



PRIORITY SERVICES

Insurance Loss Adjusters and Motor Appraisers

Blk 779 Yishun Avenue 2

#01-1545 Singapore 760779

Tel: 6293 4822 Fax: 6296 3283

E-mail: admin@priorityservices.sg

Messrs. Sompō Insurance Pte Ltd
50 Singapore Land Tower
#05-01/06 Raffles Place
Singapore 048623

Bill No : DN/01133/20

Date : 17/6/2020

Dr.

To

Survey Fee (S\$) : 100.00
Photographs (S\$) :
Transport (S\$) :
Resurvey (S\$) :
Miscellaneous (S\$) :

Services rendered including photographs and transport charges

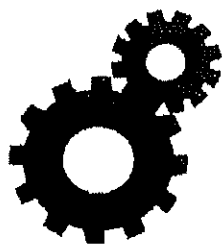
(S\$) : 100.00

Our Reference : TP-0095/03/20
Insured : FBQ 7319 Y
Date Of Accident : 07/02/2020
Policy / Cert. No. : Pre-Repair Survey
Your Claim No : CMTD2000801/RUC
Vehicle : Yamaha Aerox (Motorcycle) - FC 9119 X

Dollars : One Hundred ONLY

For PRIORITY SERVICES

E & O.E.



PRIORITY SERVICES

Insurance Loss Adjusters and Motor Appraisers
Blk 779 #01-1545 Yishun Ave 2 Singapore 760779
Tel: 62934822 Fax: 62963283
E-mail: admin@priorityservices.sg

Your Ref. : CMTD2000801/RUC
Our Ref. : TP-0095/03/20

Date : 17 June 2020

M/s. Sompo Insurance Pte Ltd
50 Singapore Land Tower
#05-01/06
Singapore 048623

Attn. : Ms. Ruth Chua

Madam,

Pre-Repair Survey

Vehicle No.: FC 9119 X

Date Of Accident: 07-Feb-2020

Date and Time of Request : 12-Mar-2020 / 10.55am

Date and Time of Inspection : 1) 18-Mar-2020 / 11.10am (PRI by appointment)
@ M/s. Equator Brotherhood

Particulars of Vehicle

Registration No.	: FC 9119 X
Make / Model	: Yamaha / Aerox (Scooter)
Year	: 2018
Colour	: Silver
Odometer	: 36666 km
Engine Capacity	: 155 cc
Carrying Capacity	: 1
Engine No.	: -
Chassis / Body Frame	: MH3SG4640JJ044441
Radio / CD Player	: -
Air-Con Conditioner	: -
Other Apparent Accessories	: -
Spare Tyre	: -
Jack / Tools	: -

(58) Photographs of vehicle taken.

Documents Available At Time Of Inspection

- 1) Singapore Accident Statement (SAS)
- 2) Police Report

Visual Damages

At the RH side and LH side portion.

Damages subject to consistency.

Remarks

Despite our request, the repairer would not provide: -

- 1) Repairer estimate

We will be conducting further inspections on dismantled items and resurvey after repairs when the repairer calls us.

Pre-Accident market value: About \$8,000.00.

COE Rebate: \$4,640.00 (COE expiry on 12-Aug-2028).

Estimated repair cost: About \$1,800.00.

Estimated period of repairs: About 3 working days.

Yours Very Truly
PRIORITY SERVICES



LAWRENCE NG
MSAAA
Motor Appraiser

SINGAPORE ACCIDENT STATEMENT

Third party

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 Report	08/02/2020 10:49
Date Of Accident	07/02/2020 15:45
Exact Location Of Accident	PASIR RIS DRIVE 06
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FC9119X
Insured/Policyholder	
Name Of Registered Owner	ASYRON SYAFIQ BIN AHMAD
NRIC No	S8918246H
Email Address	ASYRONSYAFIQ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82981235
Alternative Phone No	OTHERS-82981235

Vehicle Particulars

Manufacturer	YAMAHA
Model	GDR155A (AEROX)
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5103043059-01
Cover Note Number	

Driver

Name of Driver	ASYRON SYAFIQ BIN AHMAD
NRIC No	S8918246H
Date Of Birth	04/06/1989
Occupation	INDOOR
Date Of Driving Pass	10/07/2008
Driving Experience	11 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82981235
Fax Number	
Contact Number	OTHERS-82981235
EEmail Address	ASYRONSYAFIQ@GMAIL.COM

Address	BLK 208 #10-352 PASIR RIS STREET 21
Postcode	510208
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT No.T/20200207/2113;

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	FBQ7319Y
Vehicle Make/Model/Colour	HONDA / WAVE125I MANUAL
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

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 Authorized 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 Roadside 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 lodging 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.
- (d) 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
- (e) 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: 18/12/2019

18:55

Driver's Signature

(if driver is not the policyholder)

Date & Time:

IDAC KAKI BURIT (VAC)

23 Kaki Bukit Ave 4 #02-02

Singapore 415003

Tel: 67416697 Fax: 67492305

Email: vact@idacm.com.sg

Reporting Centre Personnel's Signature

Name:

NRIC/IN No:

06 FEB 2020

Accident Sketch Plan

SKETCH PLAN

Parked & Found Damaged
(FC 911ax)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

DECLARATION

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

Policyholder's Signature _____
Date & Time: 12/12/2015 12:57 PM

Driver's Signature:
[If driver is not the policyholder]
Date & Time:

IDAC KAKI BUKIT (VAC)
25 Kaki Bukit Ave 4 #02-02
Singapore 415883
Tel: 674 16687 Fax: 67492305
Email: wachh@idacm.com.sg
Reporting Centre Personnel's Signature
Name: _____
NRCPRN No: _____

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20200207/2113

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3
Report No: T/20200207/2113

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/02/2020 18:01	Vide Report No.:	Station Diary No.: 102
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Informant's Particulars

Name of Informant: ASYRON SYAFIQ BIN AHMAD	Address: APT BLK 208 PASIR RIS STREET 21 #10-352 SINGAPORE 510208		
ID Type / ID No.: NRIC NO / S8916246H	Contact No.: Home/Office: Mobile: 82981235		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 30	Date of Birth: 04/06/1989	Type of Informant: Vehicle Owner
Race: Javanese	Language:		Institution / School Name:
Occupation: PRIMARY SCREENING OFFICER	Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/02/2020 15:45	Type of Location: Car Park
Location: Along Road 1 PASIR RIS DRIVE 6 443 PASIR RIS DRIVE 6 OPEN SPACE CARPARK LOT 1a			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBQ7319Y	Motorcycle	HONDA				0
FC9119X	Motorcycle	YAMAHA	GDR155A (AEROX)	White		0

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20200207/2113

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No: T/20200207/2113

CONTINUATION OF REPORT

Brief Details.

On 7/2/20 at about 2pm, I parked my motorcycle (FC9119X) at 443 Pasir Ris Drive 6 lot 16. At about 4.05PM, I returned to my vehicle and saw that my motorcycle was not in its original position - it was slanted. The motorcycle owner of FBM2175Z, told me that my bike had fell and a Chinese man in his 60s had lift up my motorcycle. He also told me that when he asked the Chinese man what had happened, the Chinese man walked to his motorcycle FBQ7319Y and then walked away.

Accident Sketch Plan



SINGAPORE
POLICE FORCE



T/20200207/2113

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No: T/20200207/2113

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:
G/
Sgt 3 S EVA SHERRIENA BINTI S AFFINDY

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
07/02/2020 18:01

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt NEO ZHI YUAN
Contact No.: 65476079

Classification Of Case:

Authentication Stamp
NP168

