ASS. REC. BY: MCVCLS	ASSIGNMENT
From: Date:	Veh No: 1-3M 827 P Tyr Regn: 23/4/x 8
Estimated Cost:	Type: M.Car (M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: FSM £2787	Make: Howe NC750 XAC 745
at Workshop m/s 7es Sim	Colour Shue A/C: Insured / Std / NI / NA
of	Sp.Reading 20386 T/Radio: Insured / Std / NI / NA
Insured: 63 k 3289 H	Eng/No:
Policy No. DMCVSNA00069252101	C/No: JH2RC 90AXJK*201462
Claims No. SNM22D200015/C02/TANKL	Gen. Cond; Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh:	Modi: Nil /S/Rim./ STD A/Rim or
IVIANG OI VEII.	12/1/2022
	Tyre Size: F:
(Policy Condition)	R: 16016011
Remark: The veh had commenced its repair at the time of inspection.	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO / YOKO or
Bal. or Market Value: \$16 \mathcal{k}.	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. mm L/Bal. mm
Est. Repairs: 2 days Res.: Yes or No	D.O.A. 3/12/ D.O.I. 6/1/22
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS 2036	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN	NOUT Rear 10 (5 Body
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction LYA # 450	90
Dez 2600	
1/00 1/2 = 200	(Red 773, 28%)
1/N 1/5 \$ 2000 inform	(Ned 173, 2070)
,	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 2
1) : Final Report	Resurvey No. of Trip: 1 Survey Fee:
Date/Time, File Return to?	Transportation:
₂₎ 10/1/22-typist Ad	d Fee: : Site Insp (\$)s+Rs,si
	: Interview (\$) Photos
Report Format: Merimen	: Tech. Invs (\$) Others

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	203G	
Vehicle No.:	FBM8279T	
Vehicle to be Exported:	No	
Intended Deregistration Date:	06 Jan 2022	
Vehicle Make:	HONDA	
Vehicle Model:	NC750XA	
Primary Colour:	Blue	
Manufacturing Year:	2018	
Engine No.:	RC88E5101562	
Chassis No.:	JH2RC90AXJK201462	
Maximum Power Output:	-	
Open Market Value:	\$7,197.00	
Original Registration Date:	23 Apr 2018	
First Registration Date:	23 Apr 2018	
Transfer Count:	3	ė.
Actual ARF Paid: Intended PARF Rebate Details	\$1,849.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	-	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	22 Apr 2028	
COE Category:	D - Motorcycle	
COE Period(Years):	10	
QP Paid:	\$7,114.00	
COE Rebate Amount:	\$4,500.00	
Total Rebate Amount:	\$4,500.00	

The information contained herein is correct as at 06 Jan 2022



Honda NC750X

Reg Date

13/11/2018

Vehicle Type

Posted on: 26/11/2021

Sport Tourers

Capacity

745cc

Mileage

14642km

SGD \$16000

Details >

Details >

Direct Seller



Honda NC750XD

Reg Date Vehicle Type

Posted on: 23/11/2021

29/08/2017 / **Sport Tourers**

Capacity

745cc

Mileage

44000km

SGD \$15000

Direct Seller



Honda NC750XD

Reg Date Vehicle Type 15/05/2017

Sport Tourers

Capacity

745cc

Mileage

64000km

SGD \$18000

Posted on: 18/11/2021

Direct Seller

Details >



Honda NC750XA

Reg Date Vehicle Type

09/01/2015

Capacity

745cc

Sport Tourers

Mileage

97155km

SGD \$8500

Posted on: 17/11/2021

Direct Seller

Details >

SN0722130013 / NTUC Income Insurance Co-operative Ltd ENTRY DATE & TIME: 03/01/2022 15:01 (SGT) SUBMITTED BY: Louis Lim VERSION: 1 (03/01/2022 15:01 (SGT))



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 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.

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

03/01/2022 15:01 (SGT) 31/12/2021 11:30 (SGT) Singapore 530 BEDOK NORTH STREET 3 OSCP LOT 241 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

FBM8279T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No

MUHAMMAD FIRDAUS BIN SELAMAT S8111203G DAUSSELAMAT81@HOTMAIL.COM (Phone) +65-96566895 +65-96566895

VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Model Variant

Honda NC750X

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

Private use No - Claiming third party

Motorcycle Manual 750

INSURANCE COMPANY

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

NTUC Income Insurance Co-operative Ltd ThirdPartyFireTheft No 5124394944

DRIVER

Name of Driver NRIC No

MUHAMMAD FIRDAUS BIN SELAMAT S8111203G



Date Of Birth Occupation

Date Of Driving Pass

Driving experience

Gender

Mobile Number Alt. Phone Number

Email Address

Address

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

Address complement

460530 Yes

19/04/1981

07/05/2012

+65-96566895

9 YEARS AND 7 MONTHS

DAUSSELAMAT81@HOTMAIL.COM

BLK 530 #11-640 BEDOK NORTH STREET 3

(Phone) +65-96566895

Indoor

Male

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collided into Parked Vehicle

Raining Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

4

No

Yes

0

No

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

No

CIRCUMSTANCES OF ACCIDENT

VEHICLE D CAME OUT FROM CARPARK LOT AND COLLIDED ONTO REAR BOX OF VEHICLE A. VEHICLE A WAS THEN FALLED DOWN AND COLLIDED ONTO VEHICLE B. SUBSEQUENTLY, VEHICLE B FALLED DOWN AND COLLIDED ONTO RIGHT OF VEHICLE C.

ATTACHMENT(S)

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

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Was there any audio recorded?

Vehicle Manufacturer Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver NRIC No

GBK3289H

Commercial vehicle

TAN YI JIE T0124916E

Contact Number	(Phone) +65-82439398
Address	-
Address complement	y -
Postcode	140
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	FBP8584X -
Vehicle Variant	9
Vehicle Colour	
Vehicle Category	Motorcycle
Name of Driver	QUEH YI
NRIC No	S9524521H
Contact Number	(Phone) +65-98627373
Address	-
Address complement	
Postcode	
Insurance Company Name	_
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	_
Vehicle Variant	
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	QUEH YI
NRIC No	S9524521H
Contact Number	(Phone) +65-98627373
Address	-
Address complement	_
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

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 liability.
- 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.
- 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)

l 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)
 - (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
- (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
- 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: 03/01/2022 14:30

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

Name: Louis Lim

NRIC/FIN No.: \$994220

Reporting Centre Personnel's Signature

SKETCH PLAN

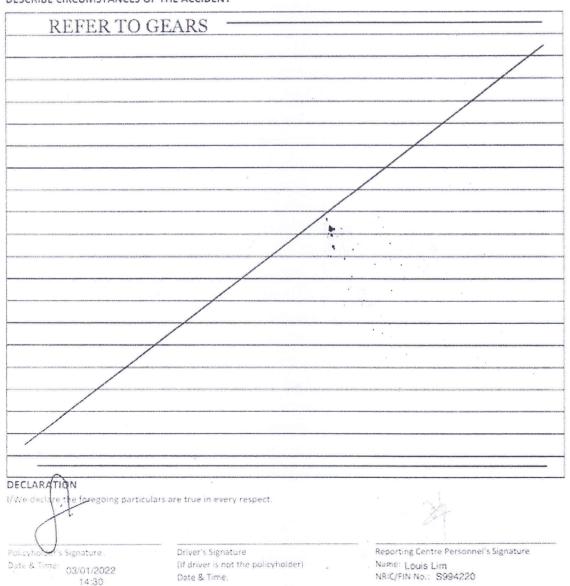
A: FBM8279T

B: FBP8584X

C: UNKNOWN

D: GBK3289H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT





3 Anson Road

Singapore 079909

Tel: 6389 6111

Fax:6222 1033

#16-00 Springleaf Tower

China Taiping Insurance (S,pore) Pte Ltd.

(INCORPORATED IN THE REPUBLIC OF SINGAPORE)
Reg. Address: BLOCK 6, DEFU LANE 10, DEFU INDUSTRIAL PARK C, #01-558

SINGAPORE 539187 TEL: 6283 5474 (2 LINES) FAX: 6287 2012 REG. NO. 275084 700X 10 Consultant hence no

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:

04.01.2022

Dear Sir/Madam

RE: THIRD PARTY CLAIMS FOR FBM8279T AGAINST YOUR INSURED GBK3289H , ACCIDENT ON 31.12.2021 AT 530 BEDOK NORTH STREET 3 OSCP LOT 241

AMOUNT DESCRIPTION 260 280.00 1 HANDLE BAR 120.00 2 SIDE MIRROR RH 780.00 ~ 3 EXHAUST 120.00 4 EXHAUST PROTECTOR 480.00 5 CRASH BAR 140.00 4 6 BRAKE PANNEL 250.00 ... 7 HAND GUARD 380:00 8 WIND SHIELD \$ 2,550.00 255.00 Less 10% 2,295.00 Sub Total Nett Item Ner 5 48.00 /12 1 NUMBER PLATE 180.00 (u)\$ 2 TOP BOX 250.00 3 LABOUR CHARGES 478.00 Sub Total t Anthony bler vocas 6/1/22 After 122° Lys. A/3 \$2000 2,773.00 TOTAL Thanks TSP