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### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	502I
<b>Vehicle Details</b>	
Vehicle No.:	FBS4800H
Vehicle to be Exported:	Yes
Intended Deregistration Date:	30 May 2023
Vehicle Make:	YAMAHA
Vehicle Model:	AEROX155 CVT
Primary Colour:	Grey
Manufacturing Year:	2020 ✓
Engine No.:	G3P2E0002723
Chassis No.:	MH3SG6410LJ002722
Maximum Power Output:	-
Open Market Value:	\$2,162.00
Original Registration Date:	10 May 2021 ✓
First Registration Date:	10 May 2021
Transfer Count:	1
Actual ARF Paid:	\$325.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	09 May 2031 ✓
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$8,011.00
COE Rebate Amount:	\$6,361.00
<b>Total Rebate Amount:</b>	<b>\$6,361.00 ✓</b>

The information contained herein is correct as at 30 May 2023

OK



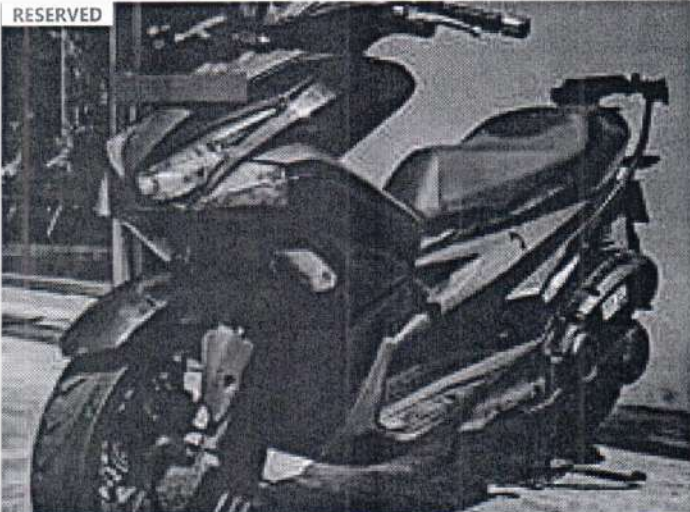
Registration Date	24/03/2021
COE Expiry Date	23/03/2031 (7yrs 9mths 23days COE left)
Mileage	26245km
No. of owners	-
Type of Vehicle	Scooters
SGD \$13500	

Yamaha Aerox 155 For Sale.  
Well Maintain Condition.  
Loan Available, Welcome Trade In.  
Come Visit Us At New Southern Motor  
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Similar Bikes

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RESERVED



25/03/2023

Used Bike

★Project 8 Motorworks

Yamaha Aerox 155

Tip Top Condition Aerox For S...

\$11500

♥ 3

RESERVED





28/03/2023

Used Bike

★Wing Fuat Pte Ltd


Yamaha Aerox 155

Yamaha Aerox 155 For Sale. I...

\$11800

♥ 1

RESERVED





Bike model

Type Of Vehicle

Any

Price From

Any

Price To

Any

Class

Any

More Search Options ▾

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RESERVED

1

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Yamaha Aerox 155	
Listing Type	Paid Ad
Brand	Yamaha
Model	Yamaha Aerox 155
Engine Capacity	155cc
Classification	Class 2B



## 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	04/05/2023 16:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	26/04/2023 06:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS AVE 2
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBS4800H
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AMNUR BIN SANUSI
NRIC No	SXXXX502I
Email Address	AMNURRICH8172@GMAIL.COM
Mobile Phone No	(Phone) +65-87186483
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Aerox
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	Auto
CC	155

### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5122117467-02

### DRIVER

Name of Driver	AMNUR BIN SANUSI
NRIC No	SXXXX502I
Date Of Birth	08/02/1981
Occupation	Outdoor



Date Of Driving Pass .....	01/09/2009
Driving experience .....	13 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87186483
Alt. Phone Number .....	-
Email Address .....	AMNURRICH8172@GMAIL.COM
Address .....	BLK. 750 WOODLANDS AVE 4
Address complement .....	#02-323
Postcode .....	730750
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 - Cross Junction
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
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 .....	Woodlands East Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007679999
Police Station Address .....	3 Woodlands Drive 63 Singapore 737890
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT NO: T/20230428/2007

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	KEEP BY OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMZ3857J
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private hire
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 .....	AMNUR BIN SANUSI
Gender .....	Male
Phone No .....	(Phone) +65-87186483
Address .....	BLK. 750 WOODLANDS AVE 4
Address Complement .....	#02-323
Post Code .....	730750
Approximate Age Years Old .....	42
Injuries Sustained .....	-
Injured person in which vehicle? .....	FBS4800H
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	Yes



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. 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.

(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;

Witnessed by Reporting Centre  
Personnel

WOODLAND AVE 2 TOWARD (BKE)

A: FBS 4800H  
B: SUZ 3957J




**Describe Circumstances of the Accident**

REFER TO POLICE REPORT.

### 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/20230428/2007

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

1 of 3

Report No. T/20230428/2007

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/04/2023 09:47	Vide Report No.:	Station Diary No.: 21
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**Informant's Particulars**

Name of Informant: AMNUR BIN SANUSI	Address: APT BLK 750 WOODLANDS AVENUE 4 #02-323 SINGAPORE 730750		
ID Type / ID No.: NRIC NO / S8157502I	Contact No.: Home/Office: Mobile: 87186483		
Nationality: MALAYSIAN	Email:		
Sex: Male	Age: 42	Date of Birth: 08/02/1981	Type of Informant: Rider
Race: Malay	Language: English		
Occupation: Bus driver	Driving Licence Information: Class: 2B,3,4A Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 26/04/2023 06:00	Type of Location: X-Junction
Location:  WOODLANDS AVENUE 2				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBS4800H	Motorcycle	YAMAHA	AEROX155 CVT	Grey	Slightly Damaged	0
SMZ3857J	Car				Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBS4800H	NTUC Income Insurance Co-Operative Limited	5122117467-01	10/05/2022	09/05/2023





**SINGAPORE  
POLICE FORCE**



T/20230428/2007

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

2 of 3

Report No. T/20230428/2007

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AMNUR BIN SANUSI	ID No.	S 157502I
Related Vehicle	NIL	Contact No.	87186483
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 26/04/2023 at about 0600hrs I was riding my motorcycle (FBS4800H) along Woodlands Avenue 2 towards BKE on the middle lane at the cross junction and was stationary as the traffic light was red. When the traffic light turned green, I moved off and a Silver Toyota (SMZ3857J) from the opposite traffic did an illegal U-turn and hit onto the middle right of my motorcycle. I fell due to the impact and was unable to stand up. I did not manage to exchange particulars with the other driver. Traffic Police and ambulance attended to me and I was conveyed to Khoo Teck Puat hospital and was given a total of 7 days medical certificate from 26/04/2023 - 02/05/2023.

**SINGAPORE  
POLICE FORCE**

T/20230428/2007

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

3 of 3

Report No. T/20230428/2007

## CONTINUATION OF REPORT

Signature of Officer Recording The Report:  
L /  
SGT 2 LEE WEI LUN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
STAFF SGT ROIZMAN BIN MOHAMED  
POSARI  
Contact No.: 65476131

NP168

Signature Of Informant:

Date/Time:  
28/04/2023 09:47

Classification Of Case:



**QUOTATION FOR REPAIR :FBS4800H**

Qty	Description	Repairer's Estimate
1	HANDLEBAR	160.00 BT 120
1	EXHAUST COVER	120.00 CUT 78
1	RADIATOR COVER	110.00 CUT 75
1	RHS PILLION FOOTREST	80.00 CUT
1	RHS RIDER FOOT REST COVER	130.00 CUT 98
1	FULL COVERSET	680.00 CRA/CUT
1	KEY COVER BRACKET	140.00 NN X
1	RHS INNER COVER (BLACK)	120.00 CUT
1	REAR MUDGUARD	220.00 98 CRA
1	REAR MUDGUARD BRACKET	150.00 X R
1	HEADLIGHT	450.00 X NN
1	FRONT SIGNAL LIGHT LHS AND RHS - CRA	180.00 X 90
1	RHS CENTER COVER	160.00 CUT
1	RHS TAIL COVER	140.00 CUT
1	HEADLIGHT BRACKET	150.00 X SVC
1	REAR RHS INNER COVER (BLACK)	120.00 CUT
1	BELLYPAN COVER RHS	120.00 CUT
1	BRAKE LEVER RHS	110.00 CUT 55
1	BALANCER SET RH	80.00 CUT 45
1	FORK SET	780.00 X NN
1	FRONT WIRE STAY BRACKET	160.00 X SVC

	4,360.00
Less 10%	436.00
Total Part :	3,924.00

**Nett items**

Total Nett items :	0.00
Total parts :	3,924.00

**Labour Fee**

FORK ALIGNMENT	220.00
FRONT RIM ALIGNMENT	220.00
CHASSIS ALIGNMENT	500.00
LABOUR FEE	1,200.00

Total Labour Fee:	2,140.00
Total parts and labour charges :	6,064.00

7 DAYS

4 days

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: