

ASS. REC. BY:

REF:

SMR/ 22008089/kv

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured: SHC 4988M

Policy No.

Claims No. TAX/08/22/2052

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
X	X

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

02 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:

FBG 480

Yr Regn:

10, 13

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

Truck / Trailer or

Make:

Honda

CBR 400 c.c

399

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

41830

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

NC 47

1003576

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

120/70ZR17

R:

160/60ZR17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / 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.

19/8/22

D.O.I.

29/8/2022

Survey held at

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

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

Date / Time

Action / Instruction

5/9/22

Kenneth informed LS \$2300 (Red 2942, 56%)

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

1)

Date/Time, File Return to?

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS. SI

Fees

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

TOTAL

Report Format: TP

Lump Sum / L.B.I: (\$ 2300)

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

Date: 23rd August 2022

To : *LKK*

Attn :

Tel :

By Fax:

*Not Withain
11 hrs @
Penny After Rain
2 days*

VEHICLE NO : FBG 48C

Honda CBR 400R M

ACCIDENT DATE: 19/8/2022

<u>Description</u>	<u>Qty</u>	<u>Quotation \$</u>
1 Rear Mudguard	1	<i>sn</i> 280.00 <i>X</i>
2 Swing Arm	1	<i>sn</i> 1,200.00 <i>X</i>
3 Swing Arm Shaft Rear	1	<i>sn</i> 850.00 <i>X</i>
4 Swing Arm Shaft Front	1	<i>sn</i> 800.00 <i>X</i>
5 Swing Arm Bush	1	<i>sn</i> 280.00 <i>X</i>
6 Exhaust Pipe	1	<i>sn</i> 1,600.00 <i>✓</i>
7 Exhaust Guard	1	<i>sn</i> 290.00 <i>✓</i>
8 Signal Light	1	<i>sn</i> 130.00 <i>✓</i>
Sub-Total		5,430.00
Less 10%		543.00
Sub-Total		4,887.00

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 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 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	22/08/2022 18:10 (SGT)
Reported by	Both
Date of Accident	19/08/2022 15:00 (SGT)
Exact Location of Accident	Bedok North Rd, Singapore
Additional Location Information	LANE 2 OF BEDOK NORTH ROAD (TOWARDS TAMPINES AVE 1)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG48C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TITUS LEE JIA HAO
NRIC No	SXXXX002B
Email Address	LZBKEN@HOTMAIL.COM
Mobile Phone No	(Phone) +65-89096808
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	CBR400R M
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	400

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MC/00296442/06

DRIVER

Name of Driver	TITUS LEE JIA HAO
NRIC No	SXXXX002B
Date Of Birth	24/01/1985

SKETCH PLAN

Direct Asia

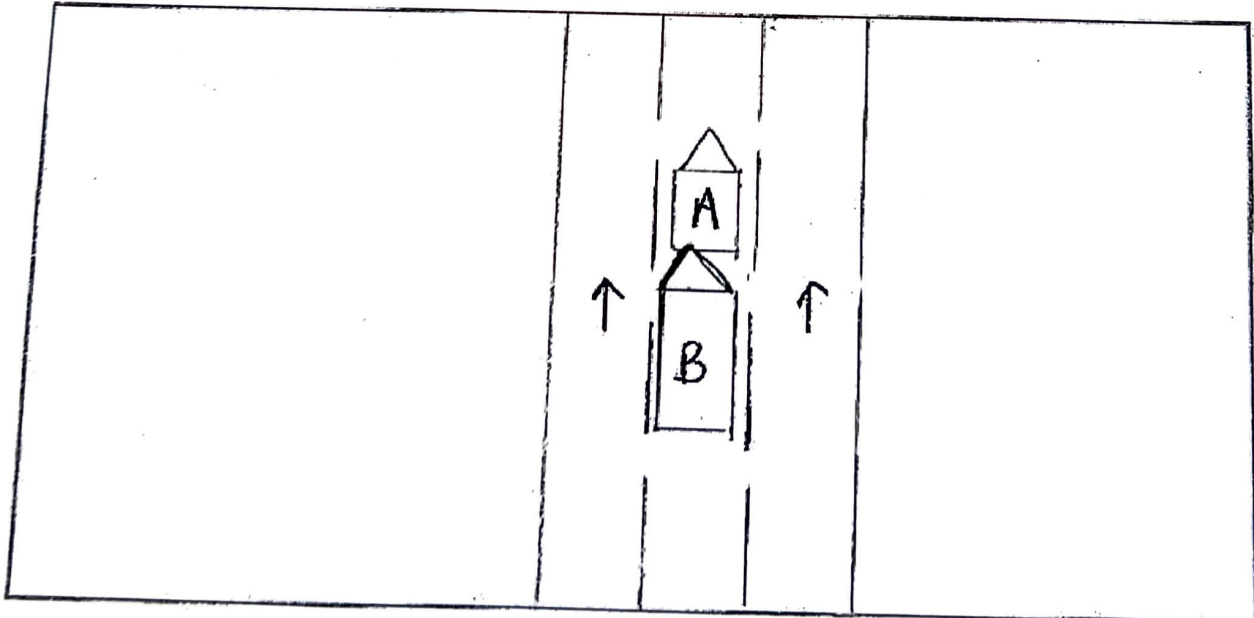
Vehicle: FBG148C

22/08/2022

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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 be 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 an 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 making 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.
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may be 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.

Sketch Plan



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

ALLIANCE MOTOR COMPANY