

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS

CC6/C7121013149/4753

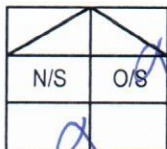
Ury3

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: FBL/600A  
at Workshop m/s: BMH  
of \_\_\_\_\_  
Insured: SJA 7200K  
Policy No. DMPCSNW00077882101  
Claims No. SNM21C207532/C02/IRENE  
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: 512K  
IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No  
GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No  
Est. Repairs: 3 days Res.: Yes or No  
Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: LTA 82828

Vehicle: IN/OUT

Veh No: FBL/600A Yr Regn: 23/6/16  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or \_\_\_\_\_  
Make: Honda CB400SF.c.c 399  
Colour: Grey/Red A/C: Insured / Std / NI / NA  
Sp. Reading: 78645 T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: NC 421800215  
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: 120-60ZR17  
R: 160-60ZR17  
☒ BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or \_\_\_\_\_  
Front 6 mm Rear 6 mm  
R/Bal. 6 mm L/Bal. 6 mm  
L/Bal. 6 mm D.O.A. 21/12/21 D.O.I. 27/12/21  
Survey held at \_\_\_\_\_  
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or \_\_\_\_\_  
Rear / O/S Body  
The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time Action/Instruction Rep 2500

14/1/22 informed Raymond 4/5 8760 (red 322, 29%)

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: 3

1)

☐ : Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2) 17/1/22-typist

Add Fee: ☐ : Site Insp (\$

Survey Fee:

Transportation:

Photos

Others

Report Format: Merimen

Lump Sum H.B.t: (\$ 760)

☐ : Weekend (\$

TOTAL

> **Back to OneMotoring****Enquire PARF/COE Rebate for Registered Vehicle**

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	366C
<b>Vehicle Details</b>	
Vehicle No.:	FBL1600A
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Dec 2021
Vehicle Make:	HONDA
Vehicle Model:	CB400SF
Primary Colour:	Red
Manufacturing Year:	2016
Engine No.:	NC42E1205381
Chassis No.:	NC421800215
Maximum Power Output:	-
Open Market Value:	\$8,359.00
Original Registration Date:	23 Jun 2016
First Registration Date:	23 Jun 2016
Transfer Count:	1
Actual ARF Paid:	\$1,254.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	22 Jun 2026
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,302.00
COE Rebate Amount:	\$2,828.00
<b>Total Rebate Amount:</b>	<b>\$2,828.00</b>

The information contained herein is correct as at 27 Dec 2021

OK

## Vehicle Details

Vehicle No.	Make / Model
<b>FBL1600A</b>	<b>HONDA / CB400SF</b>
Vehicle Type :	Vehicle Attachment 1 :
<b>P00 - Passenger Motorcycle/Autocycle /Moped</b>	<b>No Attachment</b>
Vehicle Scheme :	Chassis No. :
<b>Normal</b>	<b>NC421800215</b>
Propellant :	Engine No. :
<b>Petrol</b>	<b>NC42E1205381</b>
Motor No. :	Engine Capacity :
-	<b>399 cc</b>
Power Rating :	Maximum Power Output :
-	-
Maximum Laden Weight :	Unladen Weight :
<b>300 kg</b>	<b>190 kg</b>
Year Of Manufacture :	Original Registration Date :
<b>2016</b>	<b>23 Jun 2016</b>
Lifespan Expiry Date :	COE Category :
-	<b>D - Motorcycle</b>
Quota Premium :	COE Expiry Date :
<b>\$6,302.00</b>	<b>22 Jun 2026</b>
Road Tax Expiry Date :	PARF Eligibility Expiry Date :
<b>22 Jun 2022</b>	-
Inspection Due Date :	Intended Transfer Date :
<b>22 Jun 2022</b>	<b>27 Dec 2021</b>
CO2 Emission :	CEV/VES Rebate Utilised Amount :
-	-
CO Emission :	HC Emission :



Bike model	Type Of Vehicle	Price From	Price To	Class	Search
<input type="text"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	

[More Search Options](#)

## SELLER INFORMATION



Recommended Dealer

**Company:** Wing Fuat Pte Ltd  
View all used bikes (40)  
View all new bikes (12)

**Address:** Blk 53 Sims Place, #01-164, S(380053)

**Phone:** 67425588

**Fax:** 67425587

Name	Contact
Mr Ng	+65 6742... <a href="#">Click to view</a>

## Forms To Download

Agreement Form	Handing Over Form
Deposit Receipt	Final Receipt
Private Settlement Form	



1	Honda CB400 Super 4 Revo	
	Listing Type	Paid Ad
	Brand	Honda
	Model	Honda CB400 Super 4 Revo
	Engine Capacity	399cc
	Classification	Class 2A
	Registration Date	05/01/2016
	COE Expiry Date	04/01/2026 (4 years left)
	Mileage	-
2	No. of owners	-
	Type of Vehicle	Street Bikes
	SGD \$15500	

3



Bike model	Type Of Vehicle	Price From	Price To	Class	Search
<input type="text"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	

[More Search Options](#)



# IDEAL MOTORING

## SELLER INFORMATION


**IDEAL  
MOTORING**

Recommended Dealer

**Company:** Ideal Motoring  
View all used bikes (33)

**Address:** 5 Kaki Bukit Road 1,  
#01-03, Eunus  
Technolink S(415936)

**Phone:** 67469686

**Fax:** 67461629

Name	Contact
Anthony Tan	+65 9755... <a href="#">Click to view</a>
Ryan Lee	+65 9850... <a href="#">Click to view</a>

Please Login to Chat

## Forms To Download

Agreement Form	Handing Over Form
Deposit Receipt	Final Receipt
Private Settlement Form	

1	Honda CB400 Super 4 Revo	
	Listing Type	Paid Ad
	Brand	Honda
	Model	Honda CB400 Super 4 Revo
	Engine Capacity	399cc
	Classification	Class 2A
	Registration Date	23/04/2016
	COE Expiry Date	22/04/2026 (4 years 3 months left)
	Mileage	90200km
	No. of owners	3
2	Type of Vehicle	Street Bikes
	SGD \$13800	

3

## 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 ..... 22/12/2021 17:33 (SGT)  
Date of Accident ..... 21/12/2021 21:15 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Lorong ah Soo filtering towards upper payar lebar  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... FBL1600A

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LOW JUNG JECK  
NRIC No ..... SXXXX366C  
Email Address ..... Jecknsophia@gmail.com  
Mobile Phone No ..... (Phone) +65-98500316  
Alternative Phone No ..... +65-98500316

#### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Cb400sf  
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 ..... Auto  
CC ..... 400

#### INSURANCE COMPANY

Name of Insurance Company ..... FWD Singapore Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... PNMC2017-00000366-04  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... LOW JUNG JECK  
NRIC No ..... SXXXX366C

Date Of Birth .....	15/09/1978
Occupation .....	Indoor
Date Of Driving Pass .....	08/07/2008
Driving experience .....	13 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98500316
Alt. Phone Number .....	+65-98500316
Email Address .....	Jecknsophia@gmail.com
Address .....	109 Aljunied Crescent
Address complement .....	#04-78
Postcode .....	380109
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 .....	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? .....	Yes
Was any other vehicle 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 .....	Geylang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18008486999
Alt. Police Station Phone No .....	(Fax) +65-68486799
Police Station Address .....	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT NO, T/20211222/2016 LODGE AT GEYLANG NPC ON 21/12/2021 AT ABOUT 2115HRS, I WAS RIDING MY MOTORBIKE (FBL1600A) ALONG LORONG AH SOO TOWARDS UPP PAYA LEBAR ROAD. I THEN STOPPED MY MOTORBIKE AT THE GIVE WAY ROAD TO CHECK FOR ONCOMING TRAFFIC BEFORE PROCEEDING. SUBSEQUENTLY, ONE CAR SJQ7200K BUMPED INTO MY MOTORCYCLE ND I FELL DOWN FROM MY MOTORBIKE. THE MALE DRIVER OF THE SAID CAR DID NOT CHECK ON ME AND JUST MADE CHECK ON HIS CAR. THE SAID DRIVER ALSO DID NOT EXCHANGED PARTICULARS. I THEN CALLED TRAFFIC POLICE FOR ASSISTANCE. AMBULANCE WAS ALSO ACTIVATED BY THE TRAFFIC POLICE. I WAS THEN CONVEYED BY THE SAID AMBULANCE TO SENGKANG HOSPITAL. I SUSTAINED SOME BACK PAIN FROM THE SAID ACCIDENT. I WAS GIVEN 3 DAYS MC. THE TRAFFIC POLICE IO INFORMED ME TO LODGE A TRAFFIC ACCIDENT REPORT. ON 22/12/2021, I THEN CAME TO GEYLANG NPC TO LODGE A TRAFFIC ACCIDENT 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	SJQ7200K
Vehicle Manufacturer	Hyundai
Vehicle Model	Avante
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NA
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	LOW JUNG JECK
Gender	Male
Phone No	(Phone) +65-98500316
Address	109 Aljunied Crescent
Address Complement	#04-78
Post Code	380109
Approximate Age Years Old	-
Injuries Sustained	SUSTAINED SOME BACK PAIN
Injured person in which vehicle?	FBL1600A
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 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 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.

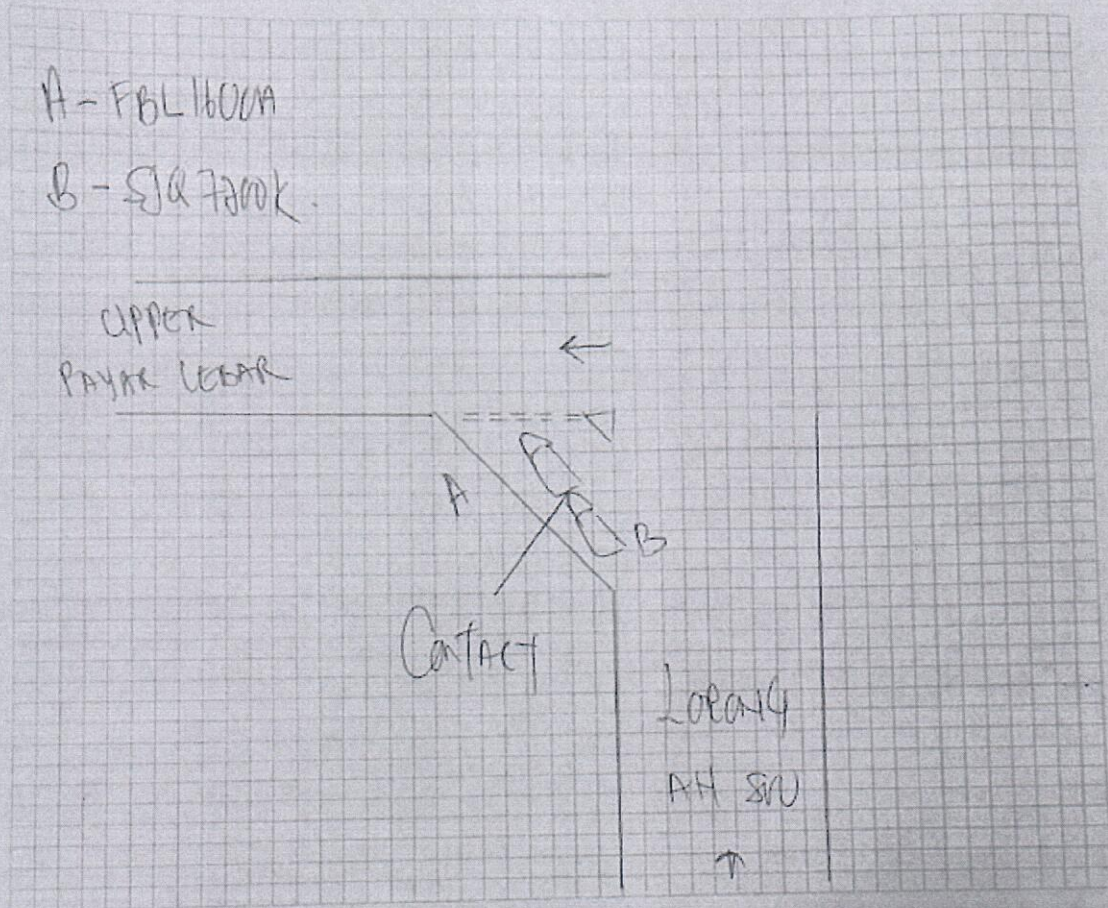
  
 Policyholder's Signature  
 Date & Time:

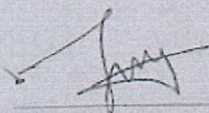
\_\_\_\_\_  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

**VERIFY BY AJAX MARS (ARC)**  
**REPORTING OFFICER**  
**MOHAMED SHARIL BIN SATAR**  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

ACCIDENT DIAGRAM

Ver. 30042021





Policyholder's Signature  
Date & Time:

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

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

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

SKETCH PLAN


REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As police report

DECLARATION

I/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:

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

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

LAJAT 10/10/2014 10:10:10



**SINGAPORE  
POLICE FORCE**



T/20211222/2016

1 of 3

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

Report No. T/20211222/2016

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made 22/12/2021 10.10		Vide Report No.		Station Diary No.: 10	
<b>Informant's Particulars</b>					
Name of Informant: LOW JUNG JECK			Address: APT BLK 109 ALJUNIED CRESCENT #04-78 SINGAPORE 380109		
ID Type / ID No.: NRIC NO / S7865366C			Contact No.: Home/Office:		Mobile: 98500318
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 43	Date of Birth: 15/09/1978	Type of Informant: Rider		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: LORRY CRANE OPERATOR		Driving Licence Information: Class: 2B,2A,3,4,5		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 21/12/2021 21.15	Type of Location: Straight Road
Location:  LORONG AH SOO				
Weather: Clear		Road Surface: Dry		Road Speed Limit
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL1600A	Motorcycle	HONDA	CB400SF	Red	Slightly Damaged	0
SJQ7200K	Car				No Damage	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBL1600A	FWD Singapore Pte. Ltd	PNMC2017- 00000366-04	24/06/2021	23/06/2022



**SINGAPORE  
POLICE FORCE**



T/20211222/2016

2 of 3

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

Report No: T/20211222/2016

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	LOW JUNG JECK	ID No.	S7865366C
Related Vehicle	NIL	Contact No.	98500316
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 2B 2A, 3, 4, 5 Date of Expiry: NIL
Date Treatment	21/12/2021	Date Discharge	21/12/2021
No. of Days granted Medical Leave	03	Degree of Injury	NIL

**Brief Details.**

On 21/12/2021 at about 2115hrs, I was riding my motorbike (FBL1600A) along Lorong Ah Soo towards Upp Paya Lebar Road. I then stopped my motorbike at the give way road to check for oncoming traffic before proceeding. Subsequently, one car (SJQ7200K) bumped into my motorbike and I fell down from my motorbike.

The male driver of the said car did not check on me and just made a check on his car. The said driver also did not exchange particulars. I then called traffic police for assistance. Ambulance was also activated by the traffic police. I was then conveyed by the said ambulance to Sengkang Hospital. I sustained some back pain from the said accident.

I was given 3 days MC. The traffic police IO informed me to lodge a traffic accident report.

On 22/12/2021, I then came to Geylang NPC to lodge a traffic accident report.



# SINGAPORE POLICE FORCE

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999



T/20211222/2016

3 of 3

Report No. T/20211222/2016

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

G /  
Sgt 2 MUHAMMAD AFIQ BIN  
MOHAMED KHAIRANI

Signature Of Informant

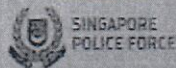
Signature Of Interpreter:  
Not applicable

Date/Time:  
22/12/2021 10:10

Officer In Charge Of Case:  
TP / GIT /  
Sgt 2 DAVID YAP  
Contact No.: 65476138

Classification Of Case:

Authentication Stamp  
NP168



SIGNATURE



**BAN HOCK HIN**  
Co., Pte Ltd

Co.Reg.No: 197000288K  
MOTORCYCLE ACCESSORIES | SERVICE CENTRE  
MODIFICATIONS | SPRAY PAINTING AND BODY WORK | METAL  
WORKS | LEASING & RENTALS | FLEET SALES | INSURANCE SALES

## QUOTATION

Customer :

NO. : 39762

CHINA TAIPING INSURANCE (S) PTE LTD  
105 CECIL STREET  
#18-00 / 19-00  
THE OCTAGON  
S'PORE 069534  
ATTN: MOTOR CLAIMS DEPT

DATE : 23/12/2021  
CLAIM NO. : 11842  
POLICY NO. :

FROM : RAYMOND

VEHICLE NO. : FBL1600A  
MAKE/MODEL : HON / CB400SF

*Not Authorised*  
*2/5 \$760*  
*3 days*  
*Take photo after repair*  
*27/12/21*

(Page 1 of 2)

S/N	Description	Action	Qty	Unit Price	Amount
1	BOLT FOOTREST P/N: 47034 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$10.00	10.00
2	BOX REAR (GIVI) E450N BLACK W/O STOP LIGHT P/N: 27220 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$230.00	230.00
3	CRASH BAR (ENGINE) P/N: 49567 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$196.00	196.00
4	LABOUR P/N: 06766 - LABOUR QUOTED FOR DISMANTLING AND INSTALLATION OF PARTS.	Supply/Install	4.00	\$63.00	252.00
5	LEVER BRAKE P/N: 18930 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$70.00	70.00
6	MIRROR RH P/N: 53470 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$126.00	126.00
7	MUDGUARD REAR ASSY - (REPORTED BY MECHANIC)	REPLACE	1.00	\$160.00	160.00
8	MUFFLER (REAR) YOSHIMURA - (REPORTED BY MECHANIC)	REPLACE	1.00	\$0.00	0.00
9	PLATE NUMBER REAR ACRYLIC(YELLOW) P/N: 50935 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$38.00	38.00

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<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
		SUB TOTAL			\$1,082.00
		GST @ 7 %			\$75.74
		GRAND TOTAL (SGD)			\$1,157.74

50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD

Acknowledge & Accepted By



RAYMOND

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.

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:

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102  
712-8  
952-8  
780

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