

From: _____ Date: 13/9/2021
 Estimated Cost: _____
 OD / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FB 5027C
 at Workshop m/s MS Cars
 of 8 Kaki Bt Ave 4 Premier 01-07
 Insured: SHD 6355X
 Policy No. _____
 Claims No. TAX/05/21/2067
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

 Bal. or Market Value: 11,000/2
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: 4 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS WP
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: FB 5027C Yr Regn: 17/10/2019
 Type: M.Car / Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Honda Adv 150 ABS c.c. 149
 Colour: Red A/C: Insured / Std / NI / NA
 Sp. Reading: 10198 T/Radio: Insured / Std / NI / NA
 Eng/No: KF61E1605295
 C/No: MH1K6113K K004806
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Order / Jammed / Leaked / Burnt or _____
 Brake: Order / Jammed / Leaked / Burnt or _____
 Modi: Nil / Rim / STD A/Rim or _____
 Tyre Size: F: 110/80/14
 R: 130/70/13
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or FT 297
 Front _____ Rear _____
 R/Bal. 7 mm R/Bal. 7 mm
 L/Bal. — mm L/Bal. — mm
 D.O.A. 13/5/2021 D.O.I. 13/9/2021
 Survey held at MS Cars
 Des. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Range <u>3,000/2 - 4,000/2</u> 4 repair days
	Survey photos taken on Mon 13/9/2021 @ 2:14:16 PM
	Resurvey photos taken on Thu 16/9/2021 @ 3:29:00 PM
4/10/2021	Submit PRS.
	MV <u>11,000/2</u> ✓
	PV <u>3,053/2</u>
	NV <u>7,247/2</u>

Date/Time, File Pass to? : Preli. Report
 1) **4/10 TYPIST** : Final Report
 Date/Time, File Return to?
 2) _____
 Rep. Format: TP
 Lump Sum / L.O.I. (S) _____

Days Of Repair: 4
 Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____) _____ S + RS. \$
 : Interview (\$ _____) Photos
 : Tech. Invs (\$ _____) Others
 : Weekend (\$ _____) _____

Survey Fee:
Transportation:
_____ S + RS. \$
Photos
Others
TOTAL

TGUM
3/10/2021

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	330G
Vehicle Details	
Vehicle No.:	FBQ5027C
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Oct 2021
Vehicle Make:	HONDA
Vehicle Model:	ADV150 ABS CVT
Primary Colour:	Red
Manufacturing Year:	2019
Engine No.:	KF61E1005295
Chassis No.:	MH1KF6113KK004806
Maximum Power Output:	-
Open Market Value:	\$3,650.00
Original Registration Date:	17 Oct 2019
First Registration Date:	17 Oct 2019
Transfer Count:	1
Actual ARF Paid:	\$548.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	16 Oct 2029
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$3,800.00
COE Rebate Amount:	\$3,053.00
Total Rebate Amount:	\$3,053.00

The information contained herein is correct as at 03 Oct 2021

OK

MV 11,000/2
PV 3,053/2
NV 7,947/2

Return Value
3/10/2021

Brand	Honda
Model	Honda Adv 150
Engine Capacity	149cc
Classification	Class 2B
Registration Date	31/12/2019
COE Expiry Date	30/12/2029 (8 years 2 months left)
Mileage	42000km
No. of owners	1
Type of Vehicle	Scooters
	SGD \$12888

Pre Loved 2019 Honda Adv 150 For Sale.

→You Must Choose Us Not Another←

Read more ▾

Similar Bikes

View More



01/10/2021

Used Bike

★Speedway Motor Pte ...
Honda Adv 150
COE High Thinking Of Buying A...

\$14800

♡ 0



01/10/2021

Used Bike

★Soon Hin Motors Pte...
Honda Adv 150
Pre Own Honda ADV150 For Sale...

\$12800

♡ 0

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	14/05/2021 13:58 (SGT)
Date of Accident	13/05/2021 20:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 6 BLK 712 NTUC CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ5027C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LONG HIN BOON
NRIC No	SXXXX330G
Email Address	hinboon@hotmail.com
Mobile Phone No	(Phone) +65-98628054
Alternative Phone No	+65-98628054

VEHICLE PARTICULARS

Manufacturer	Honda
Model	ADV
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 - Reporting only
Vehicle Category	Motorcycle
Transmission	Auto
CC	150

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5113449063-01 (TPFT)
Cover Note Number	-

DRIVER

Name of Driver	LONG HIN BOON
NRIC No	SXXXX330G

Date Of Birth	24/09/1952
Occupation	Outdoor
Date Of Driving Pass	12/09/1980
Driving experience	40 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98623154
Alt. Phone Number	+65-98628054
Email Address	hinboon@hotmail.com
Address	BLK 167 #06-210 BISHAN STREET 13
Address complement	-
Postcode	570167
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	2
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	Bishan Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005529999
Alt. Police Station Phone No	(Fax) +65-65561905
Police Station Address	20 Bishan Street 23 Singapore 579757
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO. T/20210513/2072 ATTACHED.

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	UNKNOWN
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) -

SKETCH PLAN

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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.
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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.

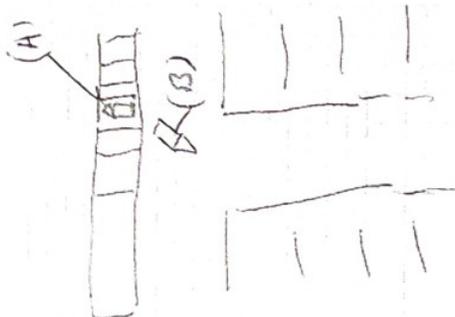
14 MAY 2021

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



NTUC
Corporate
Bike 712

A - FB@ 5027C

B - Taxi

