

ASS. REC. BY: Taught

REF: CS/CT12412 0392/Tv63

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

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: \$215K

IDAC Accident Report Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lurr. Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SNF392X Yr Regn: 2021, 09

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

Truck / Trailer or

Make: BMW 430I MSPT cc 1998

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

Sp Reading: 16590 T/Padio: Insured / Std / NI / NA

Eng No: _____

CNo: WBA22AT0X0CH7L137

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rim / STD A/Rim or

Tyre Size: F: 255/35R19

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.L. 26/12/24

Survey held at Performance Motors

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

Frt o/s

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

DATE / TIME	Action / Instruction

Date/Time, File Pass to?

☐ : Prell. Report

1) _____
Date/Time, File Return to?

☐ : Final Report

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

Survey Fee: _____

Transportation: _____

_____ S + RS _____ SI

Photos

Others

Remarks/Comments:

BMW Dealer

Performance Motors Limited

A Sime Darby Motors Company
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X
Toll-Free Number (1800-2255269)

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



Car In.

GST REG. NO : M2 - 0020081 - X

E S T I M A T E

*→ China
20/12/24*

Estimate No. : **b1 72177**
Date Estimated : **19/12/2024**
Prepared By : **Tee Hong Da**

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -

Vipul Agarwal
112 Tanjong Rhu Road
#07-02

Singapore 436929

- ACCOUNT - 60428

Direct Asia Insurance (S) Pte Ltd
16 Raffles Quay
#39-01 Hong Leong Building
Singapore 048581

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SNF392X	WBA22AT0X0CH76137	27/09/2021	430i Convertible	14522

DESCRIPTIONVALUE

To replace front bumper and attachment

250 1,275.00

To respray front bumper, front right fender and attachment

1923 1,923.00

To check electrical wiring system at the front section for proper function.

✓ 177.00

To remove and install fuse box at the front section to facilitate repair.

? 531.00

To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.

✓ 177.00

To carry out body cavity preservation. (Per panel).

X 118.00

Sundries.

? 150.00

Total Labour 1: **4,351.00**

DESCRIPTION	QTY	PRIC	VALUE
KERB SHOCK ABSORBER	1	16.30	? 16.30
RH VERTICAL CONNECTION	1	19.20	? 19.20
RH ADAPTER	1	114.45	? 114.45
RH BUMPER GUIDE TOP	1	57.55	? 57.55
RH BUMPER GUIDE BOTTOM	1	57.55	? 57.55
FRT BUMPER CARRIER	1	718.20	? 718.20
RH CRASH BOX	1	105.20	? 105.20
RH FOG LAMP SUPPORT (M)	1	144.55	? 144.55
FRT RH AIR DUCT COVER (M)	1	82.15	? 82.15
RH GRILLE AIR INLET OPEN (M)	1	119.35	? 119.35
RH SIDE GRILLE TRIM (M)	1	98.50	? 98.50
FRT BUMPER BOTTOM CARRIER (M)	1	388.25	? 388.25
GRILLE AIR INLET MIDDLE (M)	1	119.35	? 119.35

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E S T I M A T E

Estimate No. : b1 72177
Date Estimated : 19/12/2024
Prepared By : Tee Hong Da

Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SNF392X	WBA22AT0X0CH76137	27/09/2021	430i Convertible	14522

DESCRIPTION	QTY	PRIC	VALUE
ADAPTER UNDERBONNET SCREEN	1	163.50	163.50
FRT BUMPER PANEL PRIMED (M PDC/PMA)	1	1,394.55	1,394.55
SET MOUNTING PDC/PMA SENSOR FRT (M)	1	66.10	66.10
FRT ORNAMENTAL GRILLE BLACK	1	348.80	348.80
PLAQUE 82MM	1	76.55	76.55
FRT SHOCK ABSORBER (M ECE)	1	71.10	71.10
FRT RH BRAKE AIR DUCT	1	59.20	59.20
RH WHEEL ARCH BRAKE AIR DUCT	1	59.20	59.20
FRT LIGHT ELECTRONICS CONTROL UNIT	1	996.90	996.90
RH GROMMET	1	18.50	18.50
SPACER	1	13.45	13.45
SET OF SCREWS	1	19.20	19.20
RH HEADLIGHT LED TECHNOLOGY	1	3,129.45	3,129.45
RH LED MODULE DAYTIME DRIVING LIGHT	1	256.50	256.50
Repair kit,	1	311.20	311.20
RH HEADLIGHT BRACKET	1	100.45	100.45
RH FOG LIGHT LED	1	631.30	631.30
ULTRASONIC SENSOR ARCTIC RACE BLUE	1	404.25	404.25
DECOUPLING RING	1	5.65	5.65
DECOUPLING RING	4	5.65	22.60
ULTRASONIC SENSOR BLACK	1	269.65	269.65

Total Parts : 10,458.70

Tanjin 92495749
up 26/12/24 @ 430pm
Plp Resing before paint
tanjin e1khandu.wn
-4 days



Labour 1	:	4,351.00
Parts	:	10,458.70
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 9%	:	1,332.87
Grand Total	:	16,142.57

** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**
** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **



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 First Submission	18/12/2024 09:35 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/12/2024 07:20 (SGT)
Exact Location of Accident	Nicoll Hwy, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNF392X

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	VIPUL AGARWAL
NRIC No	S7866397I
Email Address	VIPUL20@YAHOO.COM
Mobile Phone No	(Phone) +65-91510477
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	B.M.W.
Model	430I CONVERTIBLE MSPT PRO
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	Private car
Transmission	Auto
CC	1998
Vehicle Fuel	Petrol
First Registration Date	27/09/2021
Chassis no	WBA22AT0X0CH76137
Effective Date/Time of Ownership	20/02/2023 02:02 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/01453477

DRIVER



Name of Driver	VIPUL AGARWAL
NRIC No	S7866397I
Date Of Birth	04/03/1978
Occupation	Indoor
Driving Pass Date	13/10/2010
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	14 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91510477
Alt. Phone Number	-
Email Address	VIPUL20@YAHOO.COM
Address	BLK 329 RIVER VALLEY ROAD 23-03 SINGAPORE 238361
Address complement	-
Postcode	-
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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD TEL 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	SNR3127M
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NASRULLAH BIN ABU ZAREN
NRIC No	S9516017D
Contact Number	(Phone) +65-96527281
Address	-
Address complement	-
Postcode	-
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
- 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/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

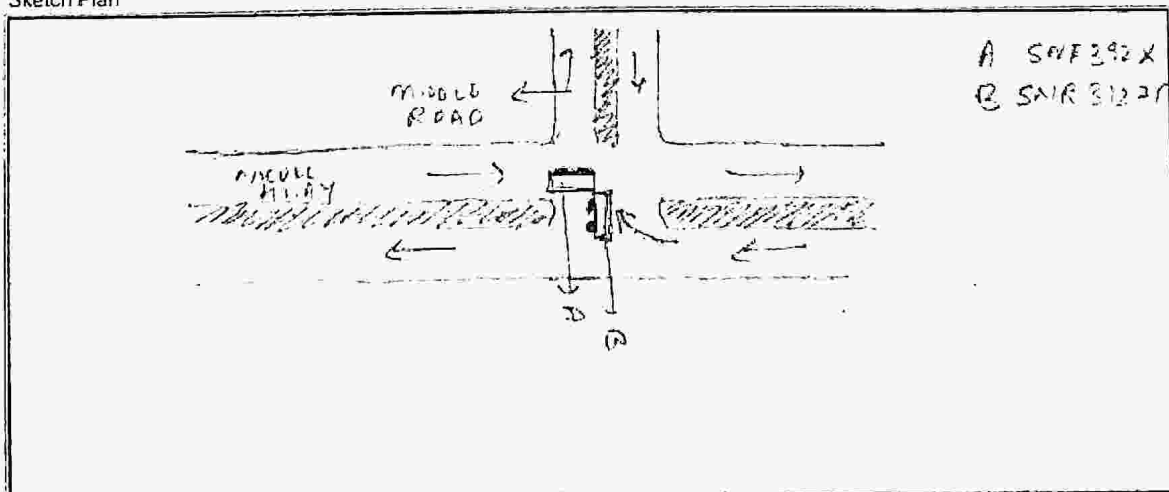
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

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)

Sketch Plan



Describe Circumstance of the Accident

I am driving down Nicoll Highway on 18 Dec 2024 at 7.20 AM

At the intersection of Nicoll & Middle Road I have a Green Signal to go straight

As I cross the intersection Car no. ~~SR~~ SNR3127M turns in Right from other side of Nicoll turning into Middle Road. It was a Red light for him so he broke the traffic signal

I braked but still we had a collision as he did not brake in time

It was completely the fault of other driver and he accepted his full mistake on video as well.

Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details

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)