

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/ASM 22007055/4v43

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

FBE901A
Enfie

at Workshop m/s

of

Insured:

Policy No.

Claims No.

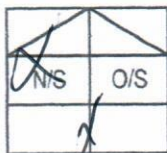
Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

43k.

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

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:

FBE901A

Yr Regn:

11/11/09

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Yamaha T135

c.c

135

Colour

Blue / Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

48214

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

5YP 301826

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:

70-90-17

R:

80-90-17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

6

Rear

6

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

19/07/22

D.O.I.

26/7/22

Survey held at

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

Rear, N/S Body

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

Date / Time

Action / Instruction

4/8/22 1/5 @ 1500 in hand m270.

we until 30-09-2024 1/5 @ 1500

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

) S + RS, SI

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	112H

Vehicle Details

Vehicle No.:	FBE901A
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Jul 2022
Vehicle Make:	YAMAHA
Vehicle Model:	T135
Primary Colour:	Red
Manufacturing Year:	2009
Engine No.:	5YP301826
Chassis No.:	5YP301826
Maximum Power Output:	-
Open Market Value:	\$1,728.00
Original Registration Date:	11 Nov 2009
First Registration Date:	11 Nov 2009
Transfer Count:	2
Actual ARF Paid:	\$260.00

Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	30 Sep 2024
COE Category:	D - Motorcycle
COE Period(Years):	5
PQP Paid:	\$1,786.00
COE Rebate Amount:	\$781.00
Total Rebate Amount:	\$781.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 22 Jul 2022

OK



Mercedes AMG Cars Singapore - Immediate Stock

Recipient of Dun and BreadStreet Business Eminence Award & Singapore Quality Brand Award.
jackcars.com.sg

OPEN

Bike model

Type Of Vehicle

Price From

Price To

Class

Any

Any

Any

Any

Q Search

More Search Options



Yamaha and Honda bikes supply. While stock's last.

SGBIKE MART

PSG

SELLER INFORMATION

Please Login to Chat

Forms To Download

- Agreement Form

Deposit Receipt

Private Settlement Form
- Handing Over Form

Final Receipt

1	Yamaha T135 Spark	
	Listing Type	Free Ad
	Brand	Yamaha
	Model	Yamaha T135 Spark
	Engine Capacity	135cc
	Classification	Class 2B
	Registration Date	20/04/2010
	COE Expiry Date	19/04/2025 (2yrs 8mths 24days COE left)
	Mileage	736419km
2	No. of owners	3
	Type of Vehicle	Cubs
		SGD \$6000



Share

Share

Report

4

Yamaha T135 Spark For Sale.
All Stock Parts, No Modifications.
Engine: 9.5/10
Exterior: 10/10
COE Non-renewable.

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 : 5105029235-03

Cover : Third Party

- | | |
|--|---------------------------------------|
| 1. Index mark and Registration Number of Vehicle | : FBE901A |
| Chassis Number | : 5YP301826 |
| 2. Name of Policyholder | : AMAL MUZAKKIR KHAN BIN JHANGIR KHAN |
| 3. Effective Date of Insurance | : 11 Nov 2021 |
| 4. Expiry Date of Insurance | : 10 Nov 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)	: AMAL MUZAKKIR KHAN BIN JHANGIR KHAN
NAMED DRIVER (2)	: MUHAMMED FAZLI ADAM BIN HAMIN
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 : TELESales-DIRECT MARKETING (00000601661)


Date of Issue : 14 Oct 2021 14:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive


REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S9773112H**
 Name: **AMAL MUZAKKIR KHAN BIN JHANGIR KHAN**
 Birth Date: **26 Nov 1997**
 Issue Date: **08 Dec 2016**

002636933F

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9773112H**


 Name: **AMAL MUZAKKIR KHAN BIN JHANGIR KHAN**
 Race: **PAKISTANI**
 Date of birth: **26-11-1997** Sex: **M**
 Country of birth: **MALAYSIA**

4855007

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


		EFFECTIVE DATE
C	Class 2B Motorcycles ≤ 200cc / Electric Motorcycles ≤ 15kW	08 Dec 2016
	Class 2A Motorcycles between 201cc and 400cc / Electric Motorcycles between 15.1kW and 25kW	16 Mar 2018
	Class 2 Motorcycles > 400cc / Electric Motorcycles > 25kW	07 Jan 2022


S9773112H S / No.9000396073

NP 428A

Licence No: S9773112H

4855007


 NRIC No. **S9773112H**


 Date of issue: **19-04-2012**

Address: **APT BLK 101 BEDOK NORTH AVENUE 4 #07-1968 SINGAPORE 460101**

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	22/07/2022 10:38 (SGT)
Reported by	Both
Date of Accident	19/07/2022 17:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIPROAD TO TAMPINES EXPRESSWAY FROM PASIR RIS DR 12
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE901A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	AMAL MUZAKKIR KHAN BIN JHANGIR KHAN
NRIC No	S9773112H
Email Address	RIKIMUZ@GMAIL.COM
Mobile Phone No	(Phone) +65-98596174
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	T135
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	135

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5105029235-03

DRIVER

Name of Driver	AMAL MUZAKKIR KHAN BIN JHANGIR KHAN
NRIC No	S9773112H
Date Of Birth	26/11/1997

Occupation	Outdoor
Date Of Driving Pass	08/12/2016
Driving experience	5 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98596174
Alt. Phone Number	-
Email Address	RIKIMUZ@GMAIL.COM
Address	101 BEDOK N AVE 4 #07-1968 S460101
Address complement	-
Postcode	-
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 - 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?	Yes
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ATTACHED

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA1663E
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	AMAL MUZAKKIR KHAN BIN JHANGIR KHAN
Gender	Male
Phone No	(Phone) +65-98596174
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBE901A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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:

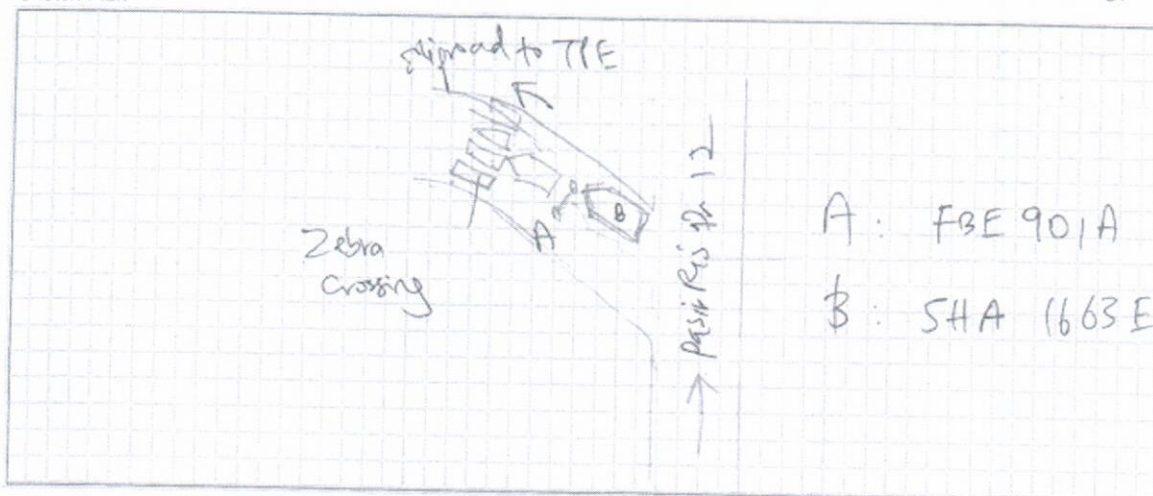
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

[Signature] 21/7/22 1415hrs
Policyholder's Signature / Date & Time

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

[Signature]
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) LEE SIM ENG

Sketch Plan



Describe Circumstance of the Accident

Refer to police report attached.

Declaration

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


21/7/22 14515

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

LEK SIA ENG

2



**SINGAPORE
POLICE FORCE**



T/20220719/2127

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3
Report No. T/20220719/2127

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/07/2022 23:04	Vide Report No.: G/20220719/0147	Station Diary No.: 107
--	-------------------------------------	---------------------------

Informant's Particulars

Name of Informant: AMAL MUZAKKIR KHAN BIN JHANGIR KHAN			Address: APT BLK 101 BEDOK NORTH AVENUE 4 #07-1968 SINGAPORE 460101		
ID Type / ID No.: NRIC NO / S9773112H			Contact No.: Home/Office: Mobile: 98596174		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 24	Date of Birth: 26/11/1997	Type of Informant: Rider		
Race: Pakistani			Language:		Institution / School Name:
Occupation: Lift technician			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 19/07/2022 17:00	Type of Location: Bend
Location: TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
FBE901A	Motorcycle	YAMAHA	T135	Red	Seriously Damaged	0
SHA1663E	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE901A	NTUC Income Insurance Co-Operative Limited	5105029235-03	11/11/2021	10/11/2022



**SINGAPORE
POLICE FORCE**



T 20220719 2127

Police Station Of Origin:

Bedok N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

Report No: T 20220719 2127

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AMAL MUZAKKIR KHAN BIN JHANGIR KHAN	ID No.	S9773112H
Related Vehicle	FBE901A (Motorcycle)	Contact No.	98596174
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/07/2022	Date Discharge	19/07/2022
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the above mentioned date, time and location while I was travelling by Pasir Ris Dr 12 towards TPE, My motorcycle got hit by a taxi (SHA1663E) from the rear. I was travelling by the said road and came to a stop before the zebra crossing. There was also a vehicle in front of me that came to a complete stop as well. While I was waiting for the front vehicle to move off because there were pedestrians crossing, the taxi collided the rear of my motorcycle causing me to fall backwards and sustaining injuries. Ambulance came soon after and conveyed me to CGH. TP also attended my incident after I was conveyed. I have no helmet camera while the incident happened. I was told by the traffic police officer to lodge this report regarding the incident.

Particulars of taxi driver, S7306287Z, Ong Meng Leong.



**SINGAPORE
POLICE FORCE**



T/20220719/2127

3 of 3

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20220719/2127

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:

G/

SGT 2 CHIA SHENG HUA

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIT /

STAFF SGT MOHAMED SUFIAN BIN

MOHAMED JUNID

Contact No.: 65476247

Signature Of Informant:

Date/Time:

19/07/2022 23:04

Classification Of Case:

BIKE RECOVERY SERVICE

HP: 8298 6622

Business Reg. No: 201216510M

CASH SALE

NO: 02472

Date: 22/7/22

Particular: _____

Vehicle No: FBS 901A Model No: LC135

From: T.P. Round To: Kun Fook Senh To EROFIA

Time: (Day/Night): _____

Others: _____

CASH \$: 701-

NOTE: Vehicle is towed at owner's risk. The Company accepts no responsibility for damages or others misdemeanour to your vehicle while being towed.

EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

E-mail: erofia@singnet.com.sg

AXIA

Owner : Amal Muzakkir Khan Bin
Jhangir Khan (98596174)

Not Authorized
26/7/22
2/5 #1500/
4 days

Accident Date : 19-Jul-22

Vehicle No : FBE901A (COE300924)

Vehicle Model : Yamaha T135

Estimated Repair Costs

Qty	Description	Amount S(\$)
<u>List Items</u>		
2	Front fork tube assy 17	\$ 640.00 X
1	Fork under bracket 17	\$ 185.00 X
1	Front wheel rim 17	\$ 380.00 X
1	Front rim shaft 17	\$ 45.00 X
1	Front rim bearing 17	\$ 38.00 X
1	Front brake disc 17	\$ 155.00 X
1	Handle-bar Best	\$ 88.00 /
1	Handle-bar end (1 set) 30	\$ 90.00 /
1	Hand grip (1 set) 40	\$ 55.00 /
1	Side mirror (1 set) 60	\$ 110.00 /
1	Clutch lever 47	\$ 42.00 /
1	Front signals (1 set) 105	\$ 140.00 /
1	Fairing assy (1 set) 480	\$ 525.00 /
1	Front footrest bracket Best	\$ 85.00 /
2	Front footrest rubbers 30	\$ 70.00 12C
1	Gear pedal Best	\$ 58.00 /
2	Rear footrests 40	\$ 80.00 12C
2	Rear footrest brackets 50	\$ 156.00 X
1	Rear lamp 205	\$ 325.00 /
1	Rear fender 148	\$ 258.00 /
		\$ 3,525.00
	Less 10%	\$ 352.50
		\$ 3,172.50

Special Net Items

1	Number plate (1 set) Rear	\$ 38.00 15
2	Fork oils 17	\$ 30.00 4
2	Fork oil seals 17	\$ 56.00 4
1	Steering cone (1 set) 17	\$ 90.00 X
1	E.R.P. IU 50	\$ 180.00 X
1	Rear box 47	\$ 380.00 200
1	Rear box bracket Best	\$ 180.00 100
		\$ 954.00

EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

E-mail: erofia@singnet.com.sg

Owner : Amal Muzakkir Khan Bin
Jhangir Khan (98596174)

Accident Date : 19-Jul-22

Vehicle No : FBE901A (COE300924)

Vehicle Model : Yamaha T135

Estimated Repair Costs

S/No.	Labour	
1	To provide towing service (LOD) \$70.00	\$ -
2	To check wiring and reset headlamp focusing	\$ 12 80.00 X
3	To repair body frame	\$ 12 480.00 X
4	To provide labour	\$ 420.00 300
		\$ 980.00
Grand Total		\$ 5,106.50

Singapore Dollars: Five Thousand One Hundred Six and Cents: Fifty onlt



EROFIA MOTOR TRADING PTE LTD

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:

P- 1411
102
1269.90
315
300
1884.9
203
1507