

# THE SINCERE MOTOR REPAIRING PTE LTD

20 Shaw Road #01-03 Ching Shine Industrial Building Singapore 367956

Tel: 6383 2767 Fax: 6296 4548

Company Registration Certificate: 200720671G

Date: 5 May 2021

Our Ref: ACCQ220501

S. H. CYCLE PTE LTD  
20 SHAW ROAD #01-03  
CHING SHINE INDUSTRIAL BUILDING  
SINGAPORE 367956

RE: ESTIMATE TO REPAIR YAMAHA JUPITER Z1

VEHICLE NO. : FBM4156R  
DATE OF ACCIDENT: 28 April 2022@1600 Hrs  
LOCATION: HOLLAND ROAD

S/NO.	UNIT	DESCRIPTION	U/PRICE	AMOUNT
1	1	HANDLE BAR	\$ 115.00	\$ 115.00
2	1	HANDLE GRIP SET	\$ 28.00	\$ 28.00
3	1	BALANCER NIPPLE SET	\$ 18.00	\$ 18.00
4	1	FRONT BRAKE LEVER	\$ 29.00	\$ 29.00
5	1	MIRROR BRACKET (RH)	\$ 48.00	\$ 48.00
6	1	MIRROR SET	\$ 50.00	\$ 50.00
7	1	FRONT SHIELD	\$ 270.00	\$ 270.00
8	1	FRONT FENDER	\$ 122.00	\$ 122.00
9	2	FRONT FORK ASSY (LH/RH)	\$ 320.00	\$ 640.00
10	1	STEERING CONE WITH BEARING	\$ 195.00	\$ 195.00
11	1	TAIL LAMP ASSY	\$ 90.00	\$ 90.00
12	1	EXHAUST MUFFLER	\$ 185.00	\$ 185.00
13	1	GEAR PEDAL	\$ 43.00	\$ 43.00
14	2	REAR SIDE PANEL (LH/RH)	\$ 78.00	\$ 156.00
15	1	FOOT REST BAR WITH RUBBER	\$ 95.00	\$ 95.00



Date: 5 May 2021

# THE SINCERE MOTOR REPAIRING PTE LTD

20 Shaw Road #01-03 Ching Shine Industrial Building Singapore 367956

Tel: 6383 2767 Fax: 6296 4548

Company Registration Certificate: 200720671G

Our Ref: ACCQ220501

S. H. CYCLE PTE LTD  
20 SHAW ROAD #01-03  
CHING SHINE INDUSTRIAL BUILDING  
SINGAPORE 367956

RE: ESTIMATE TO REPAIR YAMAHA JUPITER Z1

VEHICLE NO. : FBM4156R  
DATE OF ACCIDENT: 28 April 2022@1600 Hrs  
LOCATION: HOLLAND ROAD

S/NO.	UNIT	DESCRIPTION	U/PRICE	AMOUNT
16	1	REAR PILLION BRACKET	\$ 78.00	\$ 78.00
17	1	REAR FENDER	\$ 68.00	\$ 68.00
18	1	REAR SHIELD	\$ 85.00	\$ 85.00
				\$ 2,315.00
		LESS 10% DISCOUNT		\$ 231.50
				\$ 2,083.50
19	1	ERP IN VEHICLE UNIT		\$ 156.00
20	1	FRONT NUMBER PLATE		\$ 20.00
21	1	REAR NUMBER PLATE		\$ 20.00
22		STRAIGHTEN CHASSIS FRAME		\$ 350.00
23		LABOUR TO DISMANTLE AND FIX PARTS		\$ 380.00
24		TOWING CHARGE		\$ 60.00
		TOTAL AMOUNT		\$ 3,069.50



INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLH7495A

Date of Accident

28/04/2022



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance

ALG Asia Pacific Insurance Pte....

Period of Insurance

17/11/2021 - 16/11/2022

Requested By

Angeline Tan (S.H. Cycle Pte Ltd)

Requested Date

13/05/2022 14:55

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

# 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	13/05/2022 14:10 (SGT)
Date of Accident	28/04/2022 16:00 (SGT)
Exact Location of Accident	5 Holland Hill, Singapore 278742
Additional Location Information	HOLLAND ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBM4156R
-----------------------------	----------

### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	S. H. CYCLE PTE LTD
Company Reg No	2XXXXX420C
Email Address	ANGIE@SHCYCLE.SG
Mobile Phone No	(Phone) +65-96893327
Alternative Phone No	(Office) +65-62998782

### VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Jupiter z1
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	114

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	SD22V00281
Cover Note Number	-

### DRIVER

Date Of Birth	05/03/1995
Occupation	Outdoor
Date Of Driving Pass	02/03/2016
Driving experience	6 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-85230107
Alt. Phone Number	-
Email Address	ROYSTON@SMR.COM.SG
Address	C/O 587 BUKIT TIMAH ROAD #01-04
Address complement	-
Postcode	269707
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Head to Rear
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

as per sketch plan

#### ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH7495A
Vehicle Manufacturer	Honda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SIMON VAUGHAN LLOYD
NRIC No	SXXXX284F

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMAD AKMAL BIN MAIDIN KUTI
Gender	Male
Phone No	(Phone) +65-85230107
Address	C/O 587 BUKIT TIMAH ROAD #01-04
Address Complement	-
Post Code	269707
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBM4156R
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

# **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 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:

*[Signature]*

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



星發車行  
私人有限公司  
S. H. CYCLE PTE LTD  
20 AN HOA RD #01-03  
CHING SHINE INDUSTRIAL BUILDING

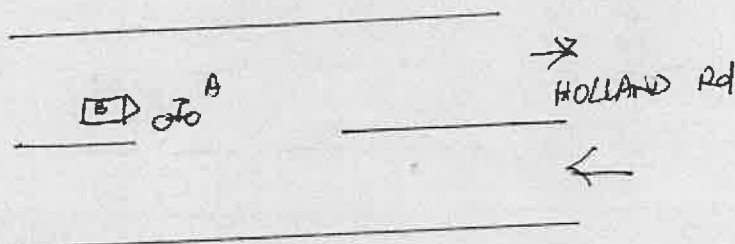
Reporting Centre Personnel's Signature  
Name: TEL: 6299 6722 FAX: 6298 4548  
NRIC/PIN No.:

SKETCH PLAN

HANOR PTE LTD

(A) FBM 4156R

(B) SLH 7495A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I was stationary at the U-Turn Junction  
somewhere after Manway Pte Ltd  
at Holland Road, suddenly a car from behind  
hit me on to my bike that caused me to  
fall on the road.

I was injured.

The incident happened on 28 April 2022 @ 4pm.

DECLARATION

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

Policyholder's Signature  
Date & Time:

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

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

S. H. CYCLE PTE LTD  
20 CHAN ROAD #01-03  
CHING SHINE INDUSTRIAL BUILDING  
SINGAPORE 367955  
TEL: 6293 8782 FAX: 6296 4548



**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**



Licence Number: **G2570606X**

Name:

**MOHAMAD AKMAL BIN MAIDIN  
KUTI**

Birth Date: **05 Mar 1995**

Issue Date: **03 Feb 2021**

Valid Till **01/03/2026**



**VISIT PASS**  
**Immigration Regulations**

19-12-2019

Name

**MOHAMAD AKMAL BIN MAIDIN KUTI**

FIN

**G2570606X**

Date of Birth

**05-03-1995**

Sex

**M**

Nationality

**MALAYSIAN**

Download SGWorkPass  
App to check status



**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED. OR WHEN A NEW CARD IS ISSUED TO YOU.**





## WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer

KENTUCKY FRIED CHICKEN MANAGEMENT PTE LTD



Name

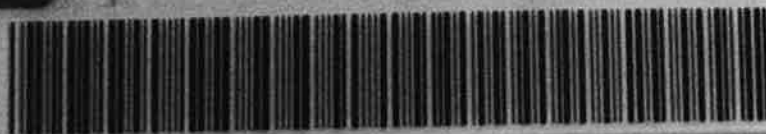
MOHAMAD AKMAL BIN MAIDIN KUTI

Work Permit No.

4 05033356

Sector

SERVICE



K2000077



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

**EFFECTIVE DATE**

Class 2B	Motorcycles $\leq$ 200cc / Electric Motorcycles $\leq$ 15kW	02 Mar 2016
Class 3C	Motor cars $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver	02 Mar 2016

NP 428A

