

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/AG/23003944/Un/3

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: FBN 9708K

at Workshop m/s Enfor

of \_\_\_\_\_

Insured: SMJ 3156H

Policy No. \_\_\_\_\_

Claims No. C10021316/CH

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \$13k.

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

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

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: LYA 02185

Vehicle: IN / OUT

Veh No: FBN 9708K Yr Regn: 11/01/19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: SYM MAXSYM 400i 399

Colour: Grey A/C: Insured / Std / NI / NA

Sp.Reading: 21780 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: REFGLXA 901 SA 00378

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or affected

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / SRM / STD A/Rim or

Tyre Size: F: 120-70-15

R: 160-60-14

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Shinko

Front 6 Rear 6

R/Bal. \_\_\_\_\_ mm R/Bal. \_\_\_\_\_ mm

L/Bal. \_\_\_\_\_ mm L/Bal. \_\_\_\_\_ mm

D.O.A. 27/03/24 D.O.I. 19/4/23

Survey held at \_\_\_\_\_

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

O/S Rear, O/S Body

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

Date / Time	Action / Instruction
	<u>09 2200</u>
<u>8/5/23</u>	<u>4/5 @ 3300 in hand AMher (red 8536, 72%)</u>

Date/Time, File Pass to?

☐

: Preli. Report

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

1)

☐

: Final Report

Date/Time, File Return to?

Transportation:

2) 8/5/23-typist

Add Fee:

☐

: Site Insp (\$

) S + RS SI

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

Report Format : TP

Lump Sum / L.B. : (\$ 3300 )

TOTAL

[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	991C

### Vehicle Details

Vehicle No.:	FBN9708K
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Apr 2023
Vehicle Make:	SYM
Vehicle Model:	MAXSYM 400I ABS
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	MU107825
Chassis No.:	RFGLXA901JSA00378
Maximum Power Output:	-
Open Market Value:	\$5,678.00
Original Registration Date:	11 Jan 2019
First Registration Date:	11 Jan 2019
Transfer Count:	1
Actual ARF Paid:	\$1,089.00

### Intended PARF Rebate Details

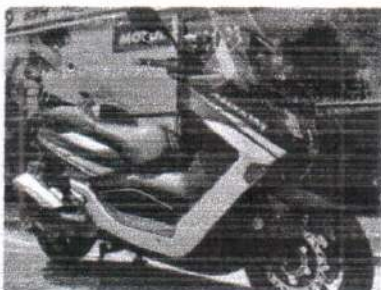
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

### Intended COE Rebate Details

COE Expiry Date:	10 Jan 2029
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$3,789.00
COE Rebate Amount:	\$2,185.00
<b>Total Rebate Amount:</b>	<b>\$2,185.00</b>

The information contained herein is correct as at 03 Apr 2023

OK

**SYM Maxsym 400i**

Reg Date : 14/07/2021

Capacity : 399cc

Vehicle Type : Scooters

Mileage : -

SGD **\$17800**

Posted on : 21/03/2023

★ Paid Ad

★ Dealer Ad

[Details >](#)

first 1 last

**Bike Gadgets** [Number Plates for Sale](#) [Installment Calculator](#) [Instant Insurance Quote](#)**COE Results**

Rd 2, 19 Apr 2023

COE Bidding of Motorcycles

**CAT D****\$12179**



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5115397768-03

**Cover** : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : **FBN9708K**  
Chassis Number : RFGIXA901JSA00378  
2. Name of Policyholder : OON LING CHONG  
3. Effective Date of Insurance : 11 Jan 2023  
4. Expiry Date of Insurance : 10 Jan 2024

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

(b) Use for food/parcel/other delivery services.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: OON LING CHONG
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : VICOM LTD (00000612210)

Date of Issue : 22 Dec 2022 15:52 hrs

For INCOME INSURANCE LIMITED

Chief Executive

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S2593991C**

Name: **OON LING CHONG**

Birth Date: **24 Sep 1967**

Issue Date: **28 Feb 2006**

001402477F



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S2593991C**

Name: **OON LING CHONG**

Race: **CHINESE**

Date of birth: **24-09-1967**

Country/Place of birth: **MALAYSIA**


Sex: **M**



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

	PASS DATE
ss 2B Motorcycles $\leq$ 200 cc	30 Jan 1996
ss 2A Motorcycles between 201 cc and 400 cc	04 May 2004
ss 3 Motor Cars $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver, and other motor vehicles $\leq$ 2500kg	30 Jan 1996

Licence No: **S2593991C**



9887144

NRIC No. **S2593991C**

Nationality/Citizenship: **MALAYSIAN**

Date of issue: **07-03-2023**

Address: **39 MANDALAY ROAD  
#07-39  
SINGAPORE 308216**

SL0P233V0002-01 / Lee Sheng Auto Pte Ltd  
ENTRY DATE & TIME: 31/03/2023 15:21 (SGT)  
SUBMITTED BY: Kuah Lay Hoon  
VERSION: 2 (04/04/2023 15:22 (SGT))

Your NCD will be affected due to late reporting

## 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 aforesaid.

### ACCIDENT STATEMENT

Date of Submission	31/03/2023 15:21 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/03/2023 16:45 (SGT)
Exact Location of Accident	Leedon Heights, Singapore
Additional Location Information	LEEDON HEIGHTS
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN9708K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	OON LING CHONG
NRIC No	S2593991C
Email Address	LINGCHONG@MEDIACORP.COM.SG
Mobile Phone No	(Phone) +65-91520608
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Sym
Model	Maxsym
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?	No - Reporting only
Vehicle Category	Motorcycle
Transmission	Auto
CC	399

### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5115397768-03

### DRIVER

Name of Driver	OON LING CHONG
NRIC No	S2593991C
Date Of Birth	24/09/1967
Occupation	Indoor

 Accident report SL0P233V0002

Page 1 of 17

Date Of Driving Perm



Date Of Driving Pass	04/05/2004
Driving experience	18 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91520608
Alt. Phone Number	-
Email Address	LINGCHONG@MEDIACORP.COM SG
Address	39 MANDALAY ROAD #07-39
Address complement	-
Postcode	SINGAPORE 308216
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?	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	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Toa Payoh Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002519999
Alt. Police Station Phone No	(Fax) +65-63548749
Police Station Address	93 Toa Payoh Central Toa Payoh Community Building #01-02 Singapore 319194
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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMJ3156H
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NG LAP KWAN MARY
Contact Number	(Phone) +65-94565733
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	OON LING CHONG
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	5-DAYS MC
Injured person in which vehicle?	FBN9708K,
Were seat belts worn?	No
Was this Injured conveyed to hospital by ambulance?	No



# 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 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 Traffic Police Department 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 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 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 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 be 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 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.

 31/3/2023  
Policyholder's Signature / Date & Time

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

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

Sketch Plan

	<p>Leader Heights / Tower Road</p> <p>A = FBV 9708 K</p> <p>B = SMJ 3166 H</p>
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v.3.0-2022

SKETCH PLAN #2

Describe Circumstance of the Accident

Refer to police report page 2

Declaration

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



Policyholder's Signature / Date & Time

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



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



v2jun2022



**SINGAPORE  
POLICE FORCE**



T/20230330/2044

Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

1 of 3

Report No. T/20230330/2044

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 30/03/2023 13:40	Vide Report No.:	Station Diary No.: 38
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**Informant's Particulars**

Name of Informant: OON LING CHONG			Address: 39 MANDALAY ROAD #07-39 SINGAPORE 308216		
ID Type / ID No.: NRIC NO / S2593991C			Contact No.: Home/Office: Mobile: 91520608		
Nationality: MALAYSIAN			Email: lingchong@mediacorp.com		
Sex: Male	Age: 55	Date of Birth: 24/09/1967	Type of Informant: Rider		
Race: Chinese			Language: English		
Occupation: MANAGER			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: 27/03/2023 16:45	Type of Location: T-Junction
Location:  LEEDON HEIGHTS				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Rear collision				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN9708K	Motorcycle	SYM	MAXSYM 400I ABS	Grey	Slightly Damaged	0
SMJ3156H	Car	TOYOTA	PREVIA AERAS 2.4 CVT MR	White		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBN9708K	NTUC Income Insurance Co-Operative Limited	5115397768-03	11/01/2023	10/01/2024





**SINGAPORE  
POLICE FORCE**



T/20230330/2044

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

2 of 3

Report No. T/20230330/2044

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	OON LING CHONG	ID No.	S2593991C
Related Vehicle	FBN9708K (Motorcycle)	Contact No.	91520608
Hospital/Clinic	BRADDELL MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	27/03/2023	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	NIL
<b>Driver</b>			
Name	NG LAP KWAN MARY	ID No.	S8169831G
Related Vehicle	SMJ3156H (Car)	Contact No.	94565733
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 27/03/2023 at around 1645hrs, my motorcycle (FBN9708K) was involved in a road traffic accident with one private car (SMJ3156H). My motorcycle was at the stop line at the junction of Leedon Heights and Farrer road waiting for the traffic to clear. While waiting, my exhaust pipe, which was on the right side portion of my motorcycle, was rear ended by this vehicle and caused my bike to topple. As a result, I fell off from my motorcycle causing injury to my left leg area.

I exchanged particulars with this driver and I left the scene afterward.

In the evening, I fell unwell and went to Braddell Medical clinic to see a doctor. I was given 5 days MC by the doctor.





**SINGAPORE  
POLICE FORCE**



T/20230330/2044

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

3 of 3

Report No. T/20230330/2044

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:

E /

SGT 2 LEE SIONG HUI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SR STAFF SGT FAHKRUL RAZI BIN SUHAIME

Contact No.: 65470000

Signature Of Informant:

Date/Time:

30/03/2023 13:40

Classification Of Case:

NP168

# EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

Email: erofia@singnet.com.sg

*Auto - General*

Name : Oon Ling Chong (91520608)

Accident Date : 27-Mar-23

SYM

Vehicle No : FBN9708K (COE10012029)

Vehicle Model : MAXSYM 400I

ABS

## Estimated Repair Costs

Qty	Description	Amount S(\$)
<b>List Items</b>		
1	Front fender <i>3</i>	\$ 520.00 <i>x</i>
1	Front fairing <i>cut</i>	\$ 980.00 <i>800</i>
1	Front fairing (matt) <i>cut</i>	\$ 850.00 <i>480</i>
1	Front inner cover (matt) <i>cut</i>	\$ 680.00 <i>300</i>
1	Meter cover (matt) <i>cut</i>	\$ 380.00 <i>182</i>
1	Side mirror <i>o/s cut</i>	\$ 480.00 <i>110</i>
1	Handle bar <i>3 cut</i>	\$ 450.00 <i>180</i>
1	Handle bar ends <i>sch</i>	\$ 150.00 <i>38</i>
2	Hand grips <i>11</i>	\$ 100.00 <i>x</i>
1	Brake levers <i>sch</i>	\$ 380.00 <i>110</i>
2	Footstep panel <i>o/s cut</i>	\$ 690.00 <i>120</i>
2	Footstep lower panel <i>o/s cut</i>	\$ 570.00 <i>120</i>
1	Exhaust assy <i>twi/22</i>	\$ 2,750.00 <i>1150</i>
1	Exhaust protector <i>dis</i>	\$ 280.00 <i>166</i>
1	Exhaust end cap <i>dis</i>	\$ 240.00 <i>88</i>
1	Rear cover <i>11</i>	\$ 680.00 <i>x</i>
		\$ 10,180.00
Less 10%		\$ 1,018.00
		\$ 9,162.00

*not allowed*  
*der*  
*19/4/21*  
*1/5 \$3300*  
*Hong*  
*Wong*

## Special Net Items

1	Number plate (1 set) <i>11</i>	\$ 38.00 <i>x</i>
2	Fork oils <i>11</i>	\$ 30.00 <i>x</i>
2	Fork oil seals <i>11</i>	\$ 56.00 <i>x</i>
1	Steering cone (1 set) <i>11</i>	\$ 90.00 <i>x</i>
1	Rear box <i>82</i>	\$ 580.00 <i>x</i>
1	Rear box bracket <i>11</i>	\$ 180.00 <i>x</i>
1	Sticker <i>11</i>	\$ 120.00 <i>x</i>
		\$ 1,094.00

# EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

Email: erofia@singnet.com.sg

Name : Oon Ling Chong (91520608)

Accident Date : 27-Mar-23

SYM

Vehicle No : FBN9708K (COE10012029)

Vehicle Model : MAXSYM 400I

ABS

## Estimated Repair Costs

<u>S/No.</u>	<u>Labour</u>	
1	To provide towing service (LOD)	\$ -
2	To check wiring and reset headlamp focusing	\$ 11 80.00 X
3	To provide labour	\$ 420.00 300
4	To repair body frame	\$ 11 480.00 X
5	To respray painting	\$ 600.00 200
		<u>\$ 1,580.00</u>
<b>Grand Total</b>		<u><u>\$ 11,836.00</u></u>

Singapore Dollars: Eleven Thousand Eight Hundred and Thirty-Six only



EROFIA MOTOR TRADING PTE LTD

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature:  
Date:

P-4126  
102  
3713.4