

ASS. REC. BY: 20mREF: CS3/CT122064927/Rg3

p3-1

~~228~~ 258R

ASSIGNMENT

From: _____

Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: FBR 52662at Workshop m/s CHEK KONGof Yew TeeInsured: CTI

Policy No. _____

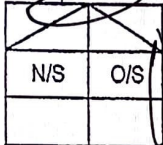
Claims No. SNM22D203308/C02

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: 11K

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: FBR 52662Yr Regn: 2020, JulyType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: YAMAHA MAX KINSHI 150M c.c. 150Colour MULTI

A/C: Insured / Std / NI / NA

Sp. Reading 41797

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MH3460750LK71227Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModl: Nil / 8/Rim / STD A/Rim orTyre Size: F: 90/80-17R: 120/70-17BS / DUR / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 3 mmR/Bal. 3 mm

L/Bal. _____ mm

L/Bal. _____ mm

D.O.A. 12/05/22D.O.I. 25/05/22Survey held at CHEK KONGDes. 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

REPAIR LIMIT - 5.5KESTIMATE RANGE OF REPAIR / NO. OF DAYS - 2K-3K7 / 4 days

31/05/22 Submit PRS.

02/05/23 Submit LS \$2600, 4 days. (Red \$1000, 28%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 02/05 Typist

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

) \$ + RS. \$ _____

) Photos

) Others

Report Format: TPLump Sum / L.S. : 2600



SINGAPORE POLICE FORCE



T/20220512/2118

1 of 4

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

Report No. T/20220512/2118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/05/2022 20:06		Vide Report No.:		Station Diary No.: 45	
Informant's Particulars					
Name of Informant: MUHAMMAD LUFTI BIN LATIF			Address: APT BLK 404 FAJAR ROAD #02-271 SINGAPORE 670404		
ID Type / ID No.: NRIC NO / S9301778A			Contact No.: Home/Office: Mobile: 86130414		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 22/01/1993	Type of Informant: Rider		
Race: Malay		Language:		Institution / School Name:	
Occupation: DESPATCH RIDER		Driving Licence Information: Class: 2B,2A,3		Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/05/2022 14:35	Type of Location: Bend
Location: JURONG WEST STREET 25				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control:		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBR5266Z	Motorcycle	YAMAHA	MX KING T150 MANUAL		Slightly Damaged	0
GBB6739D	Lorry	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD 3.4T		Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220512/2118

Police Station Of Origin:
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427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

2 of 4

Report No. T/20220512/2118

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD LUFTI BIN LATIF	ID No.	S9301778A
Related Vehicle	FBR5266Z (Motorcycle)	Contact No.	86130414
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	12/05/2022	Date Discharge	12/05/2022
No. of Days granted Medical Leave	14	Degree of Injury	Serious
Driver			
Name	VEERAPPAN RAVIKUMAR	ID No.	G7434007K
Related Vehicle	GBB6739D (Lorry)	Contact No.	97785035
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: 25/09/2023
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 12/05/2022 at about 1435hrs, I was riding my motorcycle FBR5266Z along Jurong West St 25 heading towards Westwood Secondary School. It was not raining and traffic was light.

I was riding behind a lorry GBB6739D. It was a one lane road.

There was another car in front of the lorry.

As we were approaching Westwood secondary School, the said car made an illegal u-turn near lamppost 11.

The lorry in front of me slowed down and moved to the left side of the lane. I then decided to overtake him from the right after making sure there is enough distance between my motorcycle and his lorry.

I then overtook him. During which, the lorry made an illegal u-turn on his right near lamp post 11.

He did not notice me and his front right side of his vehicle collided into the right side of my vehicle. I fell off my bike.

The driver rendered assistance. No ambulance nor police attended to scene. Both of us exchanged particulars.



**SINGAPORE
POLICE FORCE**



T/20220512/2110

Police Station Of Origin:

Clementi NPP

127 Clementi Avenue 3 #01-456

SINGAPORE 120427

Tel No: 1800-7759999

3 of 4

Report No. T/20220512/2118

CONTINUATION OF REPORT

I went to Ng Teng Fong General Hospital and was given 14 days of hospitalization leave ref 1173789830.
I have abrasions on leg and arm, i also suffered a closed right ankle fracture.



SINGAPORE POLICE FORCE



T/20220512/2118

4 of 4

Report No. T/20220512/2118

Police Station Of Origin:
Clementi NPP
27 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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:

D /

Other MUHAMMAD SHAHRIL
BIN AHMAD

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Other MUHAMMAD NOOR BIN ABDUL
RAHMAN

Contact No.: 65476219

Signature Of Informant:

Date/Time:

12/05/2022 20:06

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	258R
Vehicle No.:	FBR5266Z
Vehicle to be Exported:	No
Intended Deregistration Date:	30 May 2022
Vehicle Make:	YAMAHA
Vehicle Model:	MX KING T150 MANUAL
Primary Colour:	Blue
Manufacturing Year:	2020
Engine No.:	G3E6E0589782
Chassis No.:	MH3UG0750LK071227
Maximum Power Output:	-
Open Market Value:	\$1,885.00
Original Registration Date:	30 Jul 2020
First Registration Date:	30 Jul 2020
Transfer Count:	1
Actual ARF Paid:	\$283.00

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

COE Expiry Date:	29 Jul 2030
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,510.00
COE Rebate Amount:	\$5,312.00
Total Rebate Amount:	\$5,312.00

The information contained herein is correct as at 30 May 2022

OK

Yamaha MX King 150

Listing Type	Paid Ad
Brand	Yamaha
Model	Yamaha MX King 150
Engine Capacity	150cc
Classification	Class 2B
Registration Date	03/12/2019
COE Expiry Date	02/12/2029 (7yrs 6mths 2days COE left)
Mileage	-
No. of owners	-
Type of Vehicle	Cubs

SGD **\$10800**