

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TPWS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

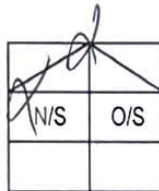
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

RM 3800

Consistent? : Yes or No

Consistent? : Yes or No

days Res.: Yes or No

% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

JPU 4120

Yr Regn:

13

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

Truck / Trailer or

Make:

Yamaha 135LC c.c 135

Colour:

Black

A/C: Insured / Std / NI / NA

Sp. Reading

37434

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

PM1/UG041030204342

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:

R:

80/90-17

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

16/02/20

D.O.I.

29/09/22

Survey held at

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

Rt, N/S Body

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

Date / Time

Action / Instruction

under insure
45 \$1200

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:

) __ \$ + RS __ \$

) Photos

) Others

)

TOTAL

Report Format :

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

)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

)

Allianz General Insurance Company (Malaysia) Berhad (735426-V)

LEVEL 29, MENARA ALLIANZ SENTRAL,
203, JALAN TUN SAMBANTHAN,
KUALA LUMPUR SENTRAL 50470 KUALA LUMPUR
E-Mail: general@allianz.com.my

Customer Service

GROUND FLOOR, BLOCK 2A,
PLAZA SENTRAL, JALAN STESEN SENTRAL 5,
KUALA LUMPUR SENTRAL, 50470 KUALA LUMPUR
Email: customer.service@allianz.com.my

Tel : 03-22641188
Fax : 03-22641199

Tel : 03-2264 0700
Fax : 03-2264 0602
Toll Free No : 1-300-88-1028



RTD CODE : 13

ORIGINAL COPY

THE SCHEDULE
JADUAL

STAMP DUTY PAID
DUTI SETEM DIBAYAR

M.Y.3		MOTORCYCLE ALL RIDER - INDIVIDUAL	
PERIOD OF INSURANCE		Date of Issue/Time	
(a) From 17-01-2020 (both dates inclusive)		29-12-2019	
Dari 17-01-2020 (termasuk kedua-dua tarikh)		Tarikh Dikeluarkan/Waktu	
To 16-01-2021		12:01 AM	
Hingga 16-01-2021		E-Cover Note No.	
(b) Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		No. Nota Perlindungan	
Sebarang tempoh selanjutnya di mana Anda hendaklah membayar, dan Kami hendaklah bersetuju menerima premium pembaharuan.		PMIS-588478	
INSURED		Account No.	
PEMUNYA		No. Akaun	
SELVAM A/L MUNIANDY ✓		JB07104	
ADDRESS		Premium	
ALAMAT		Loading 0.00%	
NO 24		209.79	
JLN TIMOR 22		0.00	
TMN TIMOR		NCD 25.00%	
81300 JOHOR BAHRU		52.45	
JOHOR		Extra Coverage	
OCCUPATION/TYPE OF BUSINESS		INCLUSION OF SPECIAL PERILS	
PERNIAGAAN/PEKERJAAN		(MOTORCYCLE)	
Others		DEATH/ PD - INSURED/AUTHORISED RIDER ✓	
HIRE PURCHASE		HOSPITAL INCOME - INSURED	
CASH		HOSPITAL INCOME - AUTHORISED RIDER	
OWNERS/EMPLOYER'S LOAN		GROSS PREM	
SEWA BELUPINJAMAN MAJIKAN		157.34	
		STAMP DUTY	
		10.00	
		SERVICE TAX 6.00%	
		9.44	
		TOTAL DUE	
		176.80	
		AMOUNT	
		176.78	
		PAYABLE(ROUNDED)	
PARTICULARS OF VEHICLE		COMPULSORY EXCESS	
BUTIR-BUTIR KENDERAAN		100.00	
Make and Type of Body		Registration No./Trailer No.	
Buatan dan Jenis Badan		No. Pendaftaran/No. Treler	
YAMAHA 135LC		JPU4120	
Engine No.		Engine C.C/Horse Power/Tonnage	
No. Enjin		CC Enjin/Kuasa Kuda/Tan	
G399E-204342		135 CC	
Chassis No.		Seating Capacity	
No. Chasis		Muatan Tempat Duduk	
PMYUG0410D0204342		2	
NRIC No./Bus. Regn. No.		Year Of Manufacture	
No. Kad Pengenalan/No. Pendaftaran Perniagaan		Tahun Dibuat	
661227-08-5503		2013	
Telephone No.		Regn. Card No.	
No. Telefon		No. Kad Pendaftaran	
01251254525		NA	
Type of Cover		Jenis Perlindungan	
COMPREHENSIVE			
This Policy is subject to the following endorsements as printed in this Policy or added thereon or attached thereto :- Polisi ini adalah tertakluk kepada pengenderson yang telah dicetak atau dikembali atau dimasukkan kedalamnya. ENDT. 94 - COMPULSORY EXCESS - DAMAGE CLAIMS MCPA1-1 - DEATH/PERMANENT DISABLEMENT - INSURED/AUTHORISED RIDER (SUM INSURED RM5,000) ✓ MCPA2 - HOSPITAL INCOME - INSURED (RM50 PER DAY) ✓ MCPA2-1 - HOSPITAL INCOME - AUTHORISED RIDER (RM50 PER DAY) ✓ ENDT.57 - INCLUSION OF SPECIAL PERILS ENDT. 15 - HIRE PURCHASE			
NAMED DRIVERS			
LOGGING COMPLAINTS & GRIEVANCES			
IF YOU HAVE ANY COMPLAINTS OF UNFAIR MARKET PRACTICES BY THE COMPANY, YOU MAY CALL OR WRITE TO :			
1. CUSTOMER FEEDBACK CENTER ALLIANZ GENERAL INSURANCE COMPANY (MALAYSIA) BERHAD GROUND FLOOR, BLOCK 2A, PLAZA SENTRAL, JALAN STESEN SENTRAL 5, KUALA LUMPUR SENTRAL, 50470 KUALA LUMPUR. TEL : 03-2264 0700 FAX : 03-2264 0602 EMAIL : customer.service@allianz.com.my		2. OMBUDSMAN FOR FINANCIAL SERVICES ("OFS") (Formerly known as Financial Mediation Bureau) LEVEL 14, MAIN BLOCK, MENARA TAKAFUL MALAYSIA, NO. 4, JALAN SULTAN SULAIMAN, 50000 KUALA LUMPUR. TELNO: +603-2272 2811 FAX NO: +603-2272 1577 EMAIL : enquiry@ofs.org.my	
3. LAMAN INFORMASI NASHAT DAN KHIDMAT (LINK) BANK NEGARA MALAYSIA GROUND FLOOR BLOCK C, JALAN DATO' ONN, 50480 KUALA LUMPUR. TOLL FREE: 1-300-88-5465 FAX NO.: 03-2174 1515 EMAIL: bnmtelelink@bnm.gov.my			
Geographical Area : Malaysia, Republic of Singapore and Negara Brunei Darussalam Kawasan Geografi : Malaysia, Republik of Singapura dan Negara Brunei Darussalam Limitations as to Use / Authorised Driver : As described in the Certificate of Insurance Had Penggunaan / Pemandu Yang Diberi kuasa : Seperti yang tercatat dalam Sijil Insurans		Issued By / Dikeluarkan oleh 21506HAFEEZ POS MALAYSIA BERHAD - TAMAN UNGKU AMINAH	
Please ensure All accidents are reported to the Police within 24 hours. Pastikan semua kemalangan hendaklah dilaporkan kepada pihak Polis didalam masa 24 jam. Issued in lieu of and Cancelling/Replacing Cover Note/Policy No. : - Dikeluarkan Sebagai Pembatalan/Penggantian/No. Nota Perlindungan/ No. Polisi Date of Signature of Proposal & Declaration : 29-12-2019 Tarikh Tandatangan Cadangan dan Akaun		ALLIANZ GENERAL INSURANCE COMPANY (MALAYSIA) BERHAD (735426-V)  Authorised Signature	

Important Notice : Policy print out can be obtained from our branch offices located nationwide or from your servicing agents.
Kenyataan Penting : Cetakan polisi boleh diperolehi daripada pejabat cawangan kami di seluruh negara ataupun daripada ejen Allianz Anda.
MT04906/09070/FF278




yamaha 135Lc
 RM 4 250
 Used
 2013

 Sep 27, 21:11
 Selangor



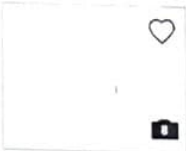

USED 2013 YAMAHA 135LC ENJIN CUnn
 RM 4 200
 Used
 2013

 Sep 27, 15:30
 Johor



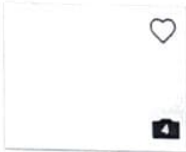

Yamaha Lc V2
~~RM 6 500~~ RM 6 000
 Used
 2013

 Sep 27, 15:07
 Perak



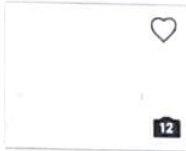

LC 135 5s v2
 RM 5 800
 Used
 2013

 Sep 27, 09:24
 Penang



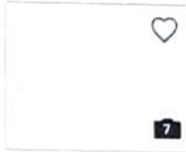

Moto Lc135 5s
 RM 4 800
 Used
 2013

 Sep 26, 20:30
 Penang



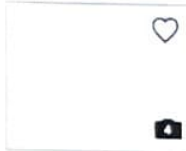

lc135 V2 5s
 RM 5 800
 Used
 2013

 Sep 26, 16:44
 Kedah



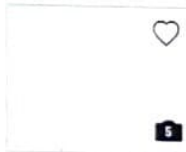

YAMAHA LC135 V2 Tahun 2013 UNTUK DIJUAL
 RM 5 400
 Used
 2013

 Sep 26, 15:50
 Selangor




yamaha lc 135 v2
 RM 4 700
 Used
 2013

 Sep 26, 15:26
 Perak




2013 Yamaha lc135
 RM 4 450
 Used
 2013

 Sep 26, 15:24
 Kedah




YAMAHA LC 135 4s FOR SALE
 RM 5 500
 Used
 2013

 Sep 26, 14:30
 Kelantan

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