ASS. NEL BY: SMR/ 22004111/KG

KENNETH

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s ITC

of _____

Insured: 1190

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: $10k

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 05 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: PBQ 3171G Yr Regn: 09, 19

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

Make: Yamaha Aerox c.c 155

Colour Yellow/Black A/C: Insured / Std / NI / NA

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

Eng/No: _____

C/No: MH3SG4640KJ037646

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: 110/80R14

R: —

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	6 mm
L/Bal.	mm	L/Bal.	mm
D.O.A.	4/5/22	D.O.I.	5/5/2022 ✓

Survey held at _____

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

R/S body

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

Date / Time	Action / Instruction
/	Got BZ, Key with owner unable to see meter reading

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. 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: ($ _____)

H C AUTO PTE LTD

160 Sin Ming Drive #05-09 Sin Ming Auto City Singapore 575722
Tel : 6457 0678 Fax : 6457 8287
Co. and GST Reg. No. : 200820153N

Date : 04 / 05 / 2022

ESTIMATE COSTS OF REPAIR

Not Authorize
L/Sup &
Recovery After Paying
5 days

Mr Jafree Bin Johar
C/o 160 Sin Ming Drive
05-09 Sin Ming Auto City
Singapore 575722

Dear Sir / Madam ,

Vehicle no. : FBQ 3171 G - Honda Aerox GDR155A
Accident date : 04 / 05 / 2022

	Quantity	Descriptions	Amount (S$)
1	1 pc	n/s brake level pedal	$ 70.00
2	2 pcs	signal lamp 1 @ 55.00	$ 110.00
3	2 pcs	signal lamp cover (black) 1 @ 65.00	$ 130.00
4	2 pcs	signal lamp cover (yellow) 1 @ 85.00	$ 170.00
5	1 pc	front windshield	$ 95.00
6	2 pcs	front fairing 1 @ 268.00	$ 536.00
7	1 pc	front fork cover	$ 66.00
8	1 pc	head lamp	$ 680.00
9	2 pc	head lamp fairing 1 @ 225.00	$ 450.00
10	2 pcs	head lamp cover 1 @ 95.00	$ 190.00
11	1 pc	front mud guard	$ 60.00
12	2 pcs	side fairing 1 @ 170.00	$ 340.00
13	2 pcs	steering cone 1 @ 35.00	$ 70.00
14	2 pcs	steering stem 1 @ 140.00	$ 280.00
15	2 pcs	handle bar 1 @ 65.00	$ 130.00
16	2 pcs	handle balancer 1 @ 18.00	$ 36.00
17	2 pcs	front fork 1 @ 133.00	$ 266.00
18	2 pcs	front fork inner tube 1 @ 56.00	$ 112.00
19	2 pcs	rear fairing 1 @ 155.00	$ 310.00
20	1 pc	meter assy	$ 135.00
21	1 pc	rear air cleaner box assy	$ 580.00
22	1 pc	rear air cleaner box bottom cover	$ 380.00
23	1 pc	rear cover (black)	$ 155.00
24	1 pc	rear cover (yellow)	$ 190.00
25	1 pc	centre console box	$ 115.00
26	1 pc	n/s centre console box cover	$ 210.00
27	1 pc	o/s centre console box cover	$ 220.00
		Balance C/FD	$ 6,086.00

H C AUTO PTE LTD

160 Sin Ming Drive #05-09 Sin Ming Auto City Singapore 575722
Tel : 6457 0678 Fax : 6457 8287
Co. and GST Reg. No. : 200820153N

		Balance B/FD (FBQ 3171 G)		$ 6,086.00
28	2 pcs	front step panel 1 @ 225.00	o/s sn	$ 450.00 N/S ?
29	2 pcs	front step panel garnish 1 @ 175.00	o/s sn	$ 350.00 N/S ?
30	2 pcs	front & rear sport rim 1 @ 236.00	?	$ 472.00 Rear sn X
31	1 pc	swing arm		$ 315.00 ?
32	1 pc	centre stand		$ R 180.00 X
33	1 pc	side stand		$ R 160.00 X
				$ 8,013.00
		Less 10%		$ 801.30
				$ 7,211.70
34	1 pc	front no plate		$ sn 50.00 sn X
35	1 pc	exhaust side cover		$ sn 120.00 sn X
				$ 7,381.70
		Labour charges		$ 800.00 18 hr
		To putty and spray painting		$ NA 500.00 X
		To check wiring		$ 150.00 1.5 hr
		To check chassis alignment		$ 420.00 1.2 hr
				$ 9,251.70
		Add : 7% GST		$ 647.62
		Grand total		$ 9,899.32

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:

SV0S2254000D / Vin's Motor Pte Ltd [575722]
ENTRY DATE & TIME: 04/05/2022 16:07 (SGT)
SUBMITTED BY: Elaine Lee Geok Ting
VERSION: 1 (04/05/2022 16:07 (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	04/05/2022 16:07 (SGT)
Date of Accident	04/05/2022 08:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ROSEWOOD DRIVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ3171G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JAFREE BIN JOHAR
NRIC No	S1820119D
Email Address	JJAFREE@YAHOO.COM
Mobile Phone No	(Phone) +65-94511898
Alternative Phone No	+65-94511898

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	AEROX GDR155A CVT ABS
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	155

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNMC2020-00004772-01
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD DANNY PUTERA JAFREE
NRIC No	T0100845A

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 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

VIN'S MOTOR PTE LTD

Sketch Plan