: 25/02/2014 Type: Street Bikes

399cc 65000km

2014 February Honda CB400 Super 4 Revo Up For Sale. This Is My Daily Work Bike. Changed Engine Oil Filter Every 5K Servicing. Replacement Done In 2020: Front Brake Pads Upgraded Front Fork ...

Posted on: 15/07/2021

\* DIRECT SELLER

DETAILS > (/LISTING/USEDBIKE/HONDA-HONDA-CB400-SUPER-4-REVO/21676/)

**■** COMPARE

Honda CB400 Super 4 Revo (/listing/usedbike/honda-honda-cb400-super-4-revo/21438/)



(/listing/usedbike/honda-honda-cb400-super-4-revo/21438/)

# SGD\$11500

Reg: 02/07/2014 Type: Street Bikes

399cc 45100km

Fully Stock Honda CB400 Super 4 Revo. Low Mileage. Accident Free. Good Condition. Original Paint Work, But Faded. Speedometer Lcd Just Changed In June. Road Tax Till July 2022. Non Urgent Sa... Posted on: 27/06/2021

★ DIRECT SELLER

DETAILS > (/LISTING/USEDBIKE/HONDA-HONDA-CB400-SUPER-4-REVO/21438/)

**■** COMPARE

Honda CB400 Super 4 Revo (/listing/usedbike/honda-honda-cb400-super-4-revo/17821/)



(/listing/usedbike/honda-honda-cb400-super-4-revo/17821/)

Reg: 26/06/2014 Type: Street Bikes

399cc

Used Honda CB400 Revo For Sale. The Favo

Available. Guarantors Needed Subjected To Approval. Viewing At...

Posted on: 21/06/2021

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.

- Any false reporting may be referred to the Police for investigation.
   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 13/07/2021 19:19 (SGT) Date of Accident 12/07/2021 19:00 (SGT) Exact Location of Accident Singapore

Additional Location Information ALONG CLEMENTI AVENUE 3

Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number FBJ9198C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner GENERAL SRI GNANA VEL S/O RAMAHCHANDRAN NRIC No Email Address

general\_1996@hotmail.com Mobile Phone No (Phone) +65-93201296 Alternative Phone No +65-93201296

VEHICLE PARTICULARS

Manufacturer Honda Model Cb400sf

Variant Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Private use

No - Claiming third party

Motorcycle Manual 400

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage ThirdParty

Fleet Policy

Policy Number 5115430179-01 Cover Note Number

DRIVER

Name of Driver GENERAL SRI GNANA VEL S/O RAMAHCHANDRAN NRIC No S9609811A

Accident report SN07217D000Y

Date Of Birth 18/03/1996 Occupation Indoor Date Of Driving Pass 02/11/2017 Driving experience 3 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-93201296 Alt. Phone Number +65-93201296 Email Address general\_1996@hotmail.com Address BLK 4 DOVER ROAD #10-398 Address complement Postcode 130004 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 - Head to Rear Weather Conditions Raining 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 vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Dover Neighbourhood Police Post Police Station Phone No. (Phone) +65-18007788999 Alt. Police Station Phone No (Fax) +65-67762859 Police Station Address Blk 3 Dover Road #01-368 Singapore 130003 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Reasons for not uploading a video of the accident INFORM DRIVER TO EMAIL TO INCOME Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number SCG607C Vehicle Manufacturer Vehicle Model

Vehicle Variant Vehicle Colour

Vehicle Category	Private car
Name of Driver	KOH HWAI TONG
NRIC No	S1768852I
Contact Number	(Phone) +65-96503806
Address	-
Address complement	
Postcode	
Insurance Company Name	5
Nature Of Damage	
Details of property damaged in accident	-
	1
No. Of Passenger (Including Driver)	1

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Address	GENERAL SRI GNANA VEL S/O RAMAHCHANDRAN
Address Complement	-
Post Code	3
Approximate Age Years Old	25
Injuries Sustained	PAIN IN LOWER BACK, HIPS AND RIGHT LEG INJURY
Injured person in which vehicle?	FBJ9198C
Were seat belts worn?	No.
Was this injured conveyed to hospital by ambulance?	No

#### 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.
- 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 flability.
- 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.
- 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)

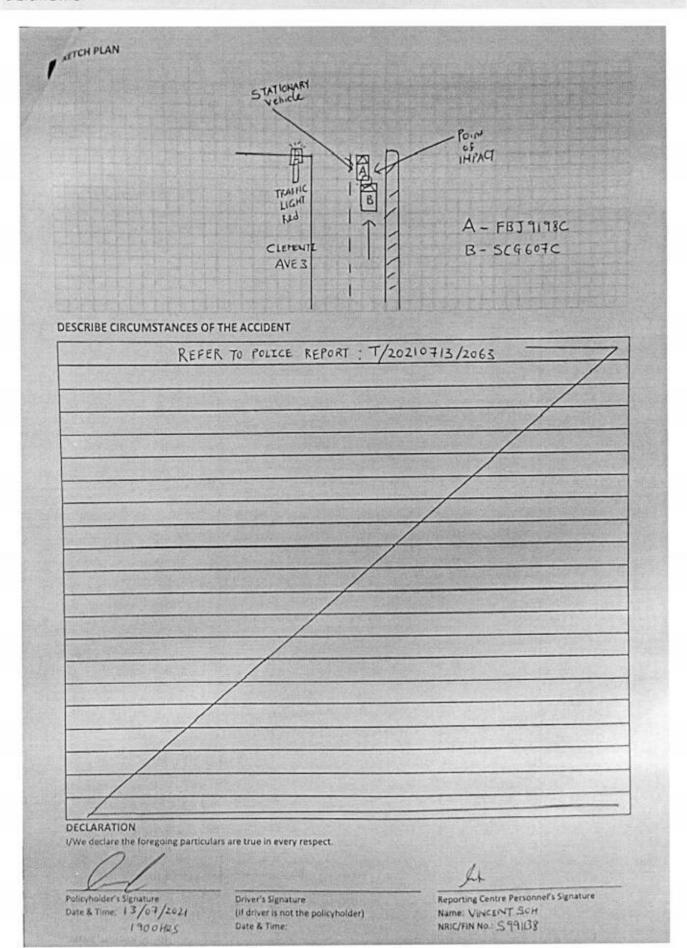
I understand, acknowledge, agree and consent that:

- (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' (awyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
  - 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: 15/07/2021

13/07/2024 1700HRS Driver's Signature (If driver is not the policyholder) Date & Time; Reporting Centre Personnel's Signature

Name: VINCENT SOH NRIC/FIN NO: 599139







Police Station Of Origin: Dover NPP

3 Dover Road #01-368 SINGAPORE 130003 Tel No: 1800-7788999

1 of 3 Report No. T/20210713/2063

REPORT O	F A TRAFFIC	ACCIDENT					
Date/Tim 13/07/20	e Report M 21 13:29	lade:	Vide Report No.: Station Diary No. 10				
Informar	nt's Particu	lars					
Name of Informant: GENERAL SRI GNANA VEL S/O RAMAHCHANDRAN			Address: APT BLK 4 DOVER ROAD #10-398 SINGAPORE 130004				
ID Type / ID No.: NRIC NO / S9609811A			Contact No.: Home/Office: Mobile: 93201296				
National	ity: ORE CITIZ	EN	Email:				
Sex: Male	Age: 25	Date of Birth: 18/03/1996	Type of Informant: Rider				
Race:			Language: English	Institution / School Name:			
Occupa Regular	tion: SAF Office	ır	Driving Licence Informat Class: 2B,2A,2	ion: Date of Expiry:			

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/07/2021 19:00	Type of Location T-Junction	
	ALTH AVENUE WE	Road Surface:	l F	Road Speed Limit:	
Weather:		14/-4		Road Speed Limit.	
Raining		Wet			
		Traffic Control: Traffic Light - Wo	40 PAGE 18 CO.	raffic Volume:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBJ9198C	Motorcycle	HONDA	CB400 SF M	Red	Slightly Damaged	0
SCG607C	Car					0

Details of V	ehicle Insurance			
	Insurance Company	Insurance No	Effective	Expiry Date
FBJ9198C	NTUC Income Insurance Co-Operative	5115430179-01	16/06/2021	15/06/2022



T/20210713/2063

Police Station Of Origin: Dover NPP 3 Dover Road #01-368 SINGAPORE 130003 Tel No: 1800-7788999

Report No. T/20210713/2063

CONTINUATION OF REPORT

Any Pedestrian Ir	volved: No				
No. of Pedestrian	s Injured: NIL	Use of Pedestrian Crossing: NA			
Rider					
Name	GENERAL SRI GNANA VEL S/C RAMAHCHANDRAN		ID No.		S9609811A
Related Vehicle	FBJ9198C (Motorcycle)	Contact No.		93201296	
Hospital/Clinic	NATIONAL UNIVERSITY HOSP	ITAL	Class of Driving Licence & Expiry Date		Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	12/07/2021		scharge		
No. of Days gran	ted Medical Leave 05	Degree	of Injury	Sligh	
Driver		THE NAME OF		10142	SHOW THE PERSON
Name	KOH HWAI TONG		ID No	•	S1768852I
Related Vehicle	SCG607C (Car)		Contact No.		96503806
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		scharge	NIL	MENANTE AND
PARTY IN CONTRACTOR IN	ited Medical Leave NIL	Danson	of Injury	NIL	

On the 12/07/2021 @ 1859, while I was riding the said motorcycle along clementi ave 3, junction of C'wealth Ave West, at said traffic junction, on the right side of the two lanes, and suddenly the said vehicle moving towards my motorcycle and did not stop at all and collided onto the rear of my motorcycle. Due to the accident, I sustained injuries, pain on my lower back hips and right ankle.



# SINGAPORE POLICE FORCE



Police Station Of Origin:
Dover NPP
3 Dover Road #01-368 SINGAPORE 130003
Tel No: 1800-7788999 CONTINUATION OF REPORT

3 of 3 Report No. T/20210713/2063

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 Office	er Recording The R	epoft:
D / Staff Sgt YIP KUM		
Signature Of Inter	preter:	
Not applicable		
Officer In Charge	Of Case:	
Officer In Charge TP / AEIT /	ZAYID MUHAMM	AD B

SIGNATURE

Signature Of Informant:	
and	
Date/Time:	
13/07/2021 13:29	
Classification Of Case:	