

### QUOTATION

NO. : 42005

- Rev. 1

AXA INSURANCE PTE LTD

8 Shenton Way, #27-01 AXA Tower Singapore 068811

Customer

ATTN: MOTOR CLAIMS DEPT

DATE

: 31/10/2022

CLAIM NO.

: 12036

POLICY NO. : MC/00914099/01

FROM

: STEPHANIE

VEHICLE NO. MAKE/MODEL FBK6058M

: YAM / YBR125

(Page 1 of 2)

<u>S/N</u>	Description	Action	Qty	Unit Price	Amount
1	COVER TAIL RH (RED) P/N: 53007 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$90.00	90.00
2	COWLING FRONT (RED) P/N: 52897 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$133.00	133.00
3	CRASH BAR P/N: 35878 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$203.00	203.00
4	HEADLAMP ASSY P/N: 43129 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$105.00	105.00
5	LABOUR P/N: 06766 - (REPORTED BY MECHANIC)	REPLACE	6.00	\$63.00	378.00
6	LAMP SIGNAL FRONT RH P/N: 43432 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$21.00	21.00
7	LAMP SIGNAL REAR RH P/N: 44191 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$21.00	21.00
8	LEVER BRAKE P/N: 26343 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$19.00	19.00
9	METER ASSY P/N: 42063 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$264.00	264.00

\*42005





S/N	Description	Action	Qty	Unit Price	Amount
10	MIRROR RH P/N: 58187	REPLACE	1.00	\$35.00	35.00
11	- (REPORTED BY MECHANIC) MUDGUARD FRONT (RED) P/N: 42220 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$49.00	49.00
12	PROTECTOR EXHAUST P/N: 68051 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$77.00	77.00
13	PROTECTOR EXHAUST CAP P/N: 68052 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$49.00	49.00
14	STICKER (MCDONALDS) WINDSHIELD V2 P/N: 56223 - (REPORTED BY MECHANIC)	REPLACE	1.00	\$16.00	16.00
15	STICKER NUMBER PLATE FRONT (BLACK) STRAIGHT P/N: 32921	REPLACE	1.00	\$27.00	27.00
16	- (REPORTED BY MECHANIC) TRANSPORT CHARGES P/N: 07169	Supply/Instali	1.00	\$56.00	56.00
		SUB TOTAL GST @ 7 %			\$1,543.00 \$108.01
		GRAND TOTAL (SGI	O)		\$1,651.01

### 50% deposit required before ordering of parts.

Validity: 30 days

For & on Behalf of

Acknowledge & Accepted By

BAN HOCK HIN CO PTE LTD



RAYMOND

This quotation is sent via email / LAN-Fax and will bear a computer generated signature.

\*42005 \*



SA1D22AN0007 / Ajax Mars Pte Ltd ENTRY DATE & TIME: 25/10/2022 23:49 (SGT) SUBMITTED BY: Susan VERSION: 1 (25/10/2022 23:49 (SGT))



### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

  2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

  3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

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  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 25/10/2022 23:49 (SGT) Reported by Driver Date of Accident 22/10/2022 15:10 (SGT) Exact Location of Accident Singapore Additional Location Information 846 Yishun ring road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE				
Vehicle Registration Number	FBK6058M			
INSURED/POLICYHOLDER				
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes BAN HOCK HIN CO PTE LTD 1XXXXX288K raymond@bhh.com.sg (Phone) +65-62816520 (Office) +65-62816520			
VEHICLE PARTICULARS				
Manufacturer Model 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? Vehicle Category Transmission CC	Yamaha YBR125 - Employment No - Reporting only Motorcycle Manual 125			
Name of Insurance Company Policy Number / Cover Note Number	Direct Asia Insurance (Singapore) Pte Ltd MC/00914099			
Name of Driver Work Permit No Date Of Birth Occupation	Gao Xiang GXXXX244N 15/11/1997 Outdoor			

Date Of Driving Pass 15/11/2021 Driving experience 11 MONTHS Gender Male Mobile Number (Phone) +65-93611507 Alt. Phone Number Email Address workshop@bhh.com.sg Address Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 0 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? No Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

My bike FBK6058M was parked at the open carpark of Blk 846 Yishun Ring Road. And my friend witness that the 3rd party SMD8331S had make a reverse and hit onto the company bike. My manager managed to take some photos and exchange particulars with the driver. No injuries was involved at the scene.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**



Name of Driver	Ong Beng Chong
NRIC No	SXXXX207J
Contact Number	2
Address	
Address complement	=
Postcode	-
Insurance Company Name	:0
Nature Of Damage	(7)
Details of property damaged in accident	22
No. Of Passenger (Including Driver)	9

### SKETCH PLAN

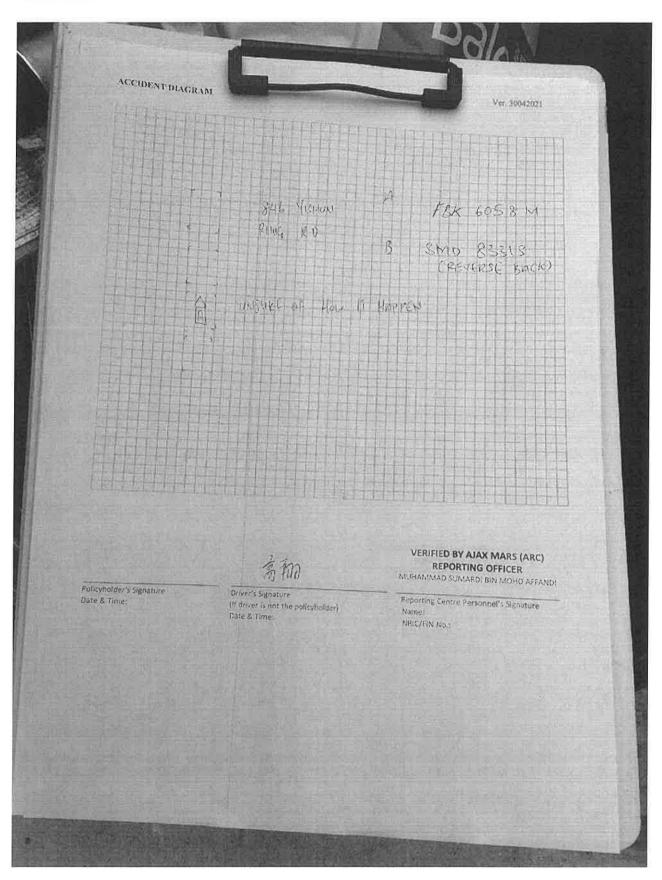
### IMPORTANT NOTICE

- 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 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)

Lunderstand, 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 shall be collectively referred to as the "Insurers"), the insurers "Inw yers/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 doaling with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, involces, 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 fisurers' 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

			3	NO	Witnessed By Reporting Officer Muhammad Sumardi Bin Mohd Affan		
Policyholder's Signature / Date & Time		Driver's Signature (If driver is not the policyholder) / Date & Time			Witnessed by Reporting Centre Personnel		
Sketch Plan							
REFER TO ATT	TACHE	D ACCID	ENT DIAG	SRAM			



Describe Circumstances of the Accident

## manager managed to take some photos and exchange particulars with the driver. No injuries was Involved at the scene Declaration We declare the foregoing particulars are true in every respect. 自利 Witnessed By Reporting Officer Witnessed By Reporting Officer Muhammad Sumardi Bin Mohd Affandi Witnessed by Reporting Centre Policyholder's Signature / Date & Witnessed by Reporting Centre Personnel

My blke FBK6058M was parked at the open carpark of Blk 846 Yishun Ring Road. And my friend witness that the 3rd party SMD83315 had make a reverse and hit onto the company bike. My

### INSURER ENQUIRY Find insurer

Vehicle reg. no.

SMD8331S

**Date of Accident** 

22/10/2022

Reset

### % RESULT & RECEIPT

# TP Insurer Enquiry Insurance \_\_\_\_\_\_\_AXA Insurance Pte Ltd Period of Insurance \_\_\_\_\_\_26/10/2021 - 25/10/2022 Requested By \_\_\_\_\_\_Tan Chok Lok (Ban Hock Hin C... Requested Date \_\_\_\_\_\_27/10/2022 15:43

### Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13** 

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

### **General Insurance Association**

Records Management Centre GST Registration No: **M400017735** 



### **Vehicle Details**

CO2 Emission:

Vehicle No. Make / Model YAMAHA / YBR125 FBK6058M Vehicle Type: Vehicle Attachment 1: P00 - Passenger No Attachment Motorcycle/Autocycle/Moped Vehicle Scheme: Chassis No.: Normal LBPRE101000055618 Propellant: Engine No.: E3F5E040622 Petrol Engine Capacity: Motor No.: 124 cc Maximum Power Output: Power Rating : Maximum Laden Weight: Unladen Weight: 114 kg 320 kg Original Registration Date: Year Of Manufacture: 2015 05 Nov 2015 Lifespan Expiry Date: COE Category: D - Motorcycle Quota Premium : COE Expiry Date: 04 Nov 2025 \$6,201.00 PARF Eligibility Expiry Date: Road Tax Expiry Date: 04 May 2023 Inspection Due Date: Intended Transfer Date: 01 Nov 2022 04 Nov 2023

CEV/VES Rebate Utilised Amount