08/11/13) Wef	· REF: CS	1052410	10457 Rup3 (976
		ASSI	GNMENT
From:  Stimated Cost:  OD I (P) WS I TP RES / OD I  To Inspect Vehicle No: SL  at Workshop m/s  Of (I) KWMS  insured:  Policy No.  Claims No.  Sum Insured:  (Client's Record)  Make of Veh:	w 1199R whoses	ASSIC	Veh No: SLW   G C Yr Regn: 2020   SEP  Typer M.Car I M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  Truck / Trailer or  Make: Bum.w X c.c [938]  Colour BUML AC: Insured / Std / Ni / NA  Sp.Reading 786 T T/Radio: Insured / Std / Ni / NA  Eng/No:  C/No: WBAT872620 9C 38862  Gen. Cond: Good / Fair / Poor / Burnt  Steering: morder / Jammed / Leaked / Burnt or  Brake: Inorder / Jammed / Leaked / Burnt or  Modi: Nii / S/Rim / STD A/Rim or
-	finspection.  [6] K  Consistent?: Yes or  Consistent?: Yes or  days Res.: Yes or  3 Val.: Yes or  HRS	r No	Tyre Size: F: 245 50R P  R: 24  BS) DUN I EXNOVA I GY I FS I LIZA I MIC I OHTSU I PIR I SUMI I  TOYO I YOKO or  Front R/Bal. mm R/Bal. mm  L/Bal. mm L/Bal. mm  D.O.A. 23 (0) 4 D.O.I. 28 (0) 24  Survey held at Kung Clfons  Des. of Damages: Frt Real I Ols I N/S I U/C I Rooftop or  The U/C I Chassis frame I Body Structure affected due to collision.
Date / Time Action / Inst	ruction LIMIT-951	<	
le/Time, File Pass to?	: Preli. Report		Days Of Repair:  Resurvey No. of Trip:  Survey Fee:
port Format : mp Sum / I.B.I: (\$		Add Fee:	: Transportation:  : Site Insp (\$ )S+RSS  : Interview (\$ ) Photos  : Tech. Invs (\$ ) Others  : Weekend (\$ )

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**REPAIR ESTIMATE** 

Name & Address

Motor Claims Department

**ECICS LIMITED** 

7 Temasek Boulevard

#10-01 Suntec Tower One

Singapore 038987.

Email/Fax No

Contact No.

Vehicle No:

Date:

**SLW1199R** 

24-Oct-24

Brand & Model:

Franchise:

BMW X3 sDrive20i

BMW

Chassis/VIN No:

014144

WBATS720209C38862

**HUI WEN** 

Type of Claim

YEAR MODEL:

WIP#:

Contact No (Eurokars):

Contact Person (Eurokars):

THIRD PARTY

15/09/2020

29463

6331 0680

NO	DESCRIPTION	PART NO.	QTY	MARK	REVISED	P	RICE
1	REAR BUMPER &	51 12 7488222	1		•	\$	1,598.75
2	LOWRE BUMPER PANEL SUL	51 12 7488230	1		-	\$	793.60
3	COVER, TOWING SOL	51 12 7953954	1		-	\$	52 <i>.</i> 30
4	GUIDE FOR BUMPER RH ?	51 12 7400666	1		•	\$	143.85
5	GUIDE FOR BUMPER LH 7	51 12 7400665	1		•	\$	143.85
6	SIDE GUIDE, BUMPER LH 7	51 12 7400667	1		•	\$	184.95
7	SIDE GUIDE, BUMPER RH 7	51 12 7400668	1		•	\$	184.95
8	REINFORCEMENT COVER 7	51 12 7400674	1		•	\$	123.85
9	LOWER BUMPER UNDERRIDE GUARD SU	51 12 7417846	1		•	\$	357.90
10	REAR REINFORCEMENT ?	51 12 7400008	1		•	\$	832.45
11	GASKET 2	51 12 7400673	2		•	\$	15.50
12	TAILGATE 6+	41 00 7494942	1		•	\$	2,241.15
13	SLIDER M	51 62 7401793	4		-	\$	33.8
14	CLIP WITH SE W	07 14 2754954	2		•	\$	2.8
15	BLIND RIVET	07 14 9174618	4		-	\$	12.6
	ADHESIVE PAD	51 18 7134021	3		-	\$	5.4
	EXPANDING NUT	07 14 7429950	2		•	\$	6.
-	BMW LOGO AL	51 14 7499154	1		•	\$	76.
-	LABEL X3	51 14 8737319	1		•	\$	68
-	LABEL SDRIVE201	51 14 8737322	1		•	\$	103
-		51 31 2996980	2		•	\$	10
-	BUMP STOP No.	83 19 2289285	1			\$	15
_	REPAIR FLAT	51 31 8269160	4			\$	1
3	VELCRO FASTE NA /	31 31 0203200				\$	

Sub-Total (Parts Price) \$

\$ 7,159.00

LABO	UR / SERVICES CHARGES	REVISED	PRICE
NO	DESCRIPTION  DESCR	1700	\$ 2,550.00
	TO REMOVE /REPLACE REAR BUMPER, TAILGATE AND ALL RELATED DAMAGED BODY PARTS. TO REPAIR ALL AREAS AFFECTED BY	1700	\$ 2,380.00
	THE ACCIDENT.		

# (6) EUROKARS GROUP

2	TO RESPRAY REAR BUMPER AND TAILGATE.	REPAII	R ESTIN	ЛАТЕ	
		1880	\$	2,320.00	
	TO CARRY-OUT BODY CAVITY PRESERVATION.	150	\$	250.00	
4	TO SUPPLY REAR LICENCE PLATE WITH CASING	nett	\$	70.00	-
5	TO TRANSFER THE TAILGATE MECHANISM.	nett	5 425	880.00	
6	TO REMOVE & REFIT THE REAR WINDSCREEN GLASS.	nett	\$	560.00	
7	TO SUPPLY SEALER ON THE REAR WINDSCREEN GLASS.	nett	\$	180,00	-
8	TO TRANSFER THE REVERSE SENSORS.	nett	\$ 250	500.00	
9	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		\$ 150	250.00	
10	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	nett	\$	500.00	-
11	SUNDRIES.	nett	\$ 20	59.00	1

	Date & Time: 10/24	Repair Days:		P	P	Excess:	
Surveyo	or Remarks:		_	1	_		

Hp 90010068

Resy 64 paint

#### Remarks

- This is only an estimate based on visual inspection. Should there be more damages found, during repair, it will be informed and quoted additionally.
- An administrative fee of 20% of the quotation value will be chargeable for damage assessment and preparation of this estimate, if you choose not to proceed with repair.

Sub-Total (Labou	ır Price)	\$		\$ 8,080.00
		REV	SED	PRICE
Parts Price		\$	•	\$ 7,159.00
Labour Price		\$	•	\$ 8,080.00
Total (Initial Estimate)		\$		\$ 15,239.00
Supp 1		\$		\$ L.
Supp 2		\$		\$
Supp 3		\$		\$ -
Total (Before Excess)		\$	•	\$ 15,239.00
Less Excess		\$	•	\$
TOTAL (After Excess)		\$		\$ 15,239.00
GST	9%	\$	-	\$ 1,371.51
GRAND TOTAL		\$		\$ 16,610.51

## 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:

# **©** SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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 witholding 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 First Submission

Reported by

**Date of Accident** 

**Exact Location of Accident** 

Additional Location Information

Country/State of Loss

23/10/2024 11:48 (SGT)

**Actual Driver** 

23/10/2024 07:02 (SGT)

Singapore

JUNC OF PAYA LEBAR ROAD AND SIMS AVENUE

Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLW1199R

#### INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

YUSFIANSHAH BIN YATIMAN

S8029697E

YANSHAH@HOTMAIL.COM

(Phone) +65-81823750

#### VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

**BMW** 

**X3** 

X3 SDRIVE 20I ADAPTIVE HL LED FL

Private use

No - Claiming third party

Private car

Auto

1998

#### **INSURANCE COMPANY**

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited

DRIVER



Page 1 of 13

ne of Driver RIC NO NATILA BINTE ABU BAKAR S8029923J pate Of Birth 30/09/1980 Occupation Indoor **Driving Pass Date** 04/12/2003 **Driving License Pass Class** 3 **Driving License Validity** Valid Driving experience 20 YEARS AND 10 MONTHS Gender **Female** Mobile Number (Phone) +65-96254205 Alt. Phone Number **Email Address** NATRUNSOLO@GMAIL.COM Address BLK 25 TAMPINES STREET 86 01-20 SINGAPORE 528569 Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 Collision - Head to Rear Type of Accident Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 3 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 PASSENGER 1 Name MISHA INSHIRAH BINTE YUSFIANSHAH Gender Female PASSENGER 2 Name YASIN YUSUF BIN YUSFIANSHAH Gender Male **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 THE SKETCH PLAN

ATTACHMENT(S)

accident photos available for attachment? was there any video captured by Car Camera?

Yes No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category
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)

SME4046L

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Private car

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#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the claims process.
- 2 The Form must be completed by the Policyholder and/or the Actual Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wiltul misrepresentation or withholding of material facts may above 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.
- E. 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.
- Sy 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.
- 6. 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 "Porsonal 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' tawyers/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:

- (iii) 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 disclasure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail cackages), and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")

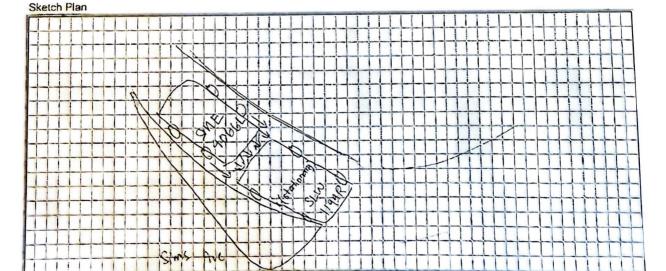
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers at (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

Policyholder's Signature / Date & Time

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

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



Paya Legar Road

1

cribe Circumstance of the Accident	
NTACT NUMBER: QLASTING ACCIDENT DATE & TIME: 23 O CTOBET 2024 7	02
NTACT NUMBER: 96254205  E-MAIL: Datrunsolo @gmail.com	
CATION: Junction of Paya Lebar Road and Sims Avenue	
I was on Paya Lebar Road. I took the right	
I was on laya Lebar Road. I took the right side of the turning road to turn into sims Avenuroad. I as stopped at the filtering junction to turn into sims Avenue. I was stationary as there was a fast as oncoming car from sims Avenue.	e
road. I as stopped at the filtering junction to	
turn ito sims Avenue. I was stationary as there	e
was a fact or oncomina car from sime huenus	e.
3	
I heard a loud band com behind and	
I heard a loud borng from behind and my car, my 13-year old daughter and, 9 year-s son and myself lurched forward. It was a	ماط
so and would busched Cornagerd The was a	
Son and original tipe lands T - 2+ Out	
very strong and from the bace. I got the	,\_ 
very strong hit from the back. I got out of the car and so did the driver of SME 4046 Mr Krjun. He apologised and said that he	7
MY ATJUN. HE apologised that said that the	-
did not see my car as he was looking at	-
oncowing traffic too.	$\dashv$
and the second	$\dashv$
my boot and bumper was badly damaged.	
	-
	_
	_
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE A 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	۲

Declaration

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

Policyholder's Signature / Date & Time

Driver's Signature (4 driver is not the policyholder) / Date

Wisnessed by Reporting Compensation (Name as in NRIC/ID quiet)

### > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	Singarana NIDIC
Owner ID Type:	Singapore NRIC
Owner ID:	697E
Vehicle Details Vehicle No.:	CIA44400D
0.500	SLW1199R
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Oct 2024
Vehicle Make:	B.M.W.
Vehicle Model:	X3 SDRIVE 20I ADAPTIVE HL LED FL
Primary Colour:	Black
Manufacturing Year:	2020
Engine No.:	F497K356B48B20A
Chassis No.:	WBATS720209C38862
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$44,437.00
Original Registration Date:	15 Sep 2020
First Registration Date:	15 Sep 2020
Transfer Count:	2
Actual ARF Paid:	\$54,212.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Sep 2030
PARF Rebate Amount:	\$40,659.00
Intended COE Rebate Details	
COE Expiry Date:	14 Sep 2030
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$41,510.00
COE Rebate Amount:	\$24,386.00
Total Rebate Amount: Message	\$65,045.00
You will not be eligible for any COE rebate from the current COE (included)	ting unused COE from any lay up period/s) if you repour your COE

The information contained herein is correct as at 30 Oct 2024

## m.sgcarmart.com ↑ Q D ⊗ BMW X3 sDrive20i **\$158,000** Instalment \$1,611/mth PREMIUM AD (\$) Apply for 2.48% loan ○ Shortlist Get Warranty AN AD to get the best price START SELLING NOW Overview Financial Photo Research Depreciation \$23,330 / year 23-Jul-2020 Reg. Date (5yrs 8mths 22days COE left) Manufactured (i) 2019 Mileage 28,005 km (6.6k / year)

Transmission Auto

**Engine Cap** 1,998 cc

(i) \$1,210 / year Road Tax

135.0 kW (181 bhp)

View specs of the BMW X3 (2018-2022)

Power

Curb Weight (i) 1,685 kg \$35,001 COF

\$40,486 OMV

ARF \$48,681

(i) \$56,562 as of today Dereg Value

No. of Owners (i) 2