

(08/11/13) wef

ASS. REC. BY: Paul

REF:

CS3/LPC22008207/Rm3-1

89CC

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: FBT 22754at Workshop m/s SPORTS MOTOof 71, Woodmans Ind Pk #101-18 Ave 9

Insured:

LPC

Policy No.

Claims No.

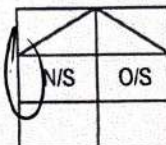
Sum Insured:

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:

20K

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

REPAIR LIMIT - 11K

Veh No:

FBT 22754Yr Regn: 2021 / D6CType: M.Car (M.Cycle) Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

HONDA NC 750XAc.c 745

Colour

MULTI

A/C: Insured / Std / NI / NA

Sp. Reading

14766

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

34 2RH 09A9MK 005 212Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

120/70ZR17

R:

160/60ZR17BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

24/08/22

D.O.I.

29/08/22

Survey held at

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

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

ESTIMATE RANGE OF REPAIR / NO. OF DAYS - (1k-2k) / 3 days

24/04/23 Submit LS \$1150, 3 days. (Red \$1850, 62%)

Date/Time, File Pass to?



Prel. Report

1) 24/04 tYpist



Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Report Format :

TPLump Sum H.B.: (\$1150

)

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 at the said.

ACCIDENT STATEMENT

Date of Submission	25/08/2022 11:26 (SGT)
Reported by	Both
Date of Accident	24/08/2022 19:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 303 WOODLANDS STREET 31 OPENSPACE CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBT2275G
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INSURED POLICYHOLDER

Is company?	No
Name Of Registered Owner	MUHAMMAD HELMI BIN HASHIM
NRIC No	S8136881C
Email Address	royracer00@gmail.com
Mobile Phone No	(Phone) +65-96911653
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	NC 750X
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	750

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5125126502

DRIVER

Name of Driver	MUHAMMAD HELMI BIN HASHIM
NRIC No	S8136881C
Date Of Birth	01/11/1981
Occupation	Indoor

ate Of Driving Pass	19/08/2008
Driving experience	14 YEARS
Gender	Male
Mobile Number	(Phone) +65-96911653
Alt. Phone Number	-
Email Address	royracer00@gmail.com
Address	BLK 402 WOODLANDS STREET 41 #06-126
Address complement	-
Postcode	730402
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Raining
Road Surface	Wet

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?	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 VEHICLE PARK STATIONARY ON THE SERVICE ROAD. WHEN I REUTRN TO MY BIKE. VEHICLE B INFORM THAT HE HIT ONTO MY BIKE FRONT WHILE REVERSING. MY BIKE FELL ONTO THE LEFT SIDE.

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	GBF189J
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	ZHU BIGANG

Passport No/FIN	G2182831P
Contact Number	(Phone) +65-91386002
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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 willful 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 G.A. Reforms Management Centre established by the General Insurance Association of Singapore (GIAS) 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 in the Centre and to copies of the report being made available aforesaid.

B. Consent under the Personal Data Protection Act (PDPA)

I do hereby acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore (GIAS) 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 a third party who have insured vehicle(s) involved in this accident (all insurers) 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 purposes of:

- (i) processing, handling and 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 responses to my enquiries, by me;
- (iv) administering my claims (including the making of claims, expenditure of claims, interest, reports, or refusal to pay, which could involve disclosure of certain personal information) time to time about delivery of the claims to, or for, the external users of envelopes, etc. packages, and/or
- (v) complying with applicable law and/or existing provisions, law, Regulation, Statute with my claim, collectively the **Purposes**.

(b) all Insurers (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 my Personal Information may be disclosed by any of the Insurers and/or GIAS to their third party service providers or agents, including their lawyers, law firms, which may be used, subject of disclosure, for one or more of the above Purposes.

[Signature]

25-08-2022 11:20HRS

Policyholder's Signature Date & Time

Driver's Signature (if not the Policyholder) Date & Time

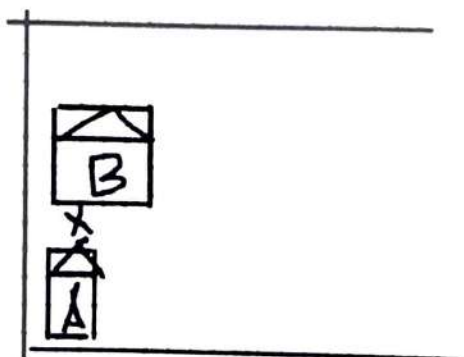
[Signature]

TEN TOH KIAT HENRY

Witnessed by Reporting Centre Personnel Name (Print) NRIC (Print)

Sketch Plan

A-FBT2275G
B-GBF189J



Describe Circumstance of the Accident

REFER TO GEARS

Declaration

We declare the foregoing particulars are true in every respect



25 08 2022 1120HRS

First declarant (signature) Date & time

Declarant (signature) Date & time Address of declarant (signature) Date & time



TIEN TOH KIAT HENRY

Witness (signature) Date & time Address of witness (signature) Date & time

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	881C
Vehicle No.:	FBT2275G
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Aug 2022
Vehicle Make:	HONDA
Vehicle Model:	NC750XA
Primary Colour:	Black
Manufacturing Year:	2021
Engine No.:	RM09E5005885
Chassis No.:	JH2RH09A9MK005212
Maximum Power Output:	-
Open Market Value:	\$7,619.00
Original Registration Date:	20 Dec 2021
First Registration Date:	20 Dec 2021
Transfer Count: -	1
Actual ARF Paid:	\$2,060.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	19 Dec 2031
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$9,052.00
COE Rebate Amount:	\$8,419.00
Total Rebate Amount:	\$8,419.00

The information contained herein is correct as at 30 Aug 2022

OK

Honda NC750XA

Listing Type

Free Ad

Brand

Honda

Model

Honda NC750XA

Engine Capacity

745cc

Classification

Class 2

Registration Date

09/02/2021

COE Expiry Date

08/02/2031

(8yrs 5mths 9days COE left)

Mileage

8000km

No. of owners

1

Type of Vehicle

Sport Tourers

SGD \$20000