ASS. REC. BY: Kenneth

REF: AIS/2200187/IH

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Yee Ann

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: FBP 94X Yr Regn: 03 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Honda CB400 c.c 399

Colour M. Blue A/C: Insured / Std / NI / NA

Sp.Reading 17756 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NC42 - 1901706

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 120/60ZR17

R: 160/60ZR17

BS / DUN / EXNOVA / GY / FS / LIZA / MICH / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	3 mm	R/Bal.	3 mm
L/Bal.	mm	L/Bal.	mm
D.O.A.	14/2/22	D.O.I.	1/3/2022

Survey held at _____

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or M & NS body

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

Date / Time	Action / Instruction
/	

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Preli. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: _____ $ + RS _____ SI

Parking _____

Others _____

TOTAL _____

Report Format : _____

Lump Sum / I.B.I: ($ _____)

YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722
Tel: 6457 5766 Fax: 6252 8459 Mobile: 9687 4031
Email: yeeautopteltd@gmail.com
Registration No.: 201719251W GST No: 201719251W

M/S : ALLIANZ INSURANCE SINGAPORE PTE. LTD.
12 MARINA VIEW
#14-01 ASIA SQUARE TOWER 2
SINGAPORE 018961
TEL: 6714 3369
ATTN: Motor Claim Department
Your Ref No: -
Claim Type: Third Party
Accident Date: 14/02/2022
TP Veh Reg No: SND2079Z

Estimate No: ES2100139
Date: 28 Feb 2022
Policy No:
Veh Reg No: FBP94X
Make/Model: HONDA CB400A
Chassis No: NC421901706
Engine No: NC42E1401691
Reg. Date: 13/03/2019

Estimate Repair Cost to Vehicle No :FBP94X

	Description	U/Price	Quantity	List Price S$	Amount S$
	Net Price				
1	FRONT NUMBER PLATE	50.00	1 PC	50.00	
2	FRONT WHEEL RIM	850.90	1 PC	850.90	
3	REAR NUMBER PLATE	50.00	1 PC	50.00	
				950.90	950.90
	Spare Parts				
4	ENGINE BLOCK COVER BRACKET CHROME - LH	225.00	1 PC	225.00	
5	EXHAUST	1,650.20	1 PC	1,650.20	
6	FRONT BRAKE CALIPER	450.50	1 PC	450.50	
7	FRONT BRAKE ROTOR	195.00	1 PC	195.00	
8	FRONT FENDER	195.15	1 PC	195.15	
9	FRONT FORK - LH	1,396.80	1 PC	1,396.80	
10	FRONT FORK - RH	1,396.80	1 PC	1,396.80	
11	FRONT FORK BRACKET TOP	385.00	1 PC	385.00	
12	FRONT FORK TUBE - LH	520.15	1 PC	520.15	
13	FRONT FORK TUBE - RH	520.15	1 PC	520.15	
14	FRONT HANDLE BAR	450.00	1 PC	450.00	
15	FRONT HANDLE BAR BALANCER - LH	115.20	1 PC	115.20	
16	FRONT HANDLE BAR BALANCER - RH	115.20	1 PC	115.20	
17	FRONT HANDLE CLUTCH LEVER	144.00	1 PC	144.00	
18	FRONT HEADLAMP WING COVER	245.10	1 PC	245.10	
19	FRONT LOWER FORK BEARING (LOWER)	85.15	1 PC	85.15	
20	FRONT LOWER FORK BEARING (TOP)	85.15	1 PC	85.15	
21	FRONT LOWER FORK BRACKET	385.00	1 PC	385.00	
22	FRONT SIGNAL LAMP - RH	95.00	1 PC	95.00	
23	FRONT SIGNAL LAMP - LH	95.00	1 PC	95.00	
24	HEAD LAMP	380.15	1 PC	380.15	
25	HEAD LAMP CHROME	185.05	1 PC	185.05	
26	RPM METER	1,520.00	1 PC	1,520.00	
27	WING MIRROR - LH	90.05	1 PC	90.05	
28	WING MIRROR - RH	90.05	1 PC	90.05	
				11,014.85	11,014.85
	Labour				
29	TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	800.00	1 JOB	800.00	
30	TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	700.00	1 JOB	700.00	

Not withdrawn [illegible] & Running After Paint 4 days

YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722
Tel: 6457 5768 Fax: 6252 8459 Mobile: 9687 4031
Email: yeeautopteltd@gmail.com
Registration No.: 201719251W GST No: 201719251W

M/S : ALLIANZ INSURANCE SINGAPORE PTE. LTD.
12 MARINA VIEW
#14-01 ASIA SQUARE TOWER 2
SINGAPORE 018961
TEL: 6714 3369
ATTN: Motor Claim Department
Your Ref No: -
Claim Type: Third Party
Accident Date: 14/02/2022
TP Veh Reg No: SND2079Z

Estimate No: **ES2100139**
Date: 28 Feb 2022
Policy No:
Veh Reg No: **FBP94X**
Make/Model: HONDA CB400A
Chassis No: NC421901706
Engine No: NC42E1401691
Reg. Date: 13/03/2019

Estimate Repair Cost to Vehicle No :FBP94X

	Description	U/Price	Quantity	List Price S$	Amount S$
31	TO ALIGN MAIN BODY FRAME.	400.00	1 JOB	400.00	120
32	TO TOW VEHICLE TO WORSHOP.	120.00	1 JOB	120.00	30
33	BRAKE OIL	20.00	1 PC	20.00	✓
				2,040.00	2,040.00

Total	S$ 14,005.75
Add GST @ 7%	980.40
Total Amount Payable	S$ 14,986.15

TOTAL: SINGAPORE DOLLAR FOURTEEN THOUSAND NINE HUNDRED EIGHTY SIX AND CENTS FIFTEEN ONLY

For Yee Auto Pte Ltd

AUTHORISED 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:

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	15/02/2022 17:31 (SGT)
Date of Accident	14/02/2022 13:25 (SGT)
Exact Location of Accident	Serangoon North Ave 6, Singapore
Additional Location Information	SERANGOON NORTH AVE 6
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP94X

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KHAIRUSSALLEH BIN JUNUS
NRIC No	S7802093H
Email Address	KHALISAUFA@GMAIL.COM
Mobile Phone No	(Phone) +65-97395878
Alternative Phone No	(Home) +65-97395878

VEHICLE PARTICULARS

Manufacturer	Honda
Model	HONDA CB400A
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	399

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNMC2019-00001604-02
Cover Note Number	13/03/2021 TO 12/03/2022

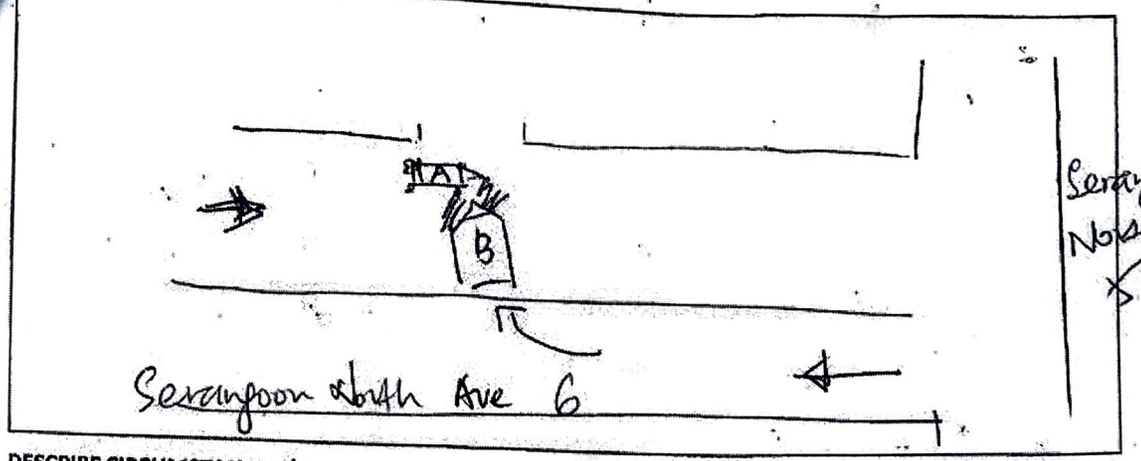
DRIVER

Name of Driver	MUHAMMAD KHALISAU FA BIN KHAIRUSSALLEH
NRIC No	S9703807D

Date of accident: 14/12/22 Time: 13:25 Location: Serangoon North Avenue 6

My Vehicle A: FBP94X Vehicle B: SNP2079X Vehicle C:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Police Report No: T/2022015/2024

☐ Claim OD/TP at Ah Lim Motor ☑ Claim OD/TP at other workshop ☐ Reporting Only

Yee Auto Pte Ltd

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Policyholder's Signature
Date & Time: 18/2/22 4:04pm

Driver's Signature
(If driver is not the policyholder)
Date & Time: 15/2/22 4:05pm

AH LIM MOTOR CO. (S'PORE)

Reporting Centre Personnel's Signature 15/02/2022
Name:
NRIC/FIN No.:

AH LIM MOTOR COMPANY