



GOH JP & WONG LLC

advocates & solicitors
commissioner for oaths & notary public

GOH TECK WEE

WONG TZE ROY

WONG FUNG KWAI

SOON WEI SONG

133 New Bridge Road #16-09 Chinatown Point Singapore 059413
Tel: 6538 5868 Fax: 6538 4898 (Not for service of Court documents) Email: mail@gohjpwong.com
Goh JP & Wong LLC is a law corporation with limited liability. GST/UEN: 201406078M

60222886

YOUR REF:

OUR REF:

GTW.ACC.5045.22.wk

WHEN REPLYING, PLEASE QUOTE OUR REFERENCE NO

DATE:

24 AUG 2022

Charles Ashley Ishwaran
94 Whampoa Drive
#19-226 Singapore 320094

By Certificate of Posting

Dear Sirs

TRAFFIC ACCIDENT INVOLVING FBR 5865U & SFW 1880C ON 6.5.2022 ALONG BALESTIER ROAD

We act for Hasyafiq Bin Razali in the above matter.

We are instructed by the abovenamed to claim damages against you in connection with an accident on 6th May 2022 at about 1900 hrs along Balestier Road involving our client's motorcycle FBR 5865U and motorcar SFW 1880C driven by you at the material time.

We are instructed that the accident was caused by your negligent driving and/or management of the motor car. As a result of the accident, our client suffered personal injuries. His injuries are set out in the medical report annexed to this letter. He has been put to loss and expense, particulars of which are as follows:

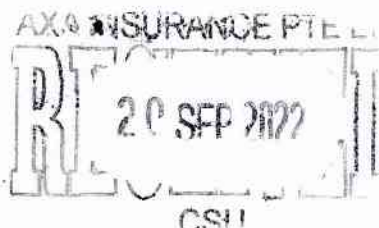
1. Particulars of injuries

Left hip tenderness and left elbow tenderness

2. Quantification of Claim

General Damages	\$1,000.00
Special Damages	
a) Costs of Repair	\$5,250.00
b) Loss of Use at \$30.00 per day for 12 days	\$ 360.00
c) Survey Fees	\$ 580.00
d) Medical Expenses (and still continuing)	to be assessed
e) Loss of Income	to be assessed
f) Loss of person items	\$ 488.00
1. Helmet - \$200.00 (discarded)	
2. Bluetooth headset - \$88.00 (discarded)	
3. Jacket - \$200.00 (discarded)	
	\$6,678.00
TOTAL	\$7,678.00

3020125361--



3. Names of witnesses

- | | |
|------------------------|------------------------------------|
| a) Witnesses of facts: | 1) Hasyafiq Bin Razali |
| | 2) Representative from M1 Motoring |
| b) Expert witnesses: | 1) Dr Judith Goh Ziu Hui |



MESSRS GOH JP & WONG LLC

PAGE 2

2) Representative from Prudent Adjustors Services

In accordance with paragraph 2.7 and 4.5 of the Appendix B of the Pre-Action Protocol for Personal Injury Claims and Non-injury Motor Accident Claims, we propose the aforementioned expert(s) as the single joint expert ("SJE") for their respective fields of expertise.

1. Dr Judith Goh Ziu Hui of Tan Tock Seng Hospital as the medical common expert
2. Bok Jee Tan from Prudent Adjustors Services as the motor surveyor common expert
4. Officer in Charge of Investigation/ Traffic Police Investigation Result

Pending

A copy each of the following supporting documents is enclosed:

1. Our client's Traffic Accident Report and GIA Report;
2. GIA Report of motorcar SFW 1880C;
3. Land Transport Authority search of motorcar SFW 1880C;
4. Emergency Department report from Tan Tock Seng Hospital (07.05.2022);
5. Medical Report from Tan Tock Seng Hospital (30.05.2022);
6. Medical Certificate (07.05.2022);
7. Repair Bill from M1 Motoring;
8. Survey Report from Prudent Adjustors Services.

In compliance with paragraph 4.5 of the Appendix B of the Pre-Action Protocol for Personal Injury Claims and Non-injury Motor Accident Claims, we propose using one of the following medical experts as a single joint expert: Dr Judith Goh Ziu Hui

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgment of receipt of this letter within 14 days of your receipt of this letter. Please also inform us within 14 days of your acknowledgement of receipt of this letter whether you have any objection to our proposed medical expert or whether you wish to propose other medical experts.

Should you fail to acknowledge receipt of this letter within 14 days, our client can commence court proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you or your insurer are required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully

Goh JP & Wong LLC

Enc.

Cc **AXA Insurance Singapore Pte Ltd**
8 Shenton Way
#27-01 AXA Tower
Singapore 068811
Attention: Motor Claims Department

AR Registered Post



**SINGAPORE
POLICE FORCE**



T/20220509/2005

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3
Report No. T/20220509/2005

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/05/2022 02:15		Vide Report No.:		Station Diary No.: 19	
Informant's Particulars					
Name of Informant: HASYAFIQ BIN RAZALI			Address: APT BLK 332 JURONG EAST AVENUE 1 #02-1758 SINGAPORE 600332		
ID Type / ID No.: NRIC NO / S9627062C			Contact No.: Home/Office: Mobile: 88811615		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 25	Date of Birth: 07/08/1996	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: MEDIC			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/05/2022 19:00	Type of Location: Straight Road
Location: BALESTIER ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
FBR5865U	Motorcycle	YAMAHA	AEROX GDR155A CVT ABS	Black	Slightly Damaged	0
SFW1880C	Car	HONDA	CROSSROA D TYPE-18L A	Black	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220509/2005

2 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20220509/2005

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBR5865U	NTUC Income Insurance Co-Operative Limited	5118634106-01	13/08/2021	12/08/2022

Brief Details.

On 06/05/2022 at about 1900hrs I was travelling along Central Expressway on motorcycle (V1: FBR5865U). I then exited towards Balestier Road. Upon exiting CTE and continuing my journey towards Balestier Road via filter lane. From the filter lane, I went on to the third lane as I saw no vehicles travelling along the lane.

Subsequently as I was travelling along the third lane, a vehicle (V2:SFW1880C) from my left travelling in the middle lane suddenly made a swift change lane to the right towards the third lane. Unable to stop in time, I collided with V2 and fell off my bike. I did notice V2 signaled right however due to its abrupt lane change I was unable to stop my vehicle on time. Thus, after collision, I was unable to get up. I was unsure whom assisted to call for ambulance. I was conveyed by the ambulance to Tan Tock Seng General Hospital.

On 07/05/2022 at about 1330hrs I was discharged from the hospital and was given MC (unable to recall the number of days). Injuries that I had sustained, swollen hip, swollen left elbow. I was instructed by Investigation Officer Sankar from Traffic Police (Hp: 65476251) to lodge a Traffic accident report. I am unsure of the damages of my motorcycle. No government properties were damaged. I am also unsure if the owner of V2 sustained any injuries.



**SINGAPORE
POLICE FORCE**



T/20220509/2005

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20220509/2005

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:

J /

Other MOHAMAD SYAFIQ BIN
MOHAMAD SAID

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

STAFF SGT SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

Signature Of Informant:

Date/Time:

09/05/2022 02:15

Classification Of Case:

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 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. 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 18/05/2022 18:38 (SGT)
Date of Accident 06/05/2022 19:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information BALESTIER ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBR5865U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HASYAFIQ BIN RAZALI
NRIC No S9627062C
Email Address AMAKOSHI07@GMAIL.COM
Mobile Phone No (Phone) +65-88811615
Alternative Phone No +65-88811615

VEHICLE PARTICULARS

Manufacturer Yamaha
Model Aerox
Variant AEROX GDR155A CVT ABS
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 155

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number 5118634106-01
Cover Note Number -

DRIVER

Name of Driver HASYAFIQ BIN RAZALI
NRIC No S9627062C

Date Of Birth	07/08/1996
Occupation	Indoor
Date Of Driving Pass	30/04/2018
Driving experience	4 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-88811615
Alt. Phone Number	+65-88811615
Email Address	AMAKOSHI07@GMAIL.COM
Address	BLK 332 JURONG EAST AVENUE 1
Address complement	#02-1758
Postcode	600332
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFW1880C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver -
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person -
 Gender -
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? -
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

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 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 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)

I understand, 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 (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 mailing 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.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature]

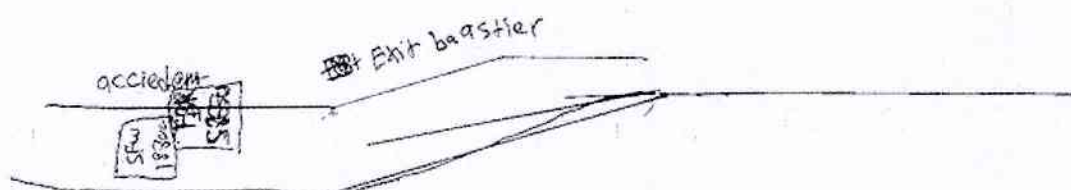
Policyholder's Signature / Date & Time

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

[Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan



from CTE

Describe Circumstances of the Accident

LICENSE PLATE: FBR 5865U
CONTACT NUMBER: 88811615
LOCATION: Balastier RD

ACCIDENT DATE & TIME: 7:30 6/5/2022
E-MAIL ADDRESS: amakoshi07@gmail.com

I was at CTE going to exit to Balastier RD The road is moderate speed limit 45 mph.
The 2 lane 1 signal then lane change to the 1 lane suddenly the unknown vehicle signal
then started to the right i could not brake on time

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN
OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

☐ Claim Own Policy ☐ Claim Third Party ☒ Claim OD/TP at other workshop ☐ Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20220509/2005

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3

Report No. T/20220509/2005

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/05/2022 02:15	Vide Report No.:	Station Diary No.: 19
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Informant's Particulars

Name of Informant: HASYAFIQ BIN RAZALI	Address: APT BLK 332 JURONG EAST AVENUE 1 #02-1758 SINGAPORE 600332		
ID Type / ID No.: NRIC NO / S9627062C	Contact No.: Home/Office: Mobile: 88811615		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 25	Date of Birth: 07/08/1996	Type of Informant: Rider
Race: Malay	Language:		Institution / School Name:
Occupation: MEDIC	Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/05/2022 19:00	Type of Location: Straight Road
Location: BALESTIER ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
FBR5865U	Motorcycle	YAMAHA	AEROX GDR155A CVT ABS	Black	Slightly Damaged	0
SFW1880C	Car	HONDA	CROSSROAD TYPE-18L A	Black	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220509/2005

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 3

Report No. T/20220509/2005

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBR5865U	NTUC Income Insurance Co-Operative Limited	5118634106-01	13/08/2021	12/08/2022

Brief Details.

On 06/05/2022 at about 1900hrs I was travelling along Central Expressway on motorcycle (V1: FBR5865U). I then exited towards Balestier Road. Upon exiting CTE and continuing my journey towards Balestier Road via filter lane. From the filter lane, I went on to the third lane as I saw no vehicles travelling along the lane.

Subsequently as I was travelling along the third lane, a vehicle (V2:SFW1880C) from my left travelling in the middle lane suddenly made a swift change lane to the right towards the third lane. Unable to stop in time, I collided with V2 and fell off my bike. I did notice V2 signaled right however due to its abrupt lane change I was unable to stop my vehicle on time. Thus, after collision, I was unable to get up. I was unsure whom assisted to call for ambulance. I was conveyed by the ambulance to Tan Tock Seng General Hospital.

On 07/05/2022 at about 1330hrs I was discharged from the hospital and was given MC (unable to recall the number of days). Injuries that I had sustained, swollen hip, swollen left elbow. I was instructed by Investigation Officer Sankar from Traffic Police (Hp: 65476251) to lodge a Traffic accident report. I am unsure of the damages of my motorcycle. No government properties were damaged. I am also unsure if the owner of V2 sustained any injuries.



**SINGAPORE
POLICE FORCE**



T/20220509/2005

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

3 of 3

Report No. T/20220509/2005

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:

J /

Other MOHAMAD SYAFIQ BIN
MOHAMAD SAID

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

09/05/2022 02:15

Officer In Charge Of Case:

TP / GIT /

STAFF SGT SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

Classification Of Case:

NP168









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 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. 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	12/05/2022 14:43 (SGT)
Date of Accident	06/05/2022 19:00 (SGT)
Exact Location of Accident	Balestier Rd, Singapore
Additional Location Information	BALESTIER RD TWDS LAVENDER
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFW1880C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHARLES ASHLEY ISHWARAN

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Crossroad
Variant	-
Vehicle Category	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA448814
Cover Note Number	-

DRIVER

Name of Driver	CHARLES ASHLEY ISHWARAN
NRIC No	S8328366A
Address	94 WHAMPOA DR
Address complement	#19-226
Postcode	320094
Does Driver Own Other Vehicles?	No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Side Swipe
Weather Conditions Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
Was anybody injured in the Accident? Yes
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 4

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT & SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No
Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBR5865U
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
Name of Driver -
Insurance Company Name -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person MOTORCYLIST
Gender -
Phone No -
Injured person in which vehicle? -

SKETCH PLAN

IMPORTANT NOTICE

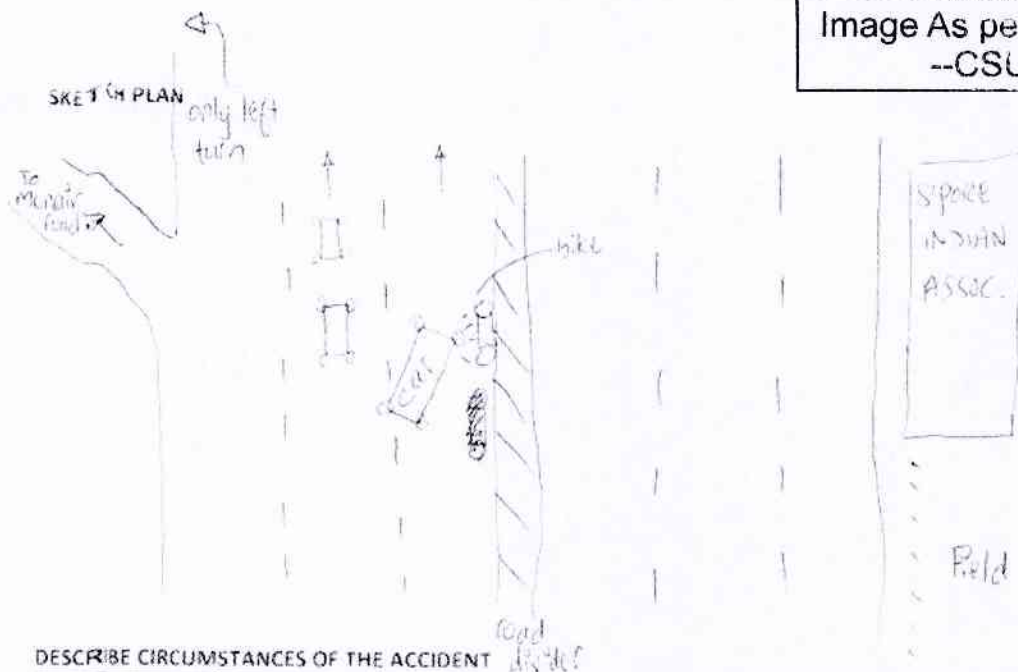
Image As per Original
--CSU--

1. This Form must be completed correctly and truthfully for the purposes of the Road Traffic Act (RTA) and the Road Traffic (Traffic and Police) Regulations (RTT&PR).
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 willful misrepresentation or withholding of information may allow insurance companies to repudiate policy liability.
4. The issuance and completion of this Form by the insured does not constitute an admission of liability or an admission of any fault.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the Insurers to 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 lodgment 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/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 (all insured(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 investigation of the accident;
 - (b) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (c) investigating the accident and/or my claims;
 - (d) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (e) administering my claims (including the mailing 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
 - (f) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
 - (g) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' 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
 - (h) 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;
 - (i) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims;
 - (j) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature: Date & Time

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

Reporting Centre Personnel's Signature
Name: 12/05/22
NRIC/FIN No:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Motorcyclist collided with my car's right front side, with my family on board. Travelling on middle lane @ v. slow speed est 50km/h, signalled early to indicate ~~the~~ filter to R. lane. Motorcycle attempts to squeeze between vehicle and barrier. Minimal damage to vehicle + motorcycle.

M/bike plate: FBR506SU
car plate: SFH1880C

* Kindly take note that you have 14 days to revert to Own Insurance Claim (own damage).

Claim OD / TP At Falcon Air

Claim OD / TP Own W/shop

Reporting Only

DECLARATION

I/We declare the foregoing particulars are true in every respect

Policyholder's Signature Date
& Time

Driver's signature
(If driver is not the policyholder) Date
& Time

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:



Image As per Original
--CSU--

POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 12/5/22 To: Owner of Vehicle Number: SFW1880C
The following has been advised to you via your workshop: Falcon Air (through their staff)
Anna Please tick the applicable box if you had been advised on any of the following

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence
- ☒ You had been advised by the workshop on the liability and merits of the case accordingly
- ☒ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident
 - ☒ If fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be **no recovery prospect** and NCD will be affected
 - ☒ If fire damage and you are claiming against the Third Party, your NCD will not be affected. However, **the recovery is not guaranteed**, and AXA will not be held responsible
- ☒ You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
 - ☒ \$200 off on your Basic Own Damage Excess **or**
 - ☒ \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit **or**
 - ☒ Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit
- ☒ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy
- ☐ For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using **any combination** of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim
- ☐ Others _____

Signed and acknowledged by

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured vehicle

Name and signature of workshop personnel including company stamp











**SINGAPORE
POLICE FORCE**



T/20220506/7046

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No. 65470000

1 of 3

Report No. T/20220506/7046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/05/2022 22:28	Vide Report No.: E/20220506/0131	Station Diary No.:
--	-------------------------------------	--------------------

Informant's Particulars

Name of Informant: CHARLES ASHLEY ISHWARAN			Address: APT BLK 94 WHAMPOA DRIVE #19-226 SINGAPORE 320094		
ID Type / ID No.: NRIC NO / S8328366A			Contact No.: Home/Office: Mobile: 81139914		
Nationality: SINGAPORE CITIZEN			Email: ashley.icharles@gmail.com		
Sex: Male	Age: 38	Date of Birth: 14/09/1983	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information: Class: 3		Date of Expiry: 31/12/2040

General Information of the Accident

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/05/2022 19:00	Type of Location: Straight Road
Location: BALESTIER ROAD			
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
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	Conditio	No of
SFW1880C	Car	HONDA	CROSSROA D+TYPE- 18L+A	Black		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFW1880C	AXA INSURANCE SINGAPORE PTE LTD	GA448814	25/02/2022	24/02/2023



**SINGAPORE
POLICE FORCE**



T/20220506/7046

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 3

Report No. T/20220506/7046

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHARLES ASHLEY ISHWARAN	ID No.	S8328366A
Related Vehicle	SFW1880C (Car)	Contact No.	81139914
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 31/12/2040
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

Motorcyclist collided into my vehicle right front side, with my family on board. we were on the way to fill up petrol at Esso Lavender, a short distance away from home. car low fuel light was on. Travelling along Balestier Road, middle lane at v slow speed est. 10km/h. signaled to filter to right lane early, chkd rearview+blindspot and turned out at slow speed. Motorcyclist attempts to squeeze between my vehicle and middle barrier without due regard for vehicle. Possibly distracted or unaware of road ahead. collision occurs. i stopped vehicle immediately, rendered assistance chkd for responsiveness. Motorcyclist removes his own helmet, and makes a few phone calls while lying prone on the road after the collision. motorbike was lifted off his left leg, aesthetic damage to his motorbike and my vehicle. i called 995 immediately after securing bike with help of other road users. police van passing by stopped to take names and statements, while awaiting ambulance and TP patrol motorbike.

Motorbike license plate: FBR5865U
To contact IO Sangkar 65476251



**SINGAPORE
POLICE FORCE**



T/20220506/7046

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

3 of 3

Report No: T/20220506/7046

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
06/05/2022 22:28

Classification Of Case:

Enquire Vehicle's Insurance Particulars (As At 06 May 2022 / 19:00:00)

Vehicle No.:

SFW1880C

Make Description/Model:

HONDA / CROSSROAD TYPE-18L A

Insurance Company Name:

AXA INSURANCE PTE LTD

Business Transaction Reference No.:

20220518152528406627

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Printed on 18 May 2022 15:25:30

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Enquire Vehicle Owner Details (As At 06 May 2022 / 19:00:00)

Vehicle Owner Details

Owner ID Type:

Singapore NRIC

Owner ID:

S8328366A

Owner Name:

CHARLES ASHLEY ISHWARAN

Registered Address Type:

HDB / HUDC

Registered Block/House No.:

94

Registered Street Name:

WHAMPOA DRIVE

Registered Unit No.:

19 - 226

Registered Building Name:

-

Registered Postal Code:

320094

Vehicle Insurance Details

Vehicle No.:

SFW1880C

Make Description/Model:

HONDA / CROSSROAD TYPE-18L A

Insurance Company Name:

AXA INSURANCE PTE LTD

Date: -
Time: -
Location: -

Please bring along your N.R.I.C or BIRTH CERTIFICATE
(if you are below 15) or PASSPORT / WORK PERMIT
(if you are a FOREIGNER)

An administration fee of \$10.00 will be charged for
duplication of referral letter.

For any queries or changes, pls call **63577000/8000**

To: Discharge Summary
STAT

From: Ho Tze Yuen (DR)
66347F
Medical Officer

Re: MRN S9627062C
Name HASYAFIQ BIN RAZALI
DOB/Age/Sex 07-08-1996 / 26 Yrs / Male
Registration date 07-05-2022 04:24 AM

Diagnosis

Principal Diagnosis : HEAD INJURY

Other Diagnosis : LEFT ELBOW CONTUSION, LEFT HIP CONTUSION

Allergies / Medical Alerts

NIL

PLEASE TRACE AND REVIEW ALL FINAL

XRAY AND LABORATORY REPORTS

Clinical Frailty Scale : 3 Managing Well

Investigations**Treatment**

This referral letter is valid for six months

The content of this document is confidential and privileged to the doctor and patient. If you have received this document by mistake, please (a) notify the sender immediately ; (b) destroy the document and (c) do not read, use, copy, store, disseminate and/or disclose to any person the information and materials found in the medical records.



Tan Tock Seng
HOSPITAL

National Healthcare Group

Tan Tock Seng Hospital Pte Ltd
11 Jalan Tan Tock Seng
Singapore 308433
T + 65 6256 6011
F + 65 6252 7282

www.ttsh.com.sg

[TTSH.fbadd.me](https://www.facebook.com/TTSH.fbadd.me)

RCB Registration No. 199003683 N

Affiliated Teaching Hospital
of NTU Lee Kong Chian
School of Medicine and
NUS Yong Loo Lin School
of Medicine

Our Ref: 2022-6606-0
Yr. Ref: GTW.ACC.5045.22. wk

30 MAY 2022

GPH JP & WONG LLC
133, NEW BRIDGE ROAD
#16-09, CHINATOWN POINT
SINGAPORE 059413

Through: Head,
Emergency Department

Dear Sir/Madam,

MEDICAL REPORT ON HASYAFIQ BIN RAZALI

NRIC NO: S9627062C

DATE/TIME SEEN: 06/05/2022 AT 20:49 HOURS BY JUDITH GOH XIU HUI (DR)

DIAGNOSIS: Minor head injury

Mr HASYAFIQ BIN RAZALI was seen by myself at the Emergency Department, Tan Tock Seng Hospital on 06/05/2022 after a road traffic accident and head injury. He presented with headache, left elbow and left hip pain.

On examination, the following injuries were noted:

- (1) Left hip tenderness with limited range of motion due to the pain.
 - (2) Left elbow tenderness with limited range of motion due to pain.
- The rest of the neurological examination was unremarkable.

Bedside ultrasound was negative for free fluid. Basic blood investigations and venous gas was unremarkable.

X-rays of his chest, pelvis, left hip and left elbow were done and were reported to have no fractures. Computed tomography (CT) scan of brain was done and reported no acute intracranial haemorrhage or skull fracture. Incidental maxillary sinus polyp on CT.

He was admitted to the Emergency Diagnostic and Therapeutic Centre (EDTC) for observation and further management. He remained well in EDTC and was subsequently discharged on 07/05/2022 with pain medications. Hospitalization leave from 06/05/2022 to 07/05/2022 (MC No.: TTSH22087255). He was given a follow-up appointment with the Department of Neurosurgery in 2 weeks and a memo to his Ng Teng Fong, Ear, Nose and Throat (ENT) Doctor for his follow-up of incidental polyp.

Thank you
Yours faithfully,

Judith Goh Xiu Hui (DR)
EMERGENCY DEPARTMENT
TAN TOCK SENG HOSPITAL

Medical-In-Confidence

/rs





Tan Tock Seng Hospital
11 Jalan Tan Tock Seng, Singapore 308433
TEL: (65) 6256 6011

MEDICAL CERTIFICATE	AMENDED ORIGINAL	TTSH22087255
NAME: HASYAFIQ BIN RAZALI		NRIC: S9627062C

Type of Medical Leave granted : **HOSPITALIZATION LEAVE**

The above named is unfit for duty for a period of **2 day(s)** from **06-May-2022** to **07-May-2022** inclusive

The certificate is not valid for absence from court attendance.


The above named attended for Examination/Treatment from **06-May-2022 20:21** to **07-May-2022 11:01**

Emergency Department

07-May-2022
Date

TZE YUEN HO (66347F)
Issued by

Emergency Department
Location


Signature

 **A member of National Healthcare Group**
Adding years of healthy life

M1 MOTORING

411 CHANGI ROAD , SINGAPORE 419860
TEL : 67437030 FAX : 67437556

Image As per Original
--CSU--

28/06/2022

RE : Final repair bill for vehicle no FBR5865U

Receipt No :202206-0501

S/N	ITEM	UNIT	PRICE
01			\$5,250

01 Repair the above motorcycle on a lump sum HASYAFIQ BIN RAZALI

PRUDENT ADJUSTORS SERVICES

BLOCK 607 ELIAS ROAD #05-192
SINGAPORE (510607)
BUSINESS REGN. No. 53193457L
Email: willybjt@gmail.com / Mobile: 96699986

INVOICE

Mr. Hasyafiq Bin Razali
c/o Goh JP & Wong LLC
133 New Bridge Road # 16-09
Chinatown Point
Singapore 059413

Invoice No : PA/2206/0018/G
Our Ref : PA/FBR5865/0522/tpw
Date : 20 June 2022

Claim Type	Third Party	Date of Accident	06 May 2022
Vehicle No.	FBR 5865 U	Date of Inspection	20 May 2022
No	Description	Amount (\$\$)	
1	Survey fees inclusive of Transportation and Photographs (80) copies	\$580.00	
	Total	\$580.00	
Singapore Dollar: Five Hundred and Eighty-Four Only			
Terms of Payment - Within 30 (Thirty) days after receiving our Final Report & Invoice Payment payable as follows and kindly indicate Invoice No. <ul style="list-style-type: none">• Cheque - Payable to Prudent Adjustors Services• Bank Transfer - DBS 025-902513-4• Paynow - UEN No 53193457LBJT			


Prudent Adjustors Services
Bok Jee Tan

PRUDENT ADJUSTORS SERVICES

BLOCK 607 ELIAS ROAD #05-192
SINGAPORE 510607
BUSINESS REGN. No. 53193457L
Email: willybjt@gmail.com / Mobile: 96699986

VEHICLE DAMAGE INSPECTION REPORT

Mr. Hasyafiq Bin Razali
c/o Goh JP & Wong LLC
133 New Bridge Road # 16-09
Chinatown Point
Singapore 059413

Our Ref : PA/FBR5865/0522/tpw
Date : 20 June 2022

REFERENCES

Claim Type	: Third Party	Date of Accident	: 06 May 2022
Vehicle No	: FBR 5865 U	Date of Assignment	: 19 May 2022
Make	: Yamaha	Date of Inspection	: 20 May 2022
Model	: Aerox GDR155A CVT ABS	Date of Re-inspection	: 04 & 15 June 2022
Registration Date	: 13 August 2020	COE Expiry	: 12 August 2030
Color	: Black	Chassis No	: Blocked
Odometer	: No key	Engine No	: G3J8E0138589

TYRE CONDITION

	<u>Make</u>	<u>Size</u>	<u>Thread Balance</u>
Front	Maxxis	110/80-14	5mm
Rear	Maxxis	140/70-14	6mm

GENERAL DESCRIPTION OF DAMAGE (PHOTOGRAPHS ATTACHED)

The vehicle sustained damage at front and both sides.
Please refer to photographs and assessment of repairs for details
Enclosed (80) photographs depicting damages and after repaired

INSPECTION AND ADJUSTMENT

Original Quotation : \$6,487.50 Revised Assessment \$5,250.00 Lump sum

Survey Conducted at M1 Motoring (Toh Guan)

In accordance to your instruction, we have not authorized repairs.

In normal circumstances, repairs to the vehicle would take approximately
Seven (7) days to complete.

This survey was conducted on a "WITHOUT PREJUDICE" basis.

Note:

The workshop has agreed to undertake the repair on a lump sum basis, and or the use of ex-stock
reconditioned parts whichever is possible

PRUDENT ADJUSTORS SERVICESVehicle No: **FBR 5865 U**

Our Ref: PA/FBR5865/0522/tpw

ADJUSTMENT ON REPAIR COST AND REPLACEMENT OF PARTS

<u>S/N</u>	<u>Description Material</u>	<u>Qty</u>	<u>Condition</u>	<u>Original Quotation</u>	<u>Revised Quotation</u>
1	Front visor	1 pc	Serviceable	67.50	~
2	Cover handles upper	1 pc	Deformed	98.50	98.50
3	Handle bar complete	1 pc	Bent	110.80	110.80
4	Handle bar grips	1 set	Serviceable	50.00	~
5	Handle bar balancer (end grips)	1 set	Cut	60.00	60.00
6	Wind mirror	1 set	Cut	120.00	120.00
7	Brake lever LH	1 pc	Bent/cut	45.00	45.00
8	Meter assy	1 pc	Socket cracked	480.00	480.00
9	Front V centre panel	1 pc	Hdr cracked	105.80	105.80
10	Headlamp assy (LED)	1 pc	Cracked	685.00	685.00
11	Headlamp lower panel (mat black)	1 pc	Hdr cracked	98.50	98.50
12	Body cowling LH/RH @ \$167.50/-	2 pcs	Cut/cracked	335.00	335.00
13	Body cowling inner panel (mat black) LH	1 pc	Cracked	125.80	125.80
14	Front flasher light assy @ \$86/-	2 pcs	Hdr cracked LH	172.00	86.00
15	Front fork assy @ \$410/-	2 pcs	Bent	820.00	820.00
16	Fork under bracket complete	1 pc	Distorted	210.00	210.00
17	Front fender	1 pc	Cut	110.00	110.00
18	Fender inner panel (mat black)	1 pc	Torn	122.50	122.50
19	Leg shields main switch cover (mat black)	1 pc	Cut/deformed	158.30	158.30
20	Foot step board LH	1 pc	Cut	121.50	121.50
21	Footrest board lower side cover	1 pc	Torn	128.60	128.60
22	Body side cover @ \$ 98.60/-	2 pcs	Hdr cracked	197.20	197.20
23	Air cleaner case cover	1 pc	Cut	112.50	112.50
24	Crankcase outer cover (Mat black)	1 pc	Cut	130.50	130.50
25	Muffler protector	1 pc	Cut	110.00	110.00
				4,775.00	4,571.50
List price less discount 10%				477.50	457.15
				4,297.50	4,114.35
<u>Add special nett item</u>					
26	Steering cone bearing	1 set	Necessary	180.00	90.00
27	Body sticker	1 set	Necessary	150.00	120.00
28	Rear box rack with base	1 set	Bent	220.00	180.00
29	Rear box	1 pc	Grazed/cut	320.00	280.00
				870.00	670.00

PRUDENT ADJUSTORS SERVICES

Vehicle No: **FBR 5865 U**

Our Ref: PA/FBR5865/0522/tpw

ADJUSTMENT ON REPAIR COST AND REPLACEMENT OF PARTS

Labour charges

Towing (2 trips)	150.00	120.00
Front wheel rim balance	120.00	80.00
Chassis frame align	550.00	450.00
Remove & replace accident damage parts	500.00	400.00
	<u>1,320.00</u>	<u>1,050.00</u>

Total parts & labour concluded	<u>6,487.50</u>	<u>5,834.35</u>
--------------------------------	-----------------	-----------------

Lump sum repair adjustment (less 10% due to no used parts)		<u>5,250.00</u>
--	--	------------------------

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Prudent Adjustors Services
Bok Jee Tan

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	062C
Vehicle Details	
Vehicle No.:	FBR5865U
Vehicle to be Exported:	Yes
Intended Deregistration Date:	19 May 2022
Vehicle Make:	YAMAHA
Vehicle Model:	AEROX GDR155A CVT ABS
Primary Colour:	Black
Manufacturing Year:	2020
Engine No.:	G3J8E0138589
Chassis No.:	MH3SG4640LJ067574
Maximum Power Output:	-
Open Market Value:	\$2,441.00
Original Registration Date:	13 Aug 2020
First Registration Date:	13 Aug 2020
Transfer Count:	1
Actual ARF Paid:	\$367.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	12 Aug 2030
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$7,702.00
COE Rebate Amount:	\$6,161.00
Total Rebate Amount:	\$6,161.00

The information contained herein is correct as at 19 May 2022

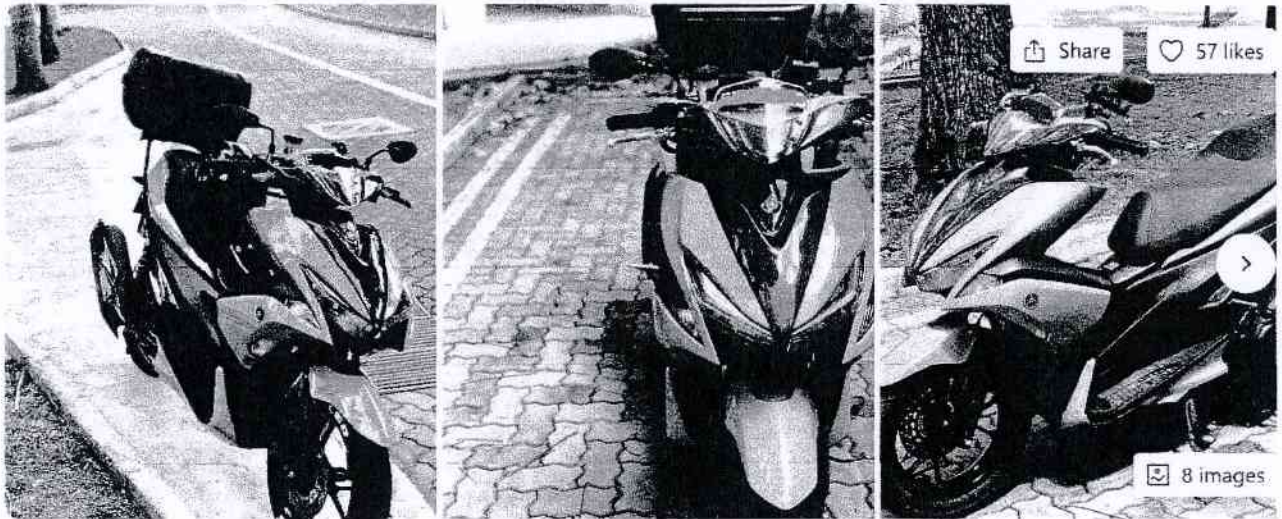
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Advertisement

Read now

Businesses are going green. Supply chain sustainability is a vital piece of the puzzle.

Motorcycles Motorcycles for Sale Class 28



YAMAHA AEROX GDR155A CVT ABS KEYLESS
COE 2030

S\$14,000



@yszfzmz

5.0 ★★★★★ (28 reviews)

Chat



Used



Meetup



Woodlands

Write a custom message...

Description

Bumped

3 weeks ago

Make

Yamaha

Type

Scooter

Send message to @yszfzmz

YAMAHA AEROX GDR155A CVT ABS KEYLESS

Immaculate condition

I'm the 1st Owner

Registered 12 March 2020

COE 2030

Fully Paid

Regular servicing every 3000km

S\$ 14000

Make Offer

Report this listing

Advertisement

read more

Meet-up



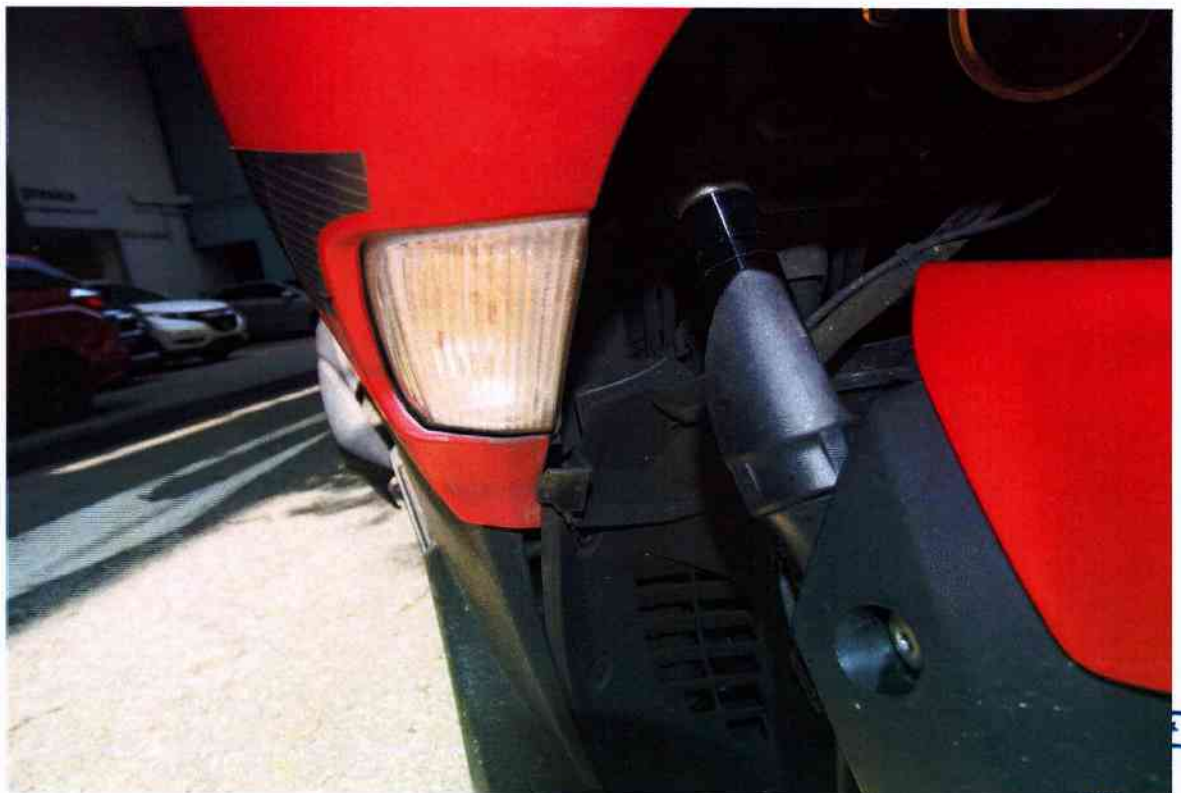
Woodlands









































Re-Survey





Re-Survey





Re-Survey



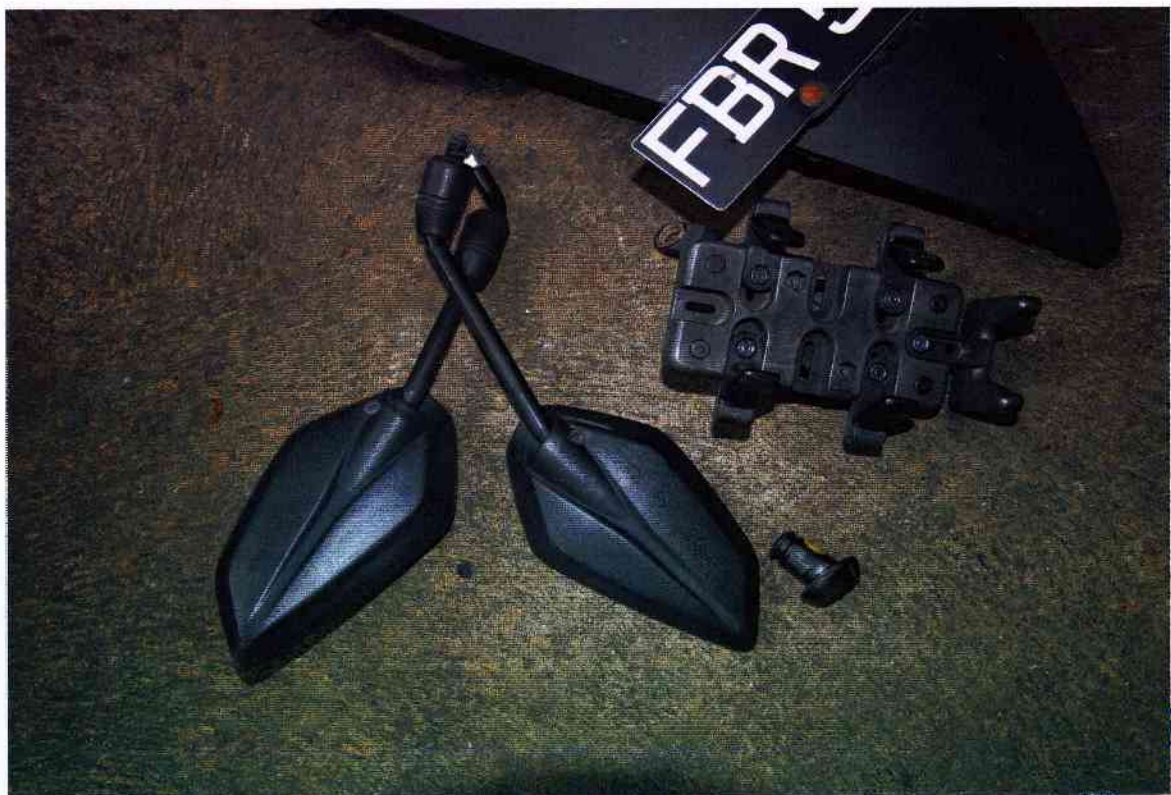


Re-Survey





Re-Survey



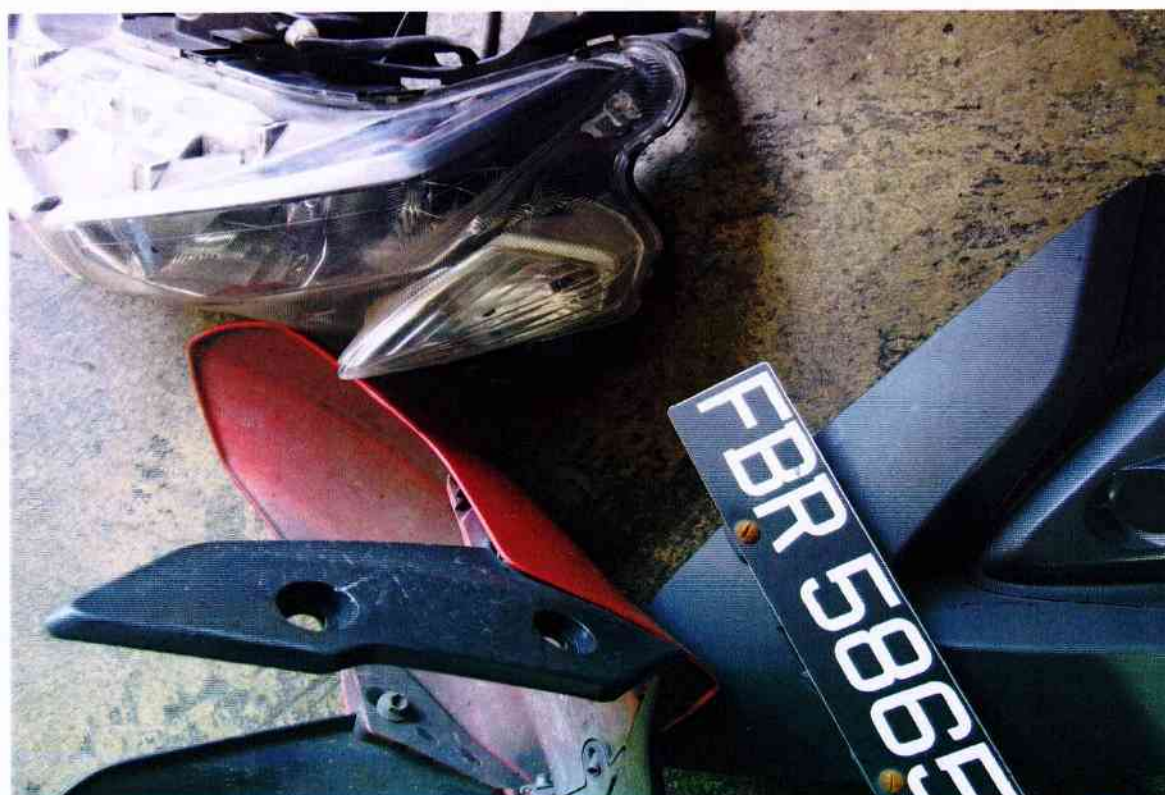


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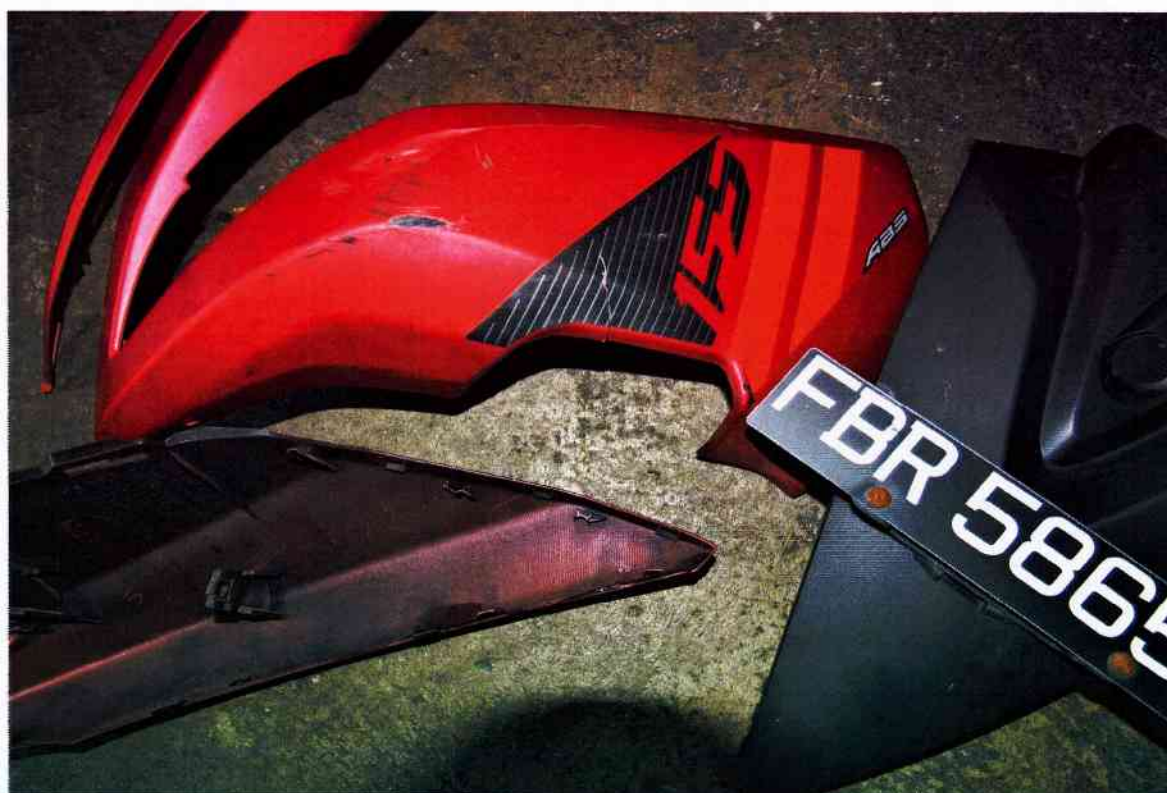


Re-Survey





Re-Survey



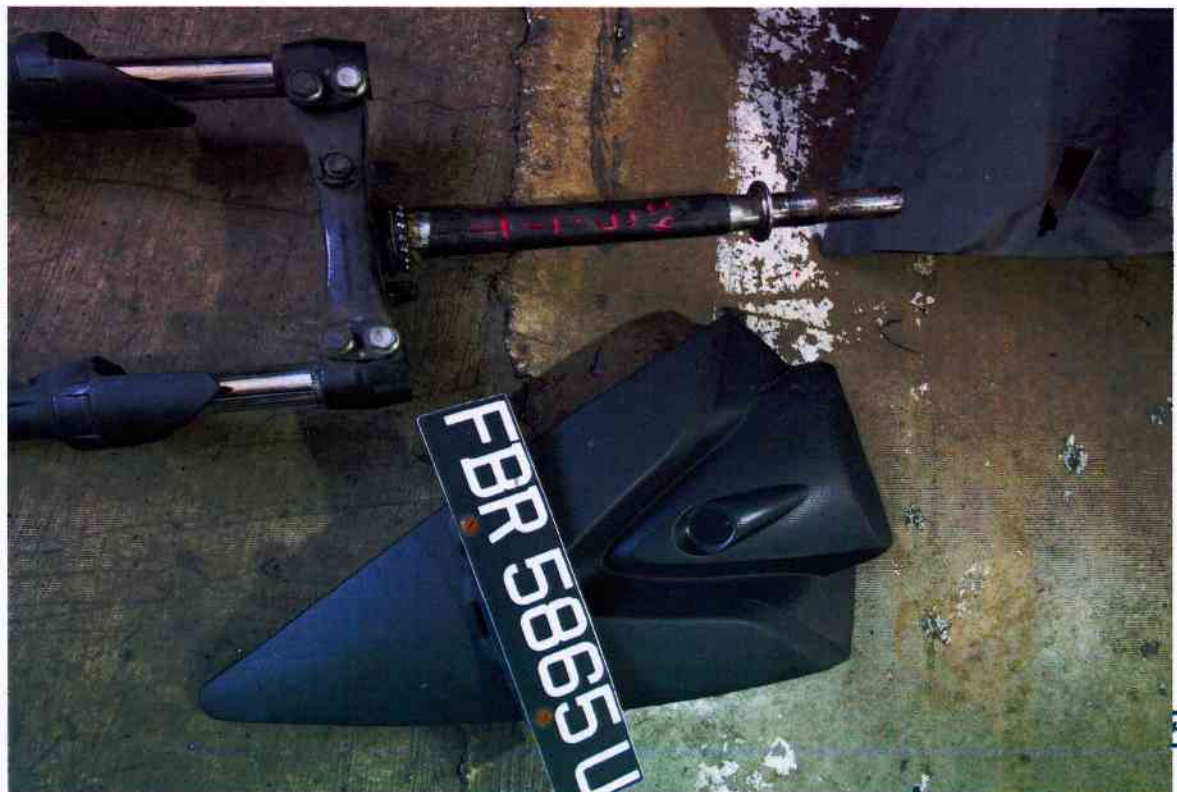


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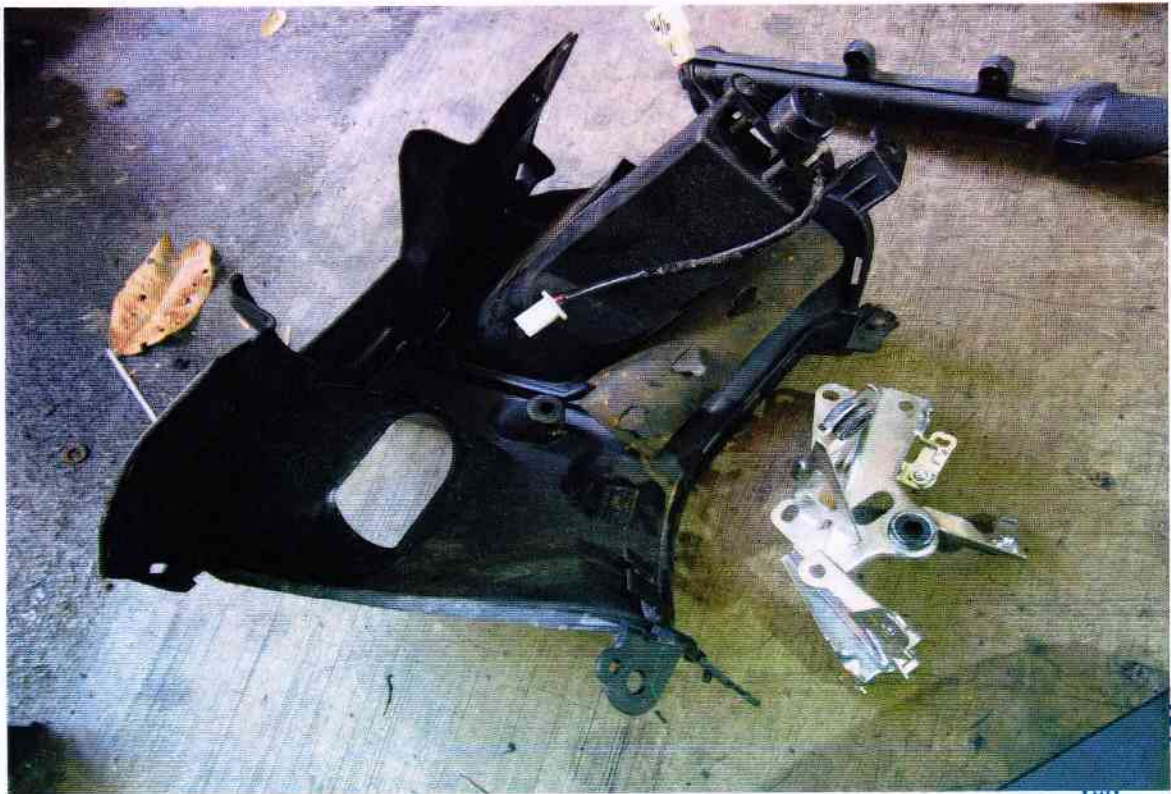


Re-Survey





Re-Survey





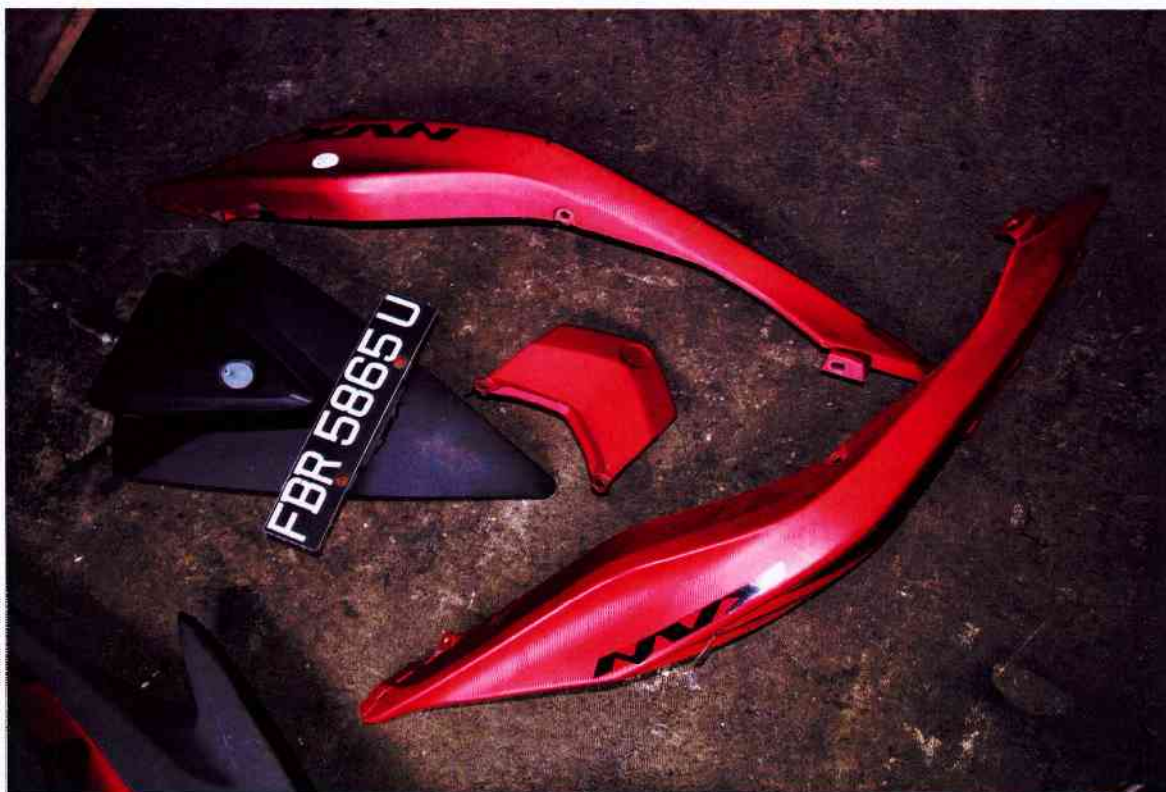
Re-Survey





Re-Survey





Re-Survey





Re-Survey





Re-Survey
After Repair





Re-Survey
After Repair





Re-Survey
After Repair





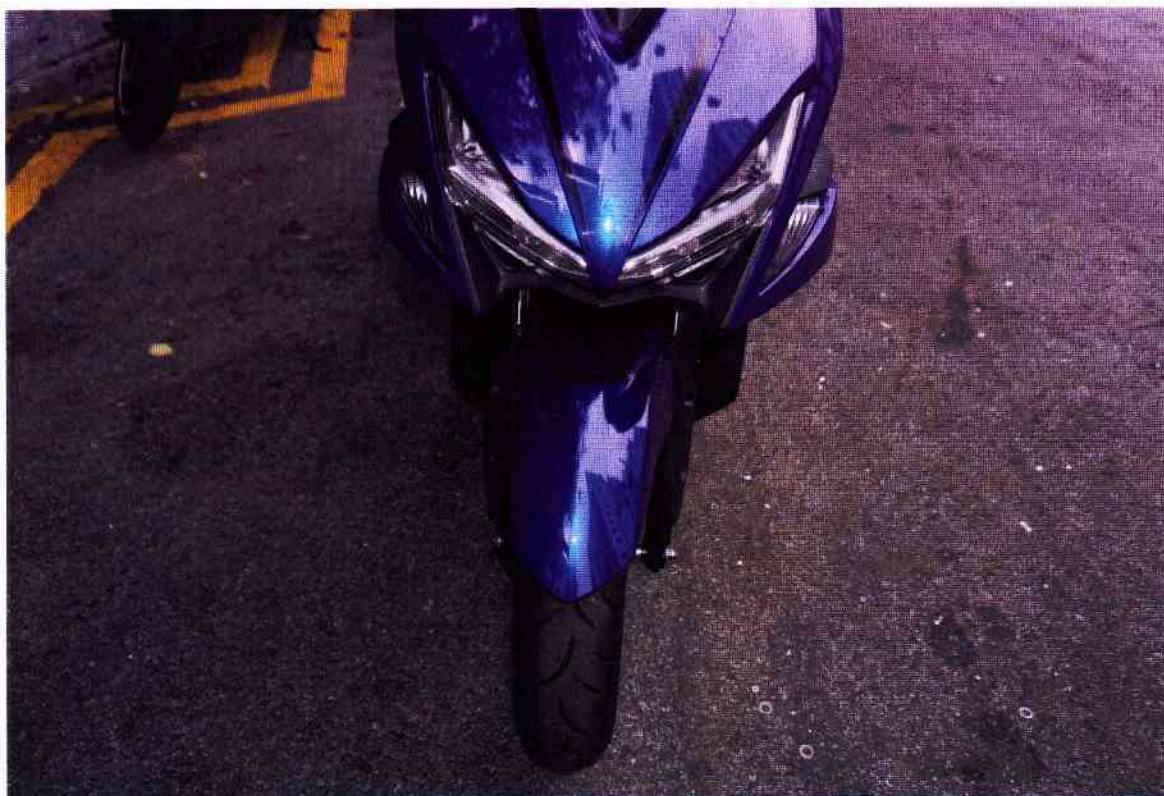
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After Repair





Re-Survey
After Repair





Re-Survey
After Repair



AXA Insurance Singapore Pte Ltd

B0503

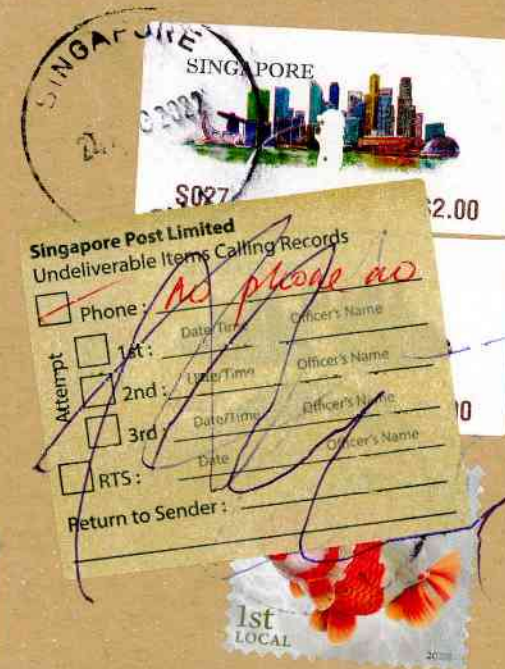
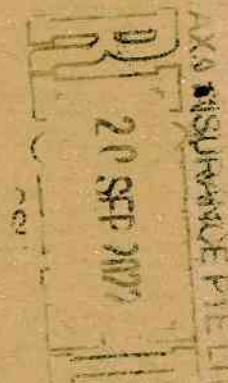
16

PO BOX 1094
ROBINSON ROAD POST OFFICE
SINGAPORE 902144

Ref no: 06/0151/B2D Expiry Date: 14 Mar 2023



Attn: Motor Claim Dept



Singapore Post Limited
Reason for Non-Delivery
Please tick only ONE applicable reason

- ☐ No such person / name
- ☐ No such blk / floor / unit no
- ☐ Address is incomplete
- ☐ Addressee has gone away
- ☐ No Letterbox provided
- ☐ Building / House Demolished
- ☐ Deemed unsafe for delivery
- ☐ Building not ready
- ☐ P.O Box Closed
- ☐ Box full / faulty (Pls specify) _____
- Name: _____



GOH JP & WONG LLC
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Singapore 059413
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UEN/GST No: 201406078M

