

# LAWRENCE LEE & CO

Advocates & Solicitors

李伟平律师楼

UEN: 53159236K

133 New Bridge Road #13-10  
Chinatown Point Singapore 059413  
tel: 6533 3680 fax: 6533 3689  
email: info@lawrencelee.com.sg

Your ref: (Please advise)  
Our ref: LWP/AHM/DAS/4721/21/sm

13 October 2021

This is a letter of claim issued pursuant to  
the Personal-Injury Motor Accident  
Practice Direction of the State Courts

Comfort Transportation Pte Ltd  
383 Sin Ming Drive  
Gas Building  
Singapore 575717

## CERTIFICATE OF POSTING

Dear Sirs

### **ACCIDENT ALONG YISHUN AVE 11 ON 18.07.21 INVOLVING FBH3847M & SHC8178H (OWNER/RIDER'S CLAIM)**

We act for Mr Danish Amani Bin Subtu, owner/rider of the above m/cycle registration no. FBH3847M.

We are instructed to claim damages against you in connection with the above road accident involving our client's vehicle and m/taxi registration no. SHC8178H owned by you and driven by your servant/agent at the material time.

We are instructed that the accident was caused by your servant/agent's negligent driving, management and/or control of your vehicle; for whose actions you are vicariously liable.

As a result of the accident, our client has suffered personal injuries and has been put to loss and expense. Our client's injuries are set out in the medical report annexed to this letter, particulars of which are as follows:

#### Injuries

- a. Contusion of left wrist, right elbow and right thigh secondary to road traffic accident.

On a strictly without prejudice basis, we quantify our client's claim as follows:

#### Particulars

- |    |   |             |
|----|---|-------------|
| 1. | General damages for pain and suffering<br>and loss of amenities | \$ 5,000.00 |
| 2. | Medical expenses  | \$ 128.00   |
| 3. | Estimated transport expenses                                    | \$ 30.00    |

4.	Estimated loss of earnings (25 hours x \$12 per hour)	\$	300.00
5.	Loss of use (7 days x \$50pd)	\$	350.00
6.	Cost of repairs	\$	3,800.00

Disbursements

7.	Survey fee	\$	540.00
8.	LTA fee	\$	7.49
9.	TP fee	\$	30.00
10.	Medical report fee	\$	90.00

For the purposes of our client's claim, we forward herewith copies of the following documents in the copy of this letter to your insurer:

1. LTA search on your vehicle with receipt;
2. Our client's LTA online enquiry and certificate of insurance;
3. Our client's GIA and TP reports with tax invoices;
4. TP letter dated 11.08.21;
5. Repairer's invoice no. 08/tp/21 from Ah Hwa Motor Servicing dated 01.09.21;
6. Survey report with 155 color photographs and invoice no. POS0249/21 from Pro-Option Services;
7. Ordinary medical report from Khoo Teck Puat Hospital ("KTPH") dated 30.08.21 with official receipt;
8. Medical tax invoice from KTPH dated 19.07.21;
9. Medical certificate from KTPH dated 20.07.21;
10. Our client's employment contract; &
11. Our client's duty roster on July 2021.

In compliance with the pre-action protocol under the State Courts' Practice Direction 38, we propose using the medical expert(s) named above as single joint expert(s).

Please note that:

- a. If you are insured and you wish to claim under your insurance policy, you should immediately pass this letter to your insurer.
- b. Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter. If you or your insurer wishes to have our client examined by your own medical expert, this should be stated in your acknowledgement of receipt.

- c. Should you fail to acknowledge receipt of this letter within 14 days, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- d. If you have any witnesses, photographs of the accident scene, video and GIA/TP reports of the accident, please let us have them within 14 days of your receipt of this letter.
- e. If you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.
- f. In the event that your vehicle had been driven by someone not in the capacity as your servant/agent, please inform us in writing within 14 days otherwise we will name you as a defendant in the Writ that may be issued and you may be liable for legal costs.

Yours faithfully



LEE WEE PENG LAWRENCE  
Paralegal: Ms Lim Suk Mei  
Email: [sukmei@lawrencelee.com.sg](mailto:sukmei@lawrencelee.com.sg)

Encs by email only

Cc AXA Insurance Pte Ltd  
8 Shenton Way  
#24-01 AXA Tower  
Singapore 068811  
(Insurer of SHC8178H)  
(Ref: S1M03E33)

POST/EMAIL

Cc Client

## Enquire Vehicle Owner Details ( As At 18 Jul 2021 / 23:30:00 )

### Vehicle Owner Details

Owner ID Type:	Owner ID:
Company	199303821R
Owner Name:	Registered Address Type:
COMFORT TRANSPORTATION PTE LTD	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	Registered Street Name:
383	SIN MING DRIVE
Registered Unit No.:	Registered Building Name:
-	GAS BUILDING
Registered Postal Code:	
575717	

### Vehicle Insurance Details

Vehicle No.:	Make Description/Model:
SHC8178H	HYUNDAI / I40 1.7 CRDI F/LAT ABS AIRBAG 4DR
Insurance Company Name:	
AXA INSURANCE PTE LTD	

Printed on 24 Aug 2021 09:25:07

Copyright © Land Transport Authority of Singapore 2021



*Thank you*

Lee Wee Peng Lawrence has successfully logged out.

Your last login date and time was 23 Jul 2021, 10:12:23.

To return to ONE.MOTORING, please [click here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No.↓	Asset Type↓	Asset ID↓	Asset Owner ID↓	Transaction Type↓	Transaction Amount(S\$)↓	Log Date/Time↓
1	Vehicle	SHC8178H	-	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	23 Jul 2021,

[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	066J

### Vehicle Details

Vehicle No.:	FBH3847M
--------------	----------

Vehicle to be Exported:	Yes
-------------------------	-----

Intended Deregistration Date:	23 Jul 2021
-------------------------------	-------------

Vehicle Make:	YAMAHA
---------------	--------

Vehicle Model:	FZ16ST
----------------	--------

Primary Colour:	Black
-----------------	-------

Manufacturing Year:	2013
---------------------	------

Engine No.:	45S9025167
-------------	------------

Chassis No.:	ME145S091D2025211
--------------	-------------------

Maximum Power Output:	-
-----------------------	---

Open Market Value:	\$2,388.00
--------------------	------------

Original Registration Date:	28 May 2013
-----------------------------	-------------

First Registration Date:	28 May 2013
--------------------------	-------------

Transfer Count:	4
-----------------	---

Actual ARF Paid:	\$359.00
------------------	----------

### Intended PARF Rebate Details

PARF Eligibility:	No
-------------------	----

PARF Eligibility Expiry Date:	-
-------------------------------	---

PARF Rebate Amount:	\$0.00
---------------------	--------

### Intended COE Rebate Details

COE Expiry Date:	27 May 2023
------------------	-------------

COE Category:	D - Motorcycle
---------------	----------------

COE Period(Years):	10
--------------------	----

QP Paid:	\$1,791.00
----------	------------

COE Rebate Amount:	\$330.00
--------------------	----------

Total Rebate Amount:	\$330.00
----------------------	----------

The information contained herein is correct as at 23 Jul 2021

OK

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5122512524

**Cover** : Third Party

1. Index mark and Registration Number of Vehicle

: FBH3847M

Chassis Number

: ME145S091D2025211

2. Name of Policyholder

: DANISH AMANI BIN SUBTU

3. Effective Date of Insurance

: 10 Jun 2021

4. Expiry Date of Insurance

: 09 Jun 2022

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)

: N/A

EXCESS (SECTION 2)

: N/A

INSURE WITH COE

: N/A

NAMED DRIVER (1)

: DANISH AMANI BIN SUBTU

NAMED DRIVER (2)

: SUBTU BIN JUPRI

HIRE PURCHASE COMPANY

: N/A

SUM INSURED

: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : DIRECT BUSINESS DEPT (00000600280)

Date of Issue : 09 Jun 2021 16:08 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive



## 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	22/07/2021 18:57 (SGT)
Date of Accident	18/07/2021 23:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	YISHUN AVE 11
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH3847M
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	DANISH AMANI BIN SUBTU
NRIC No	TXXXX066J
Email Address	danish_amani@hotmail.com
Mobile Phone No	(Phone) +65-96802534
Alternative Phone No	+65-96802534

### VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	FZ16ST
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	153

### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5122512524
Cover Note Number	10/06/21 - 09/06/22

### DRIVER

Name of Driver	DANISH AMANI BIN SUBTU
NRIC No	TXXXX066J



Date Of Birth .....	25/01/2000
Occupation .....	Indoor
Date Of Driving Pass .....	18/07/2018
Driving experience .....	3 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-96802534
Alt. Phone Number .....	+65-96802534
Email Address .....	danish_amani@hotmail.com
Address .....	BLK 603 YISHUN ST 61 #04-341
Address complement .....	-
Postcode .....	760603
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 - U-Turn
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? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER 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 .....	INSURED WILL EMAIL TO NTUC
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHC8178H
Vehicle Manufacturer .....	-
Vehicle Model .....	-
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 .....	DANISH AMANI BIN SUBTU
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	REFER POLICE REPORT
Injured person in which vehicle? .....	FBH3847M
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN**

1 VEHICLE NO FBH3847M  
 2 INSURER CO NTUC  
 3 ACCIDENT  
 DATE & TIME 18/7/21 23:30

**IMPORTANT NOTICE**

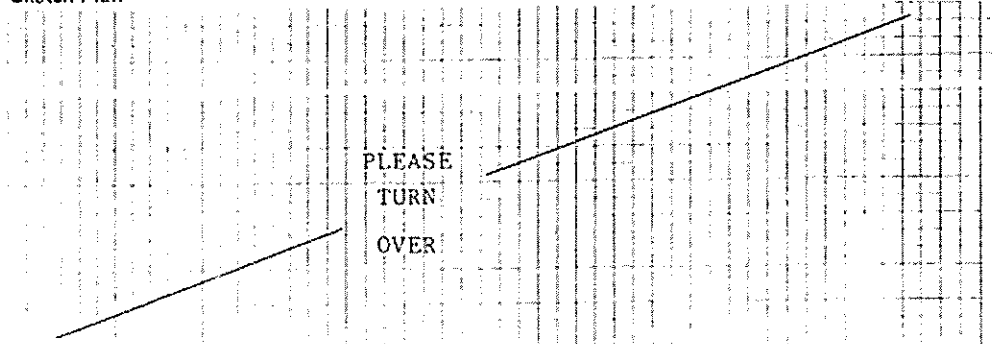
- 1 Please report correctly the details of the accident to speed up the claims process.
- 2 This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 judgement 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 claim including the settlement of the claim and any necessary investigations relating to the claim;  
 (ii) investigating the accident and/or my claim;  
 (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;  
 (iv) administering my claim (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.

Paim  
 Policyholder's Signature / Date & Time

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

(75) 09/22/7/21  
 Witnessed by Reporting Centre Personnel

**Sketch Plan**



Bus 5

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

under your own comprehensive policy. Please check with your policy for more information.

**Note:** Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim

I/We declare the foregoing particular:

<https://doi.org/10.1016/j.jm.2019.04.001>

Driver's Signature \_\_\_\_\_ Reporting Center Name: \_\_\_\_\_  
(if driver is not the policyholder)





















**SINGAPORE  
POLICE FORCE**



T/20210722/7023

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No: T/20210722/7023

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 22/07/2021 15:34	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

**Informant's Particulars**

Name of Informant: DANISH AMANI BIN SUBTU			Address: 603 YISHUN STREET 61 #04-341 SINGAPORE 760603		
ID Type / ID No.: NRIC NO / T0002066J			Contact No.: Home/Office: Mobile: 96802534		
Nationality: SINGAPORE CITIZEN			Email: DANISH_AMANI@HOTMAIL.COM		
Sex: Male	Age: 21	Date of Birth: 25/01/2000	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation: unemployed			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/07/2021 23:30	Type of Location: Bend
Location:  18 july around 11.30pm along yishun ave 11				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Pedestrian Crossing	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBH3847M	Motorcycle	YAMAHA	FZ16 Fazer	Black	Seriously Damaged	0
SHC8178H	Car	HYUNDAI		Blue	Slightly Damaged	1



**SINGAPORE  
POLICE FORCE**



T/20210722/7023

2 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20210722/7023

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH3847M	NTUC Income Insurance Co-Operative Limited	5122512524	10/06/2021	09/06/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
<b>Rider</b>				
Name	DANISH AMANI BIN SUBTU		ID No.	T0002066J
Related Vehicle	FBH3847M (Motorcycle)		Contact No.	96802534
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
<b>Passenger</b>				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	SHC8178H (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
<b>Rider</b>				
Name	DANISH AMANI		ID No.	T0002066J
Related Vehicle	NIL		Contact No.	96802534
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	19/07/2021		Date	19/07/2021
No. of Days granted Medical Leave	04		Degree of	Slight



**SINGAPORE  
POLICE FORCE**



T/20210722/7023

3 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20210722/7023

**CONTINUATION OF REPORT**

Brief Details.

i was onmyway back home along yishun ave 11 from Jems T junction towards yishun park. i was on the right side of the lane. when a taxi from the bus stop came into my lane as he decide to do a U turn. front of my bike hit his right front side. i own a class 2B and 2A



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20210722/7023

4 of 4

Report No. T/20210722/7023

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
SYED ZAYID MUHAMMAD BIN SYED ABDUL  
WAHID ALHINDUAN  
Contact No.: 65476404  
Authentication Stamp  
NP165

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
22/07/2021 15:34

Classification Of Case:



**Khoo Teck Puat  
Hospital**

National Healthcare Group

Khoo Teck Puat Hospital  
90 Yishun Central  
Singapore 768828  
Tel: (65) 6555 8000  
Fax: (65) 6602 3700  
Website: www.ktph.com.sg

**MEDICAL CERTIFICATE**

REPRINT

KHANE212044102

NAME : DANISH AMANI B SUBTU

NRIC : T0002066J

Type of Medical Leave granted : OUTPATIENT SICK LEAVE

The above named attended Examination/Treatment from 19 Jul 2021 22:09 to 20 Jul 2021 00:19

The above named is unfit for duty for a period of 4 day(s), from 19 Jul 2021 to 22 Jul 2021 inclusive.

The Certificate is not valid for absence from court attendance.

Remarks :

20 Jul 2021    Iype Thomas Timothy (65005F)  
Date           Issuing Doctor

A&E P3c  
Location

Doctor's  
Signature



**SINGAPORE  
POLICE FORCE**

**PAYMENT**

**TAX INVOICE**

Invoice No : SPF2021101101042363

Date/Time:

11/10/2021 15:00:16

Application Paid Via: Master  
Bank Reference No: R00426  
GST Reference No: MG-8400000-5

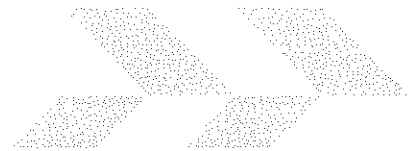
Transaction Ref No: TP000147257

	Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1	Police Document	Document Fee	0050000002502442	16.00	0.00	1	16.00
Total (S\$)							16.00

This is a computer-generated invoice. No signature is required.

Please print a copy of the invoice for your reference.

A FORCE FOR THE NATION





# SINGAPORE POLICE FORCE

## PAYMENT

**TAX INVOICE**

Invoice No :

SPF2021093001035939

Date/Time:

30/09/2021 15:00:25

Application Paid Via:

Master

Bank Reference No:

R05404

GST Reference No:

MG-8400000-5

Transaction Ref No:

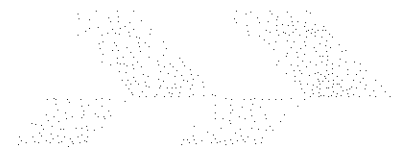
TP000147257

	Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1	Police Document	Search Fee	0050000002498759	14.00	0.00	1	14.00
Total (S\$)							14.00

This is a computer-generated invoice. No signature is required.

Please print a copy of the invoice for your reference.

A FORCE FOR THE NATION





**SINGAPORE  
POLICE FORCE**

Traffic Police  
10 Ubi Avenue 3  
Singapore 408865  
Tel +65 6547 0000  
Fax +65 6547 4883  
[www.police.gov.sg](http://www.police.gov.sg)

Our Ref : TP/IP/35539/2021

Date : 11 August 2021

DANISH AMANI BIN SUBTU  
BLK 603 YISHUN STREET 61  
#04-341  
SINGAPORE 760603

Dear Sir/Madam

**ROAD TRAFFIC ACCIDENT INVOLVING SHC 8178 H AND FBH 3847 M ALONG YISHUN AVENUE 11 ON 18.07.2021 AT ABOUT 11.30PM**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver/rider of **SHC 8178 H** had committed an offence of **Careless Driving Causing Hurt under Section 65(1)(b) of the Road Traffic Act Chapter 276 p/u Section 65(4)(a) of the same Act.** Action has been initiated against the driver/rider for the said offence.
3. If you have any clarification, you may contact the Investigation Officer, Senior Staff Sergeant Syed Zayid Muhammad at office number: 65476404.
4. Thank you.

Yours faithfully

**HEAD INVESTIGATION  
TRAFFIC POLICE  
SINGAPORE POLICE FORCE**

This is a computer-generated letter. No signature is required.

# Ah Hwa Motor Servicing

Blk 1016 Yishun Industrial Park A, #01-228, Singapore 768758  
HP: 9652 8606/9012 1588

## INVOICE

Danish Amani Bin Subtu  
Blk 603 Yishun St 61  
#04-341  
Singapore 760603

Invoice No: 08/tp/21  
Date: 1 September 2021  
Vehicle No: FBH3847M  
Make/Model: Yamaha FZ16ST  
Accident Date: 18 July 2021

<u>Sr. No.</u>	<u>Description</u>	<u>Qty</u>	<u>Unit price (\$)</u>	<u>Amount (\$)</u>
1	Being labour and materials cost involved for the restoration of the accident vehicle to its pre-accident condition.			\$3,800.00
Total Amount Payable:				\$3,800.00
Sing Dollars: Three Thousand and Eight Hundred only				

Ah Hwa Motor Servicing

.....  
Authorized Signature

# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Email: mirage1195@gmail.com Mobile : 9061 0543

Danish Amani Bin Subtu  
Blk 603 Yishun St 61  
#04-341  
Singapore 760603

Invoice no:	POS0249/21
Date:	
Report no:	249M0721.AHM
Vehicle :	FBH3847M

## INVOICE

No	Item Description	Qty	Unit Price	Total Amount(\$)
01	Being charges for the inspection of the accident vehicle, transport and photographs.			540.00
SGD(\$): Five Hundred and Forty only			Payable Amount:	540.00

"Cheque should be crossed and made payable to "Pro-Option Services"

PRO-OPTION SERVICES



.....  
Authorised Signature

# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Email: [mirage1195@gmail.com](mailto:mirage1195@gmail.com) Mobile : 9061 0543

## ACCIDENT VEHICLE INSPECTION REPORT

Report no : 249M0721.AHM  
Vehicle no : FBH3847M

### 1 REFERENCE

Date of inspection : 28 July 2021  
Requested by : Danish Amani Bin Subtu  
Blk 603 Yishun St 61  
#04-341  
Singapore 760603  
Type of survey : Independent  
Repairer : Ah Hwa Motor Servicing  
Blk 1016 Yishun Industrial Park A, #01-360, singapore 762429  
Date of accident : 18 July 2021

### 2 VEHICLE DATA

Make/model : **YAMAHA FZ16ST**  
Chassis no : ME145S091D2025211  
Engine no : 45S9025167  
Date of registration : 28 May 2013 *COE Expiry Date:* 27 May 2023  
Engine capacity : 153 cc  
Odometer reading : Speedometer damaged  
Colour : Purplish

### 3 STATIC CONDITION CHECK

Steering : Affected  
Foot brakes : Serviceable  
Hand brakes : Serviceable  
Paintwork : Fair  
General Condition : Good

### 4 TIRE CONDITION CHECK

	<u>mm/MAKE</u>	<u>SIZE</u>
Front tread	: 5 mm/Pirelli	110/70-17
Rear tread	: 5 mm/Pirelli	140/70-17

### 5 BRIEF DESCRIPTION OF DAMAGE

Front rim scratched, handlebar bent, exhaust guard abraded, front forks bent, headlight broken/grazed, rear box abraded, front left signal broken, speedometer broken, etc. Please see para. 8 of this report for more details.

### 6 REMARKS

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

### 7 RECOMMENDATION

Cost of repairs : \$3,800.00 (lump sum)  
Estimated no of days : Four (4)

## 8 ASSESSMENT OF DAMAGE AND COSTS

Report no: 249M0721.AHM  
Vehicle no: FBH3847M

## A SPARE PARTS

A	SPARE PARTS		Assessed	Repairer's	Revised
	Description	Qty	Condition	Amount	Amount
1	Front rim	1	to repair	580.00	SN \$200.00
2	Rim bearing set	1	reuse	70.00	0.00
3	Front brake disc rotor	1	bent/distorted	78.00	78.00
4	Front mudguard	1	broken	65.00	65.00
5	Fork set, Left/Right	2	bent	680.00	680.00
6	Bottom clamp/sterring stem	1	bent/distorted	150.00	150.00
7	Steering con bearing set	2	necessary	180.00	180.00
8	Handlebar	1	bent	120.00	120.00
9	Front brake master pump	1	serviceable	150.00	0.00
10	Brake lever	1	broken	30.00	30.00
11	Clutch lever	1	serviceable	30.00	0.00
12	Lampstay	1	bent/distorted	180.00	180.00
13	Cowl head	1	abraded	180.00	180.00
14	Headlight	1	grazed/broken	450.00	450.00
15	Speedometer	1	broken	380.00	380.00
16	Left side mirror	1	scraped	70.00	70.00
17	Right side mirror	1	abraded	70.00	70.00
18	Top tank cover	1	grazed	68.00	68.00
19	Right side tank cover	1	grazed	120.00	120.00
20	Left side tank cover	1	grazed/broken	120.00	120.00
21	Left side inner cover	1	broken	78.00	78.00
22	Left side outer cover	1	abraded	78.00	78.00
23	Right side inner cover	1	to reuse	78.00	0.00
24	Right side outer cover	1	abraded	78.00	78.00
25	Front left signal	1	broken	80.00	80.00
26	Left side engine cover	1	abraded	220.00	220.00
27	Front left lower cover	1	to reuse	60.00	0.00
28	Front right lower cover	1	to reuse	60.00	0.00
29	Gear lever pedal set	1	bent	150.00	150.00
30	Side stand	1	serviceable	55.00	0.00
31	Exhaust guard	1	abraded	120.00	120.00
32	Top clamp	1	bent/warped	180.00	180.00
			Subtotal of the above	5,008.00	3,925.00
			Discount	10% / 10%	500.80 392.50
	(Special nett)		Subtotal 1:	4,507.20	3,532.50
	Add SN items above			--	200.00
	Rear box rack	1	serviceable	180.00	0.00
	Rear box	1	abraded	450.00	450.00
	Battery	1	NA	98.00	0.00
	Left side engine cover gasket	1	necessary	28.00	28.00
	Engine oil	1	necessary	34.00	34.00
	Handlbar end balancer set	1	bent/scraped	40.00	40.00
	Front wheel axle bolt	1	bent	35.00	35.00
			Subtotal 2:	865.00	587.00
			Total cost of parts:	5,372.20	4,119.50

Report no: 249M0721.AHM  
Vehicle no: FBH3847M

**B LABOUR**

To check wiring.	30.00	20.00
Workmanship.	600.00	480.00
Towing fee. (2x).	80.00	70.00
Total cost of labour:	710.00	570.00
Total cost of repair:	6,082.20	4,689.50

**9 CONCLUSION**

The revised or adjusted cost of repairs to restore the vehicle is \$4,689.50

(a) However, the recommended cost of repair based on lump sum basis would be **\$3,800.00**

(b) The number of days taken to complete the repairs are **Four (4)**  
(1<sup>st</sup> re-inspection conducted on 4 August 2021)  
(Post Repair Inspection conducted on 25 August 2021)

*The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its pre-accident condition.*

**Note: Lump Sum Repair Basis**

*This means the repairer is allowed to replace the damaged parts with used, reconditioned or new parts, or repair it to a roadworthy condition.*

Yours faithfully

  
.....  
Liaw Leong San  
Licensed Automotive Appraiser

Dated: 31 August 2021

Report no: 249M0721.AHM

Vehicle no: FBH3847M



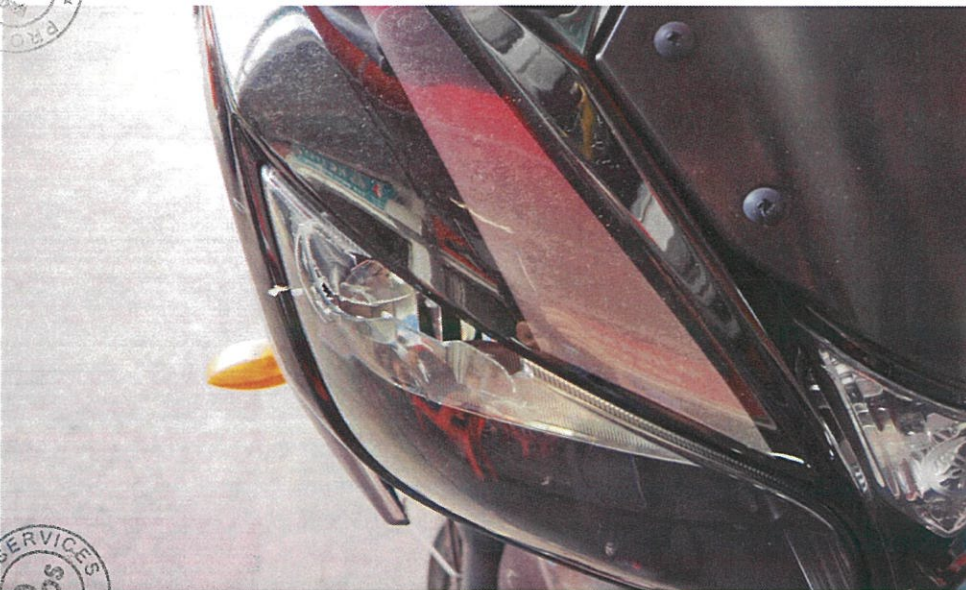
Report no: 249M0721.AHM  
Vehicle no: FBH3847M



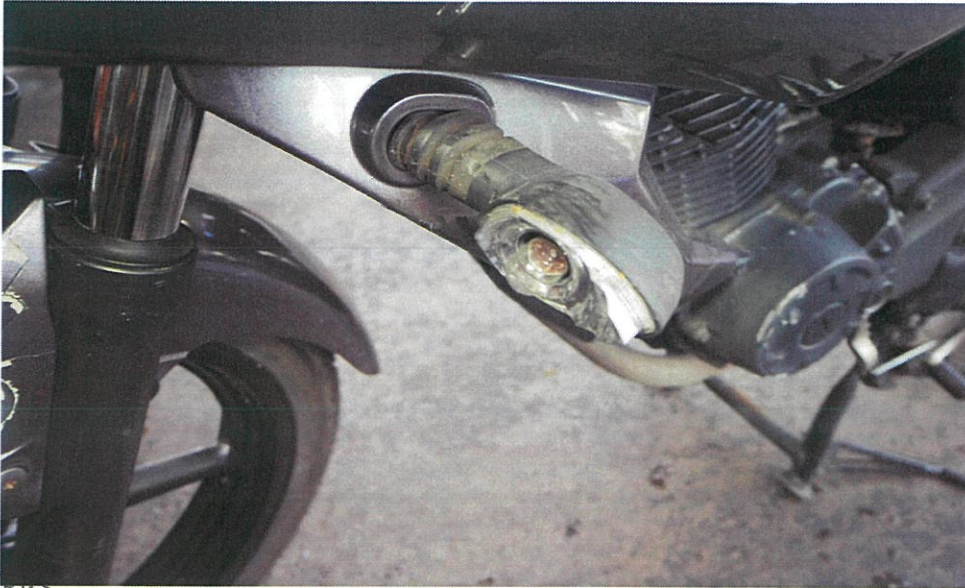
Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM

Vehicle no: FBH3847M





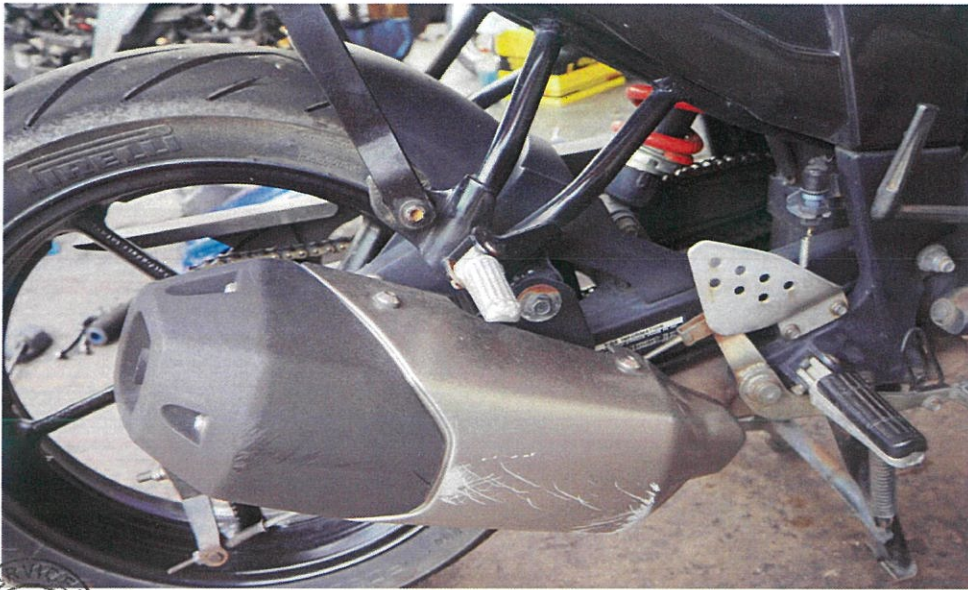
Report no: 249M0721.AHM  
Vehicle no: FBH3847M



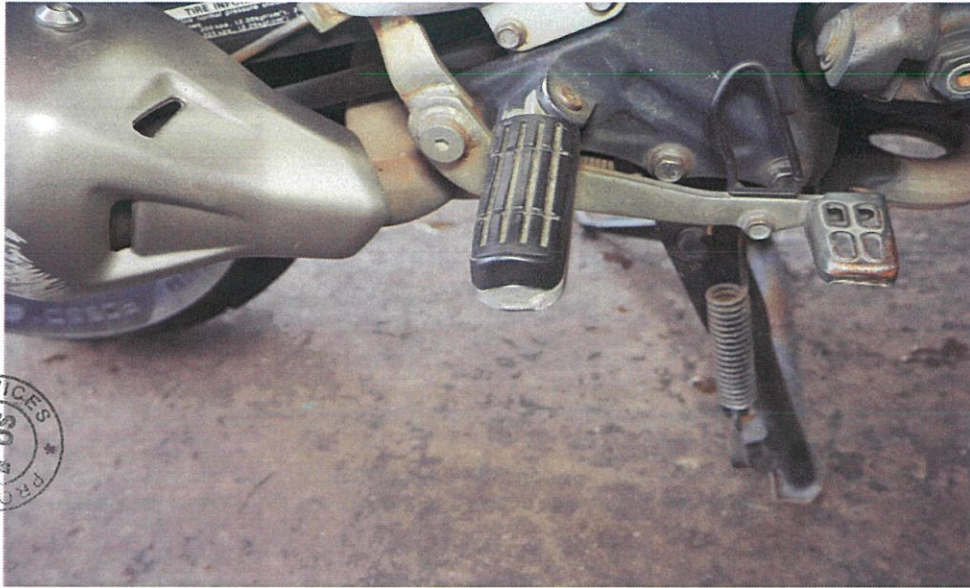
Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M

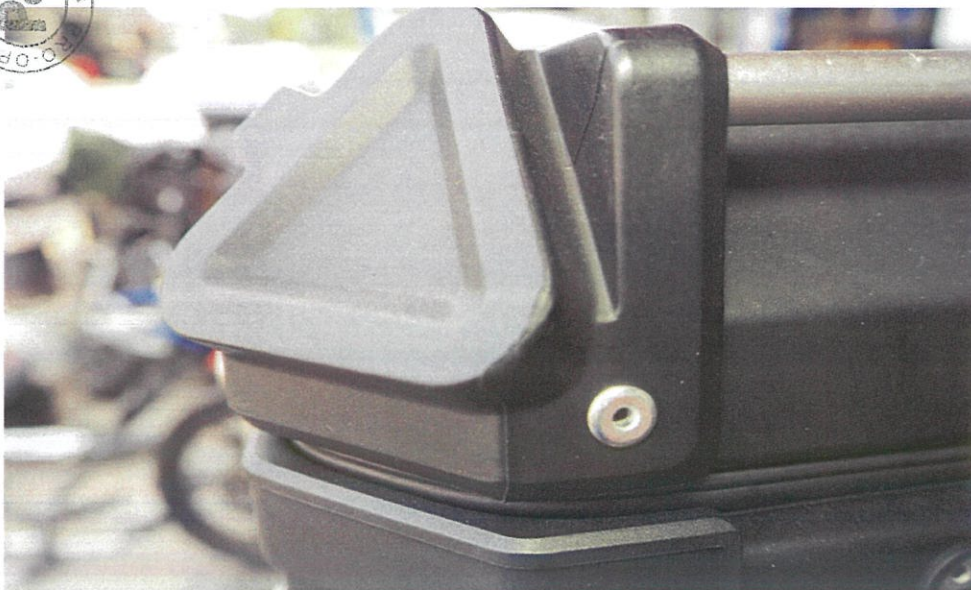
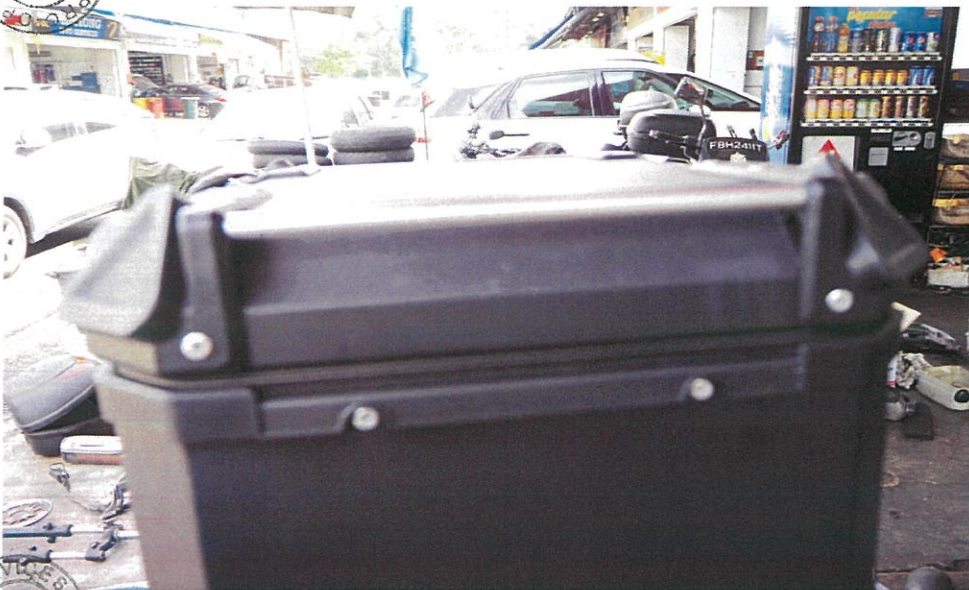


Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM

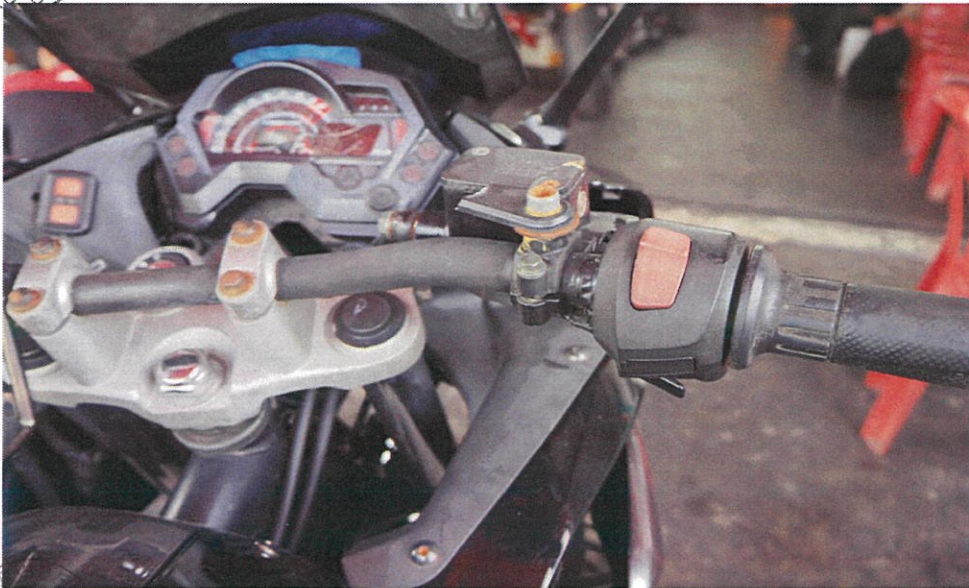
Vehicle no: FBH3847M





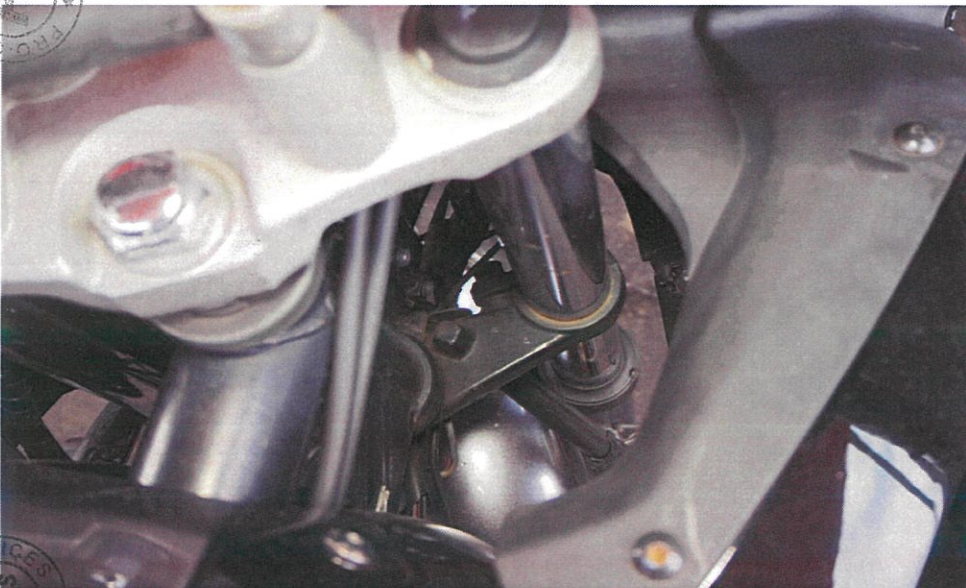
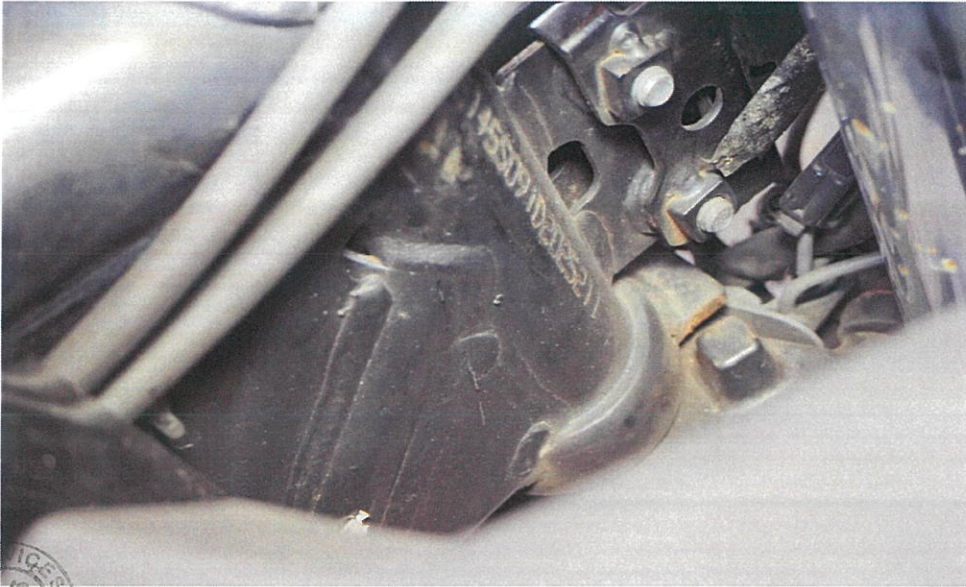


Report no: 249M0721.AHM  
Vehicle no: FBH3847M

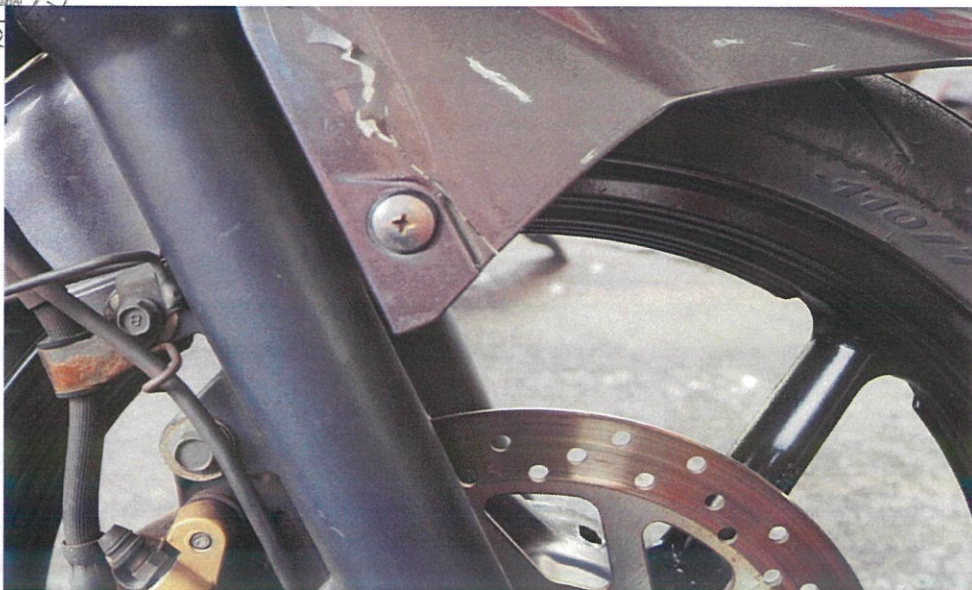
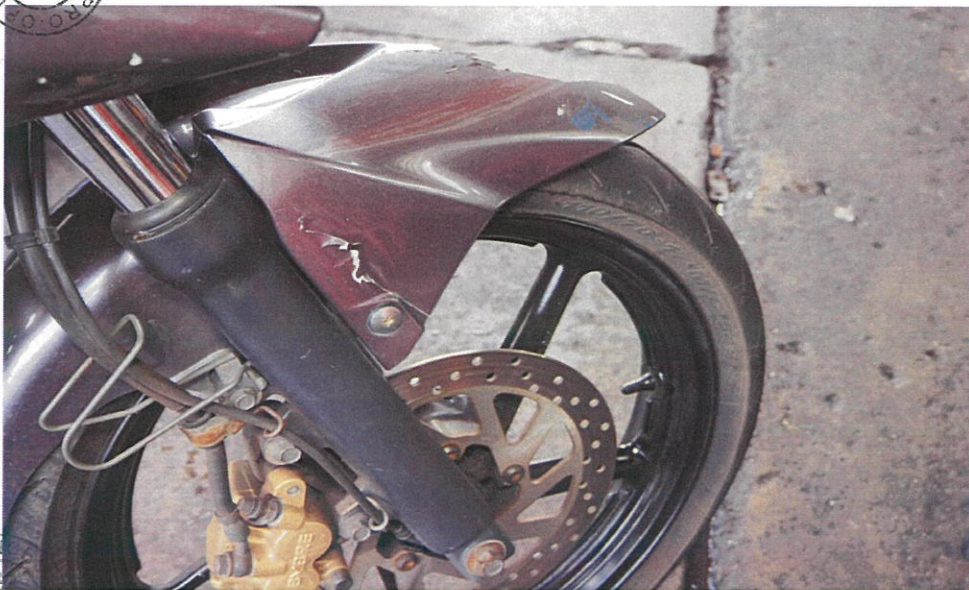


Report no: 249M0721.AHM  
Vehicle no: FBH3847M





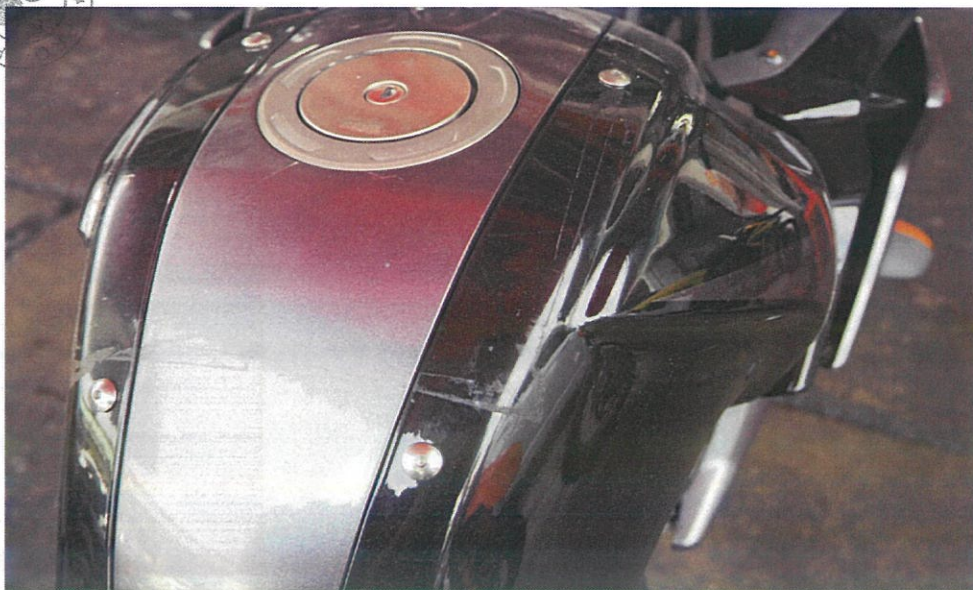
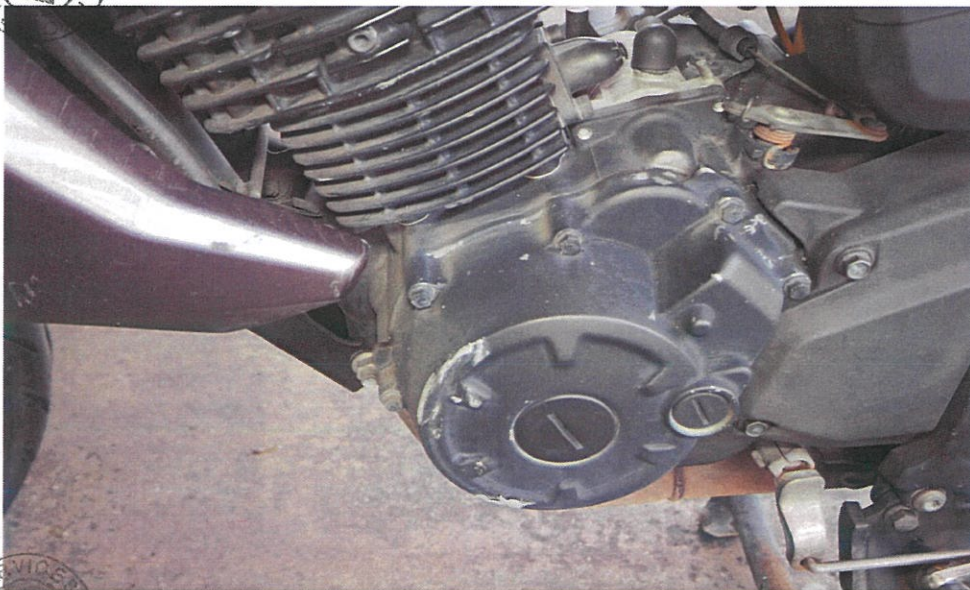
Report no: 249M0721.AHM  
Vehicle no: FBH3847M

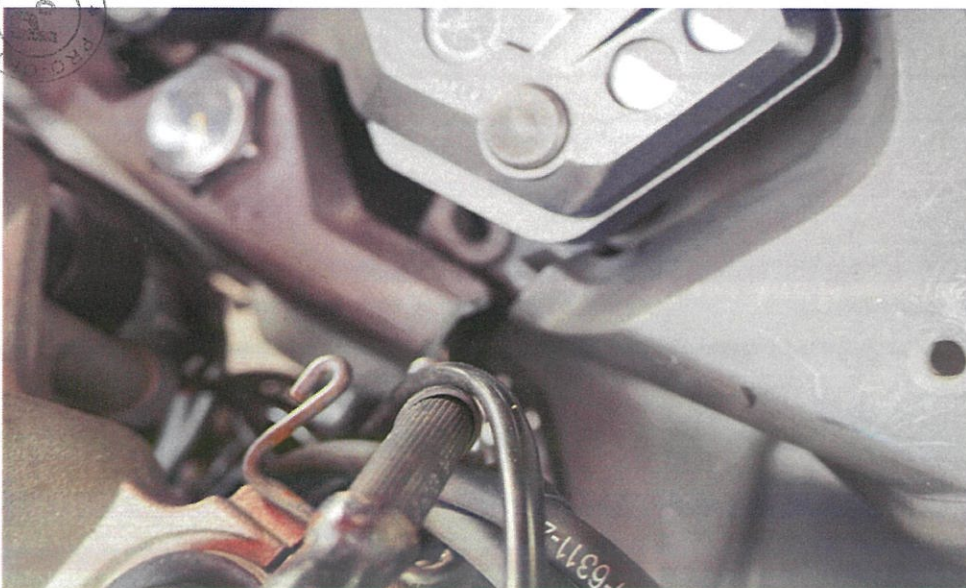


Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M





Report no: 249M0721.AHM  
Vehicle no: FBH3847M



Report no: 249M0721.AHM  
Vehicle no: FBH3847M



