



QUOTATION

ALLIANZ INSURANCE SINGAPORE PTE. LTD.

79 ROBINSON ROAD #09-01 SINGAPORE 068897

ATTN: MOTOR CLAIMS DEPT

VEHICLE NO. MAKE/MODEL

Customer:

: FBJ2406Z

: YAM / YBR125

: 43228

: 13/04/2023

CLAIM NO.

: 12156

POLICY NO. : PNMC2020-00001559-02

FROM

NO.

DATE

: RAYMOND

(Page 1 of 2)

<u>S/N</u>	Description	<u>Action</u>	<u>Qty</u>	<u>Unit Price</u>	<u>Amount</u>
1	BEARING 6202 2RS (FAG)	REPLACE	2.00	\$15.00	30.00
	P/N: 46170				
	- (REPORTED BY MECHANIC)				
2	BRACKET UNDER FORK	REPLACE	1.00	\$199.00	199.00
	P/N: 27458				
	- (REPORTED BY MECHANIC)				
3	COWLING FRONT (DARK GREY)	REPLACE	1.00	\$272.00	272.00
	P/N: 45198				
	- (REPORTED BY MECHANIC)				
4	FORK FRONT ASSY LH	REPLACE	1.00	\$403.00	403.00
	P/N: 53024				
	- (REPORTED BY MECHANIC)				
5	FORK FRONT ASSY RH	REPLACE	1.00	\$403.00	403.00
	P/N: 53025				
	- (REPORTED BY MECHANIC)				
6	HEADLAMP ASSY	REPLACE	1.00	\$117.00	117.00
	P/N: 43129				
	- (REPORTED BY MECHANIC)				
7	LABOUR	Supply/Install	4.00	\$86.00	344.00
	P/N: 06766				
	- LABOUR QUOTED FOR DISMANTLING AND INSTALLATION OF PARTS.				
8	LAMP SIGNAL FRONT LH	REPLACE	1.00	\$24.00	24.00
	P/N: 43433		1.00	Ψ24.00	24.00
	- (REPORTED BY MECHANIC)				
9	LAMP SIGNAL FRONT RH	REPLACE	1.00	\$24.00	24.00
	P/N: 43432		1.00	Ψ2 1.00	24.00
	- (REPORTED BY MECHANIC)				

*43228



Quotation Nos.: 43228

<u>S/N</u>	<u>Description</u>	<u>Action</u>	<u>Qty</u>	Unit Price	<u>Amount</u>
10	METER ASSY	REPLACE	1.00	\$292.00	292.00
	P/N: 42063				
	- (REPORTED BY MECHANIC)				
11	MUDGUARD FRONT (LIGHTGREY)	REPLACE	1.00	\$39.00	39.00
	P/N: 75856				
	- (REPORTED BY MECHANIC)				
12	PLATE FRONT COWLING	REPLACE	1.00	\$29.00	29.00
	P/N: 46220				
	- (REPORTED BY MECHANIC)	DEDI 4.0F		4004.00	004.00
13	RIM SPORT FRONT	REPLACE	1.00	\$304.00	304.00
	P/N: 45153				
	- (REPORTED BY MECHANIC)	DEDI ACE	4.00	<u>ተ</u> ፖር <u>ዐ</u> ር	75.00
14	STAY HEADLAMP	REPLACE	1.00	\$75.00	75.00
	P/N: 45750				
4 55	- (REPORTED BY MECHANIC)	REPLACE	4.00	¢72.00	73.00
15	STEERING CONE SET	REPLACE	1.00	\$73.00	73.00
	P/N: 41793				
40	- (REPORTED BY MECHANIC)	REPLACE	1.00	\$68.00	68.00
16	SWITCH IGNITION	KEPLAGE	1.00	φοο.υυ	00.00
	P/N: 25404 - (REPORTED BY MECHANIC)				
	- (REPORTED BT MECHANIC)				
		SUB TOTAL			\$2,696.00
		GST @ 8 %			\$215.68
		GRAND TOTAL (SO	GD)		\$2,911.68

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.

*43228





Vehicle Details

Vehicle No.

FBJ2406Z

Make/Model

YAMAHA / YBR 125 MANUAL

Vehicle Type:

P00 - Passenger

Motorcycle/Autocycle/Moped

Vehicle Attachment 1:

No Attachment

Vehicle Scheme:

Normal

Chassis No.:

LBPKE1784D0027711

Propellant:

Petrol

Engine No.:

E3J2E009235

Engine Capacity:

Motor No.:

124 cc

Maximum Power Output:

Power Rating:

Maximum Laden Weight:

Unladen Weight:

285 kg

124 kg

Year Of Manufacture:

2013

18 Feb 2014

Lifespan Expiry Date:

COE Category:

D - Motorcycle

Quota Premium:

COE Expiry Date:

\$2,704.00

17 Feb 2024

Road Tax Expiry Date:

PARF Eligibility Expiry Date:

Original Registration Date:

27 Apr 2023

Inspection Due Date:

Intended Transfer Date:

27 Apr 2024

10 Apr 2023

CO2 Emission:

CEV/VES Rebate Utilised Amount:

SB0F234A0003 / Ban Hock Hin Co Pte Ltd ENTRY DATE & TIME: 10/04/2023 16:53 (SGT) SUBMITTED BY: Fion Goh VERSION: 1 (10/04/2023 16:53 (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
- 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 10/04/2023 16:53 (SGT) Both Policyholder and Actual Driver Reported by 08/04/2023 18:30 (SGT) Date of Accident **Exact Location of Accident** Singapore Additional Location Information CTE Exit To SLE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

FBJ2406Z

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INSURED/POLICYHOLDER Is company? See Jie Jun, Eugene (Shi Jiejun) Name Of Registered Owner SXXXX253B NRIC No

see_jiejun@hotmail.com **Email Address** (Phone) +65-97309602 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer Yamaha Model YBR 125 MANUAL Variant

Exact purpose for which vehicle was being used at time of Private use accident

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Motorcycle Vehicle Category Transmission Manual

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd. PNMC2020-00001559-02 Policy Number / Cover Note Number

CC

Name of Driver See Jie Jun, Eugene (Shi Jiejun) NRIC No SXXXX253B 12/11/1990 Date Of Birth Occupation Indoor

Date Of Driving Pass Driving experience	12/01/2011 12 YEARS AND 3 MONTHS
Gender	Male
Mobile Number Alt, Phone Number	(Phone) +65-97309602
Email Address	- see_jiejun@hotmail.com
Address	Blk 10 Ang Mo Kio Avenue 2 #03-10
Address complement	-
Postcode	567696
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	NO
and the second results are second result	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Hit by fallen tree / Other objects
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? Was any injured conveyed to hospital by ambulance?	No
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
Translator's name	-
Translator's ID Translator's phone number	-
Translator's email	- -
Original language used in the statement	-
Auror de constitue de la Nacional d	
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	
Refer to Sketch Plan.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
	Harris

Vehicle Registration Number	GBK9466Z
Vehicle Manufacturer	-
Vehicle Model	<u>-</u>
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	Ali Akbar Bin Hashim
NRIC No	SXXXX890B

Contact Number	-
Address	Blk 816 Yishun Street 81 #11-706
Address complement	-
Postcode	760816
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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)

Funderstand, 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.

(0Azri)2023 1443 ms.

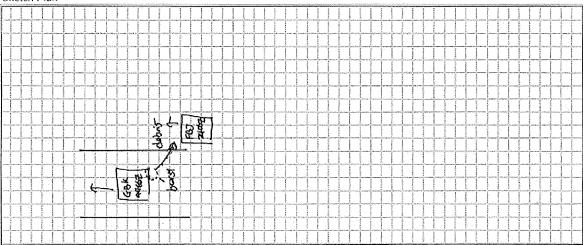
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

FION GOH

Sketch Plan



1

Describe Circumstance of the Accident	
I was rding on the CTE expressionary heading towards SLF on at 1830hrs. At the exit to SLE, there was a lorry CGBK 9	OBA71:1 2023
at 1830hrs. At the exit to SLE there was a lorry CGBK 4	1466 Z)
driving at my 10 o'clock position about 20 metres ahead of	mo
CHOTTIS AT MY TO DECIDE POSITION 4 2001 ZDITE TES AMERICAN	and the same of th
CILL II I (GRUBUA)	
Suddenly, The lorry COBR 4H62) rear right tyre exploded. The 1	yre debris
Suddenly, the lory (GBK 4462) rear right tyre exploded. The to along with the moderard hit my motorcycle front area, I was	net injured physical
We stopped at a HDB carpark at Yishon and exchanged po	articulus.
	Principal
	er i ein it i Britanningen der en eine gebruik in
	e naga yaya sa sanan a America Angaranga gagangangang pangangan dan menengangan dan menenghalikan menenghalikan
	The second secon
	1

Declaration

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

10Apr2023 1445hrs.

Policyholder's Signature / Date & Time

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

FION GOL

Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

2

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBK9466Z

Date of Accident

08/04/2023 苗

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance ______ Allianz Insurance Singapore P... Period of Insurance ______ 27/01/2023 - 26/01/2024 Requested By ____ Gan Lay Peng (Ban Hock Hin C... Requested Date ______ 10/04/2023 17:09

Payment details

Request Amount: **\$\$1.85** GST Amount: **\$\$0.15**

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

General Insurance Association

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