

ASS. REC. BY: Stere

REF:

CS/CT122001683/Ety 3

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: _____
at Workshop m/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.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S

Bel. or Market Value: _____
IDAC Accident Report: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: _____ days Res.: Yes or No
Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: FBL 8211T Yr Regn: 3/4/17
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Honda NC750XA c.c. _____
Colour: Black A/C: Insured / Std / NI / NA
Sp. Reading: N/A T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: JH2RC90 AXH K102778
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modi: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 120/55R17
R: 140/55R17
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
Front Rear
R/Bal. 4 mm R/Bal. 4 mm
L/Bal. _____ mm L/Bal. _____ mm
D.O.A. 8/1/77 D.O.I. 22/2/77
Survey held at Southern Motor
Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time Action/Instruction

MV-14K

Date/Time, File Pass to?

☐ : Prell. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Report Format: _____

Lump Sum / I.B.F. (\$) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS \$ _____

Photos

Others

TOTAL



南方摩哆

Southern Motor

Business Reg. No: 234147/00L

Block 1006, Bukit Merah Lane 2, #01-10, Singapore 159762

Tel: 6273-0369 (3 Lines) Fax: 6274-6614

21-Feb-22

China Taiping Insurance Singapore Pte Ltd

3 Anson Road #16-00

Springleaf Tower

Singapore (079909)

Dear Sirs,

Steve (LKK)
22/2/22, 10.11a

8322 8813

W R
4 L/S
H H H

RE: Cost of repair to Honda NC750X - FBL8211T

1pc of Front Sport Rim / BT	SS\$	1,350.00
1pc of Front Brake Disc X		280.00
1pc of Front Fork / BT		2,700.00
1pc of Front Mudguard / OR		285.00
1pc of Front HeadLamp / CUT		480.00
2Set of Centre Fairing RH/LH / CUT		1,600.00
1pc of Radiator / DO		1,200.00
1pc of Engine Guard / DO		450.00
1pc of Handle Bar / BT		230.00
1pc of Handle Guard / CUT		250.00
1pc of Rear Hepco & Becker Box / OR		850.00
1pc of Exhaust Pipe X R		880.00
1pc of Clutch Cable / TN		65.00
1pc of Clutch Cable Holder / BT		45.00
1pc of Lower Cowling RH / CUT		220.00
1pc of Horn / BT		25.00

10,910.00

Less 10%

1,091.00

Nett

9,819.00

Transport

40.00 / MC

LTA Fees

7.50 / MC

Alignment Body

350.00

Labour

350.00 250

\$10,566.50

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:

Yours Faithfully,
Southern Motor



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 21/01/2022 14:50 (SGT)
Date of Accident 08/01/2022 11:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information AYE TOWARDS CTE NEAR LAMP POST 458
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBL8211T
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner MUHAMMAD FERDAUS BIN ABDUL RAHIM
NRIC No S8219066Z
Email Address DAUS_MANJE@YAHOO.COM.SG
Mobile Phone No (Phone) +65-90012694
Alternative Phone No +65-90012694

VEHICLE PARTICULARS

Manufacturer Honda
Model NC750X
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 750

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number 5089792982-04
Cover Note Number -

DRIVER

Name of Driver MUHAMMAD FERDAUS BIN ABDUL RAHIM
NRIC No S8219066Z

Accident report SN07221L000K

Driving Pass
Experience

Vehicle Number
Phone Number
Mail Address
Address

Address complement
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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident

Weather Conditions

Road Surface

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?

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

02/07/1982

Indoor

22/05/2007

14 YEARS AND 8 MONTHS

Male

(Phone) +65-90012694

+65-90012694

DAUS_MANJE@YAHOO.COM.SG

BLK 529 JELAPANG ROAD #02-15

670529

Yes

No

Collision - Head to Rear

Clear

Dry

No

2

Yes

Yes

Yes

1

No

Yes

Bukit Panjang Neighbourhood Police Centre

No.1 Segar Road #01-05 Singapore 677738

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

NRIC No

SMU9786S

Mercedes

-

-

-

Private car

PANG KIM HSING

S7829863D

China

(Phone) +65-97940318

-

-

-

-

-

-

3

UNKNOWN

Female

UNKNOWN

-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained

MUHAMMAD FERDAUS BIN ABDUL RAHIM
Male

-

-

-

-

39

RIGHT KNEE BRUISES
RIGHT HIP BRUISE
PAIN ON RIGHT CHEST
FBL8211T

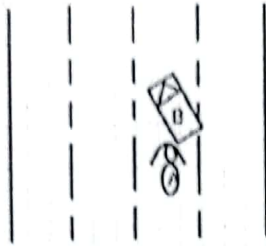
No

Yes

Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?



SKETCH PLAN



A - FBL6211T
B - SMU9786S

AYE TOWARDS CTE NEAR
LAMPOST 458

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO GEARS

DECLARATION

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

Policyholder's Signature
Date & Time: 21/01/2022

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

Reporting Centre Personnel's Signature
Name: GADDAFI
NRIC/FIN No.: S993841


SKETCH PLAN

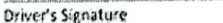
IMPORTANT NOTICE


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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: 21/01/2022


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


Reporting Centre Personnel's Signature
Name: GADDAFI
NRIC/FIN No.: S993841

SKETCH PLAN

NOTICE

Report correctly the details of the accident to speed up the claims process.
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insurance companies to repudiate policy liability.
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companies.

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of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.

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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

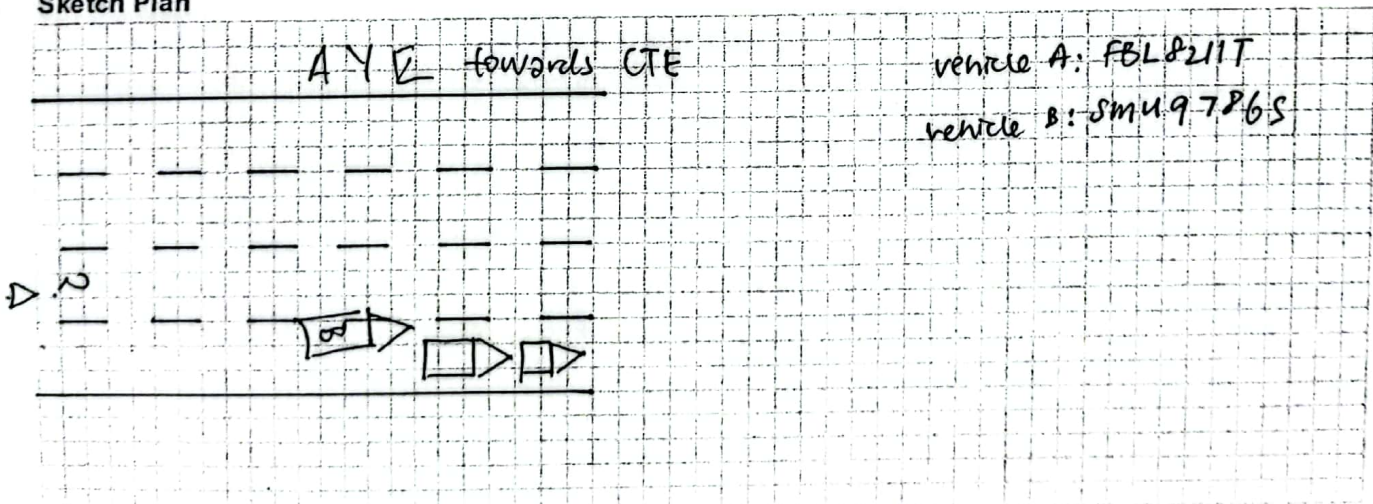
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents
(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan



Date of Accident : 08/01/2022 Accident Time: 1130 (24-HR-Format)
 Accident Place : AYE towards CTE
 Vehicle No. (Car Plate No.) : FBL 8211T Make/Model: HONDA NC750XA
 Insurance Company : NTUC Policy No: 5089792982-04
 Owner or Company Name /IC No. : MUHAMMAD FERDAUS BIN ABDUL RAHIM S8219066Z
 Owner or Company Contact No. : 90012694 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : MUHAMMAD FERDAUS BIN ABDUL RAHIM S8219066Z
 DRIVER'S Date Of Birth : 02/07/1982 DRIVER'S License Pass Date 11/06/2008
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : 529 Jelapang Road #02-15 S(670529)
 DRIVER'S Contact No./ Alt No. : 1) _____ 2) _____
 DRIVER'S Occupation : INDOOR OUTDOOR (e.g. working inside or outside office)
 Email Address : DAUS - MANJE @ YAHOO.COM.SG
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 01
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): Yes Rider

Other Party Driver's Particular (if any)

Vehicle No: <u>SMU 9786 S</u>	Vehicle No: _____
Vehicle Make/Model: <u>Mercedes Benz C180</u>	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

**SINGAPORE
POLICE FORCE**



T/20220108/2106

1 of 3

Report No. T/20220108/2106

Station Of Origin:

Chang N.P.C

Road #01-05 SINGAPORE 677738

1800-8929999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2022 21:27	Vide Report No.: A/20220108/0064	Station Diary No.: 118
--	-------------------------------------	---------------------------

Informant's Particulars			
Name of Informant: MUHAMMAD FERDAUS BIN ABDUL RAHIM		Address: APT BLK 529 JELAPANG ROAD #02-15 SINGAPORE 670529	
ID Type / ID No.: NRIC NO / S8219066Z		Contact No.: Home/Office: Mobile: 90012694	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 39	Date of Birth: 02/07/1982	Type of Informant: Rider
Race: Malay		Language: English	Institution / School Name:
Occupation: SERVICE ENGINEER		Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 08/01/2022 11:30	Type of Location: Straight Road
Location: AYER RAJAH EXPRESSWAY				
Lamp Post Number: 458				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL8211T	Motorcycle	HONDA	NC750XA	Black	Slightly Damaged	0
SMU9786S	Car	MERCEDES BENZ		Blue	Slightly Damaged	2

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date	
FBL8211T	NTUC Income Insurance Co-Operative Limited	5089792982-04	03/04/2021	02/04/2022	



SINGAPORE POLICE FORCE



T/20220108/2106

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Report No. T/20220108/2106

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD FERDAUS BIN ABDUL RAHIM	ID No.	S8219066Z
Related Vehicle	FBL8211T (Motorcycle)	Contact No.	90012694
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	08/01/2022	Date Discharge	08/01/2022
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 8th Jan 2022 at about 1130hrs, I was riding (Black Honda, FBL8211T) along AYE towards CTE. I was riding on the second lane. While I was riding, suddenly, an unknown car (Blue Mercedes Benz, SMU9786S) applied emergency brake on the first lane and moved on to second lane. I did not had the time to apply emergency brake and hit on the left rear side of the car with the front side of my motorcycle. There was a Police vehicle at AYE and they stopped their vehicle to check on the incident.

The driver (Pang Kim Hsing, S7829863D, 97940318) came out of his car to check on me. We both exchanged our particulars. I had injury on the right side of my hip and right knee. I felt pain on my chest. As of now there were no sign of injury on the driver and the two passengers who were in the car. There were some damage on the left rear side of the car and there were some damages on the front side of my motorcycle.

Subsequently, Ambulance came to the incident location and I was conveyed to NUH. After my medical check up, doctor gave me seven days medical certificate.

**SINGAPORE
POLICE FORCE**



T/20220108/2106

3 of 3

Report No. T/20220108/2106

Station Of Origin:
Pusat Panjang N.P.C
Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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

J /

Sgt 1 PRASANTH S/O
ELENGOVAN

Signature Of Interpreter:
Not applicable

Signature Of Informant:

Date/Time:
08/01/2022 21:27

Officer In Charge Of Case:

TP / GIT /

Staff Sgt LEE GUANG HUI
Contact No.: 65476423



SINGAPORE
POLICE FORCE

Classification Of Case:

Authentication Stamp
NP168

SIGNATURE