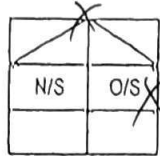


REC BY: Thiran

CS3/ASm22000933/Vty3

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop n/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 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: 13.5k
 IDAC Accident Report: _____ 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
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Veh No: FBK2803E Yr Rogn: 5/6 11/5
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Honda CB400SF C.C. 400 399
 Colour: black A/C: _____ Insured / Std / NI / NA
 Sp. Reading: Not avail T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: NC421603264
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Mod: Nil / S/Rlm / STD A/Rlm or
 Tyre Size: F: 120w/60-70
 R: 120/60-70
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or TimSun
 Front R/Bal. 6 mm Rear R/Bal. 6 mm
 L/Bal. _____ mm L/Bal. _____ mm
 D.O.A. 18/1/22 D.O.I. 27/1/22 1100
 Survey held at motoplex
 Des. of Damages: Frt / Rear / O/S / NIS / UIC / Roof/tp or
Frt and o/s
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>my: 13.5k</u>
	<u>rebate: 2237</u>
	<u>rv: 11263</u>
	<u>rr: 1.5k-2k</u>

SUBMIT PRS REPORT

Date/Time File Pass to? ☐ : Prelim. Report
☐ : Final Report
 Date/Time File Return to? _____

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

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : V/Sel and (\$)

Survey Fee:	
Transportation:	
_____ S + RS. _____ \$	
Fuel/tyres	
Others	
TOTAL	

Request Features:
 Date/Time File Return to?

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	920E
Vehicle Details	
Vehicle No.:	FBK2803E
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Feb 2022
Vehicle Make:	HONDA
Vehicle Model:	CB400SF MANUAL
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	NC42E1203270
Chassis No.:	NC421603264
Maximum Power Output:	-
Open Market Value:	\$7,067.00
Original Registration Date:	05 Jun 2015
First Registration Date:	05 Jun 2015
Transfer Count:	3
Actual ARF Paid:	\$1,061.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	04 Jun 2025
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,501.00
COE Rebate Amount:	\$2,237.00
Total Rebate Amount:	\$2,237.00

The information contained herein is correct as at 07 Feb 2022

OK

dp: 330/m

3yrs 5/41

$330 \times 41 = 13530$

$= 13.5k$

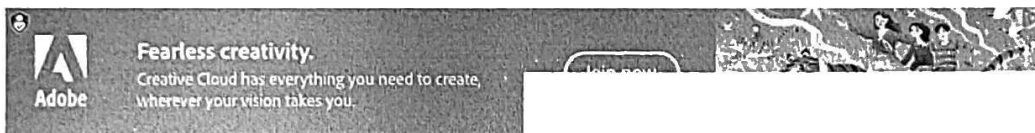
$13.5k - 2237$

$= 11263$

Brand	Honda
Model	Honda CB400 Super 4 Revo
Engine Capacity	399cc
Classification	Class 2A
Registration Date	05/06/2015
COE Expiry Date	04/06/2025 (3 years 3 months left)
Mileage	-
No. of owners	-
Type of Vehicle	Street Bikes

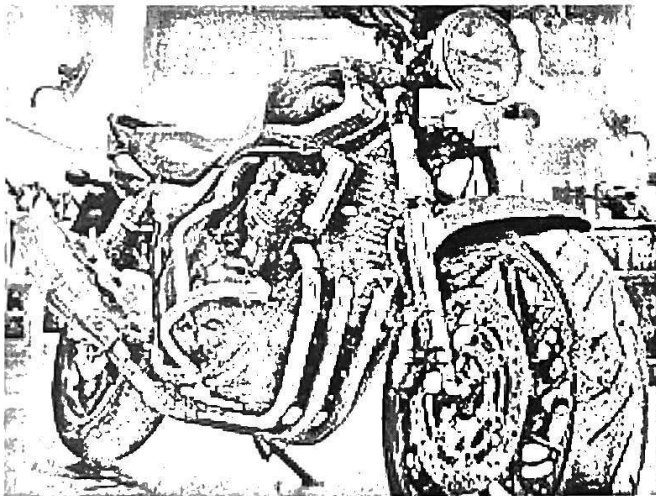
SGD \$13800

Honda CB400 Super 4 Revo For Sale.
 Interested Parties Are Welcome To Neg.
 Trade/Loan Available.
 Do Visit Us At Ming Funt @ Sims Plaza
 Read more 



Similar Bikes

View More



01/12/2021

Used Bike

★Speedway Motor Pte ...
 Honda CB400 Super 4...
 Used Honda CB400 Revo With Yo...

\$11800



08/12/2021

Used Bike

★Albert Motor Supply...
 Honda CB400 Super 4...
 2015 Honda CB400 Super 4 Revo...

\$12000





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	25/01/2022 15:53 (SGT)
Date of Accident	18/01/2022 19:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SERANGOON GARDEN WAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK2803E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ABDILLAH BIN IZWARDI
NRIC No	S9318920E
Email Address	ABDILLAHIZWARDI@GMAIL.COM
Mobile Phone No	(Phone) +65-96676790
Alternative Phone No	+65-96676790

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cb400
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	Manual
CC	400

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5118247783-01
Cover Note Number	17/07/2021 - 16/07/2022

DRIVER

Name of Driver	ABDILLAH BIN IZWARDI
NRIC No	S9318920E



Date Of Birth	03/06/1993
Occupation	Indoor
Date Of Driving Pass	13/04/2018
Driving experience	3 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96676790
Alt. Phone Number	+65-96676790
Email Address	ABDILLAHIZWARDI@GMAIL.COM
Address	BLK 530 SERANGOON NORTH AVE 4 #02-06
Address complement	-
Postcode	550530
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 - Major/Minor Rd
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	NORAI SYAH BINTE ABDUL RAZAK
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sengkang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003438999
Alt. Police Station Phone No	(Fax) +65-63438939
Police Station Address	2 Sengkang Square #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITNESS VIDEO
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD4233C
-----------------------------	----------

Vehicle Manufacturer	Hyundai
Vehicle Model	Ae ioniq
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ABDILLAH BIN IZWARDI
Gender	Male
Phone No	(Phone) +65-96676790
Address	BLK 530 SERANGOON NORTH AVE 4 #02-06
Address Complement	-
Post Code	550530
Approximate Age Years Old	-
Injuries Sustained	RIGHT BODY,HAND,LEG,HIP
Injured person in which vehicle?	FBK2803E
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	NORAISYAH BINTE ABDUL RAZAK
Gender	Female
Phone No	(Phone) +65-96390821
Address	BLK 530 SERANGOON NORTH AVE 4 #02-06
Address Complement	-
Post Code	550530
Approximate Age Years Old	-
Injuries Sustained	RIGHT BODY,HAND,LEG,HIP, LEFT ANKLE
Injured person in which vehicle?	FBK2803E
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

WITNESS DETAILS

WITNESS 1

Name	MOHAMED FEROZ SHAH BIN MOHAMED FAUD SHAH
Phone	(Phone) +65-98266767
Email	-

WITNESS 2

Name	HUANG YOUYI
Phone	(Phone) +65-98435637
Email	-

SKETCH PLAN

NHCC Income Motor Service Centre

Report No. MI _____

DO

18 (22)

Vehicle No

Make / Model

FBK2803C
HICBY00

Report Date: 25/1/2022 Start Time: 3:39 PM

Reporting Type

End Time

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 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 insurers 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 reasonable required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, law or court orders.

25/1/2022 15:37

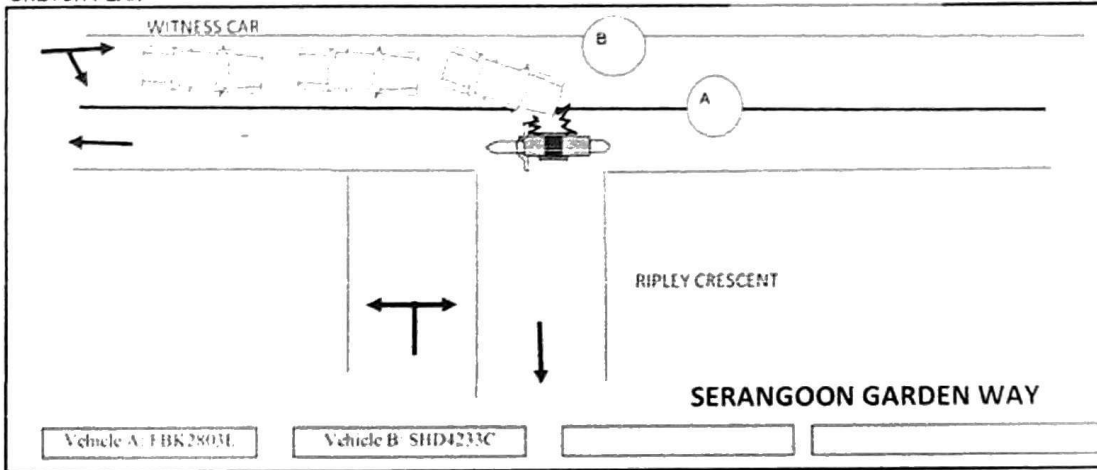
Policyholder's Signature
Date & Time

25/1/2022 15:37

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

Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC/ Fin No: S990765

SKETCH PLAN



REFER TO POLICE REPORT

DECLARATION

I/We declare the foregoing particulars are true in every respect.

25/1/2022 15:37

Policyholder's Signature
Date & Time:

25/1/2022 15:37

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

Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC/ Fin No: S990765


**SINGAPORE
POLICE FORCE**


T/20220119/2004

1 of 4

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20220119/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/01/2022 00:51	Vide Report No.:	Station Diary No.: 16
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Informant's Particulars

Name of Informant: ABDILLAH BIN IZWARDI	Address: APT BLK 530 SERANGOON NORTH AVENUE 4 #02-06 SINGAPORE 550530		
ID Type / ID No.: NRIC NO / S9318920E	Contact No.:	Mobile: 96676790	
Nationality: SINGAPORE CITIZEN	Email:	abdillahizwardi@gmail.com	
Sex: Male	Age: 28	Date of Birth: 03/06/1993	Type of Informant: Rider
Race: Javanese	Language: English	Institution / School Name:	
Occupation: TECHNICIAN	Driving Licence Information: Class:	Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 18/01/2022 19:20	Type of Location: Straight Road
Location: SERANGOON GARDEN WAY				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Heavy		
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBK2803E	Motorcycle	HONDA	CB400SF MANUAL	Black	Seriously Damaged	2
SHD4233C	Car	HYUNDAI	AE IONIQ HEV FL 1.6 DCT	Blue	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220119/2004

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 4

Report No. T/20220119/2004

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK2803E	NTUC Income Insurance Co-Operative Limited	5118247783-01	17/07/2021	16/07/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	ABDILLAH BIN IZWARDI	ID No.	S9318920E
Related Vehicle	FBK2803E (Motorcycle)	Contact No.	96676790
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 2B,2A Date of Expiry: NIL
Date Treatment	18/01/2022	Date Discharge	18/01/2022
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Pillion			
Name	NORAISYAH BINTE ABDUL RAZAK	ID No.	S9231444H
Related Vehicle	FBK2803E (Motorcycle)	Contact No.	96390821
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	18/01/2022	Date Discharge	18/01/2022
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 18/1/22 at about 1920hrs, I was riding (FBK2803E) along Serangoon Garden Way with my wife (NORAISYAH BINTE ABDUL RAZAK) as a pillion. Upon reaching a junction (Ripley Crescent), a Taxi (SHD4233C) who is coming from the opposite direction signalled and instantly turned into Ripley Crescent. He did not check for oncoming vehicle. He crashed into my Vehicle (FBK2803E) who was riding from the opposite direction. The taxi stopped, assisted my wife and I. Ambulance and Traffic Police came to the scene. My wife and I was conveyed to Sengkang General Hospital by the Ambulance and was given 5 days of MC.

I wish to state that I have a recording of the accident.