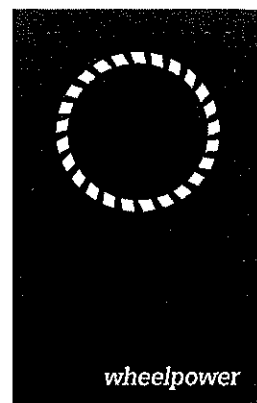


MBM WHEELPOWER PTE LTD

Your Ref: SJK6861R

Our Ref: SKB6582G



To: AXA

CC

Email

Fax

Date: 16/4/2018

From: Joseph

Fax: 62509015

Contact: 86865188

Make / Model: BMW 520i

Chassis No.: WBANT12030CX30478

Engine No.: B350I526N46B20BE

Year of Make: 2009

Accident Date: 11/4/2018

ESTIMATE FOR VEHICLE NO. : SKB6582G

DESCRIPTION	QTY	List Price
REAR RH DOOR	1	\$ 1,800.00
RER RH DOOR LOCK	1	\$ 755.00
REAR RH DOOR STRIKER	1	\$ 125.00
REAR RH DOOR WEATHERSTRIP	1	\$ 180.00
REAR RH DOOR HANDLE OUTER	1	\$ 485.00
REAR RH DOOR INNER TRIM	1	\$ 2,750.00
REAR RH DOOR POWER WINDOW MOTOR	1	\$ 345.00
REAR RH DOOR REGULATOR	1	\$ 315.00
RER RH DOOR HINGE UPPER	1	\$ 65.00
REAR RH DOOR HINGE LOWER	1	\$ 65.00
REAR RH DOOR CHECKER	1	\$ 90.00
REAR RH WINDOW LOWER MOULDING CHROME	1	\$ 235.00
REAR RH WINDOW UPPER MOULDING CHROME	1	\$ 175.00
REAR RH WINDOW GLASS	1	\$ 605.00
REAR RH WINDOW TRIM	1	\$ 175.00
REAR RH WINDOW SEAL	1	\$ 100.00
REAR RH QUARTER GLASS	1	\$ 295.00
REAR RH QUARTER GLASS MOULDING	1	\$ 50.00
REAR WINDSCREEN	1	\$ 1,980.00
REAR WINDSCREEN MOULDING	1	\$ 330.00
REAR RH FENDER	1	\$ 1,840.00
REAR RH FENDER INNERSHIELD	1	\$ 165.00
REAR RH WHEEL HOUSE	1	\$ 680.00

FUEL TANK	1	\$	1,850.00
FUEL TANK CAP	1	\$	45.00
FUEL TANK TUBE	1	\$	210.00
FUEL TANK COVER	1	\$	50.00
TAIL LAMP RH	1	\$	530.00
BOOTLID	1	\$	1,695.00
BOOTLID LOGO	1	\$	180.00
REAR "520I" EMBLEM	1	\$	125.00
RIM	2	\$	1,125.00
REAR CROSSMEMBER	1	\$	2,240.00
REAR RH SHOCK ABSORBER	1	\$	545.00
REAR RH KNUCKLE ARM	1	\$	1,365.00
REAR RH WHEEL HUB	1	\$	185.00
REAR RH WHEEL BEARING	1	\$	195.00
REAR RH UPPER ARM	1	\$	515.00
REAR RH LOWER ARM	1	\$	1,015.00
REAR STABILIZER BAR	1	\$	405.00
REAR RH STABILIZER BAR LINK	1	\$	100.00
REAR RH TIE ROD END	1	\$	180.00
REAR RH DRIVE SHAFT	1	\$	1,420.00
REAR LH SHOCK ABSORBER	1	\$	545.00
REAR LH KNUCKLE ARM	1	\$	1,365.00
REAR LH WHEEL HUB	1	\$	185.00
REAR LH WHEEL BEARING	1	\$	195.00
REAR LH UPPER ARM	1	\$	515.00
REAR LH LOWER ARM	1	\$	1,015.00
REAR LH STABILIZER BAR LINK	1	\$	100.00
REAR LH TIE ROD END	1	\$	180.00
REAR LH DRIVE SHAFT	1	\$	1,420.00

TOTAL:	\$	33,100.00
LESS 10%:	\$	(3,310.00)
PARTS TOTAL:	\$	29,790.00

SPECIALL NETT

TYRE	1	\$	480.00
ANTIRUST COATING		\$	120.00

LABOUR

TOWING (KING DOLLY)		\$	150.00
TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS. TO HEAT, WELD & CUT-OUT THE REAR RH FENDER, REAR RH WHEEL HOUSE. INCLUDING TO STRAIGHTEN, KNOCK-OUT OF THE REAR BUMPER, RH ROCKER PANEL GARNISH, ETC		\$	1,200.00
TO REMOVE & REPLACE WINDOW QUARTER GLASS		\$	100.00
TO REMOVE & REPLACE REAR WINDSCREEN		\$	160.00
TO REMOVE, REFIT & UPHOLSTERY TO FACILITATE REPAIRS		\$	160.00
TO REMOVE AND REPLACE FUEL TANK FIXTURE AND TO UPHOLSTERY TO FACILITATE REPAIRS		\$	150.00
TO REMOVE & REFIT INNER LININGS & GARNISHES TO FACILITATE REPAIR		\$	120.00
TO REMOVE, RENEW & REFIT OF THE REAR RH UNDERCARRIAGE		\$	350.00
TO REMOVE, RENEW & REFIT OF THE REAR LH UNDERCARRIAGE		\$	350.00
TO CONDUCT CHASSIS ALIGNMENT ON CAR-O-LINER		\$	380.00
TO CHECK ALL WIRING AND RESET TO THE SAME		\$	120.00
TO SPRAY PAINT ON THE AFFECTED AREA		\$	1,000.00
Total:	\$		34,630.00
7% GST:	\$		2,424.10
Grand Total:	\$		37,054.10

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 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 ability.
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	11/04/2018 15:47
Date Of Accident	11/04/2018 07:30
Exact Location Of Accident	ALONG ANG MO KIO AVE 6 // YIO CHU KANG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB6582G
Insured/Policyholder	
Name Of Registered Owner	LEOM FANG HIN
NRIC No	S7074305A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98626580
Alternative Phone No	OFFICE-96788986

Vehicle Particulars

Manufacturer	BMW
Model	520I AUTO ABS AIRBAG-2.0 (A)
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097661763
Cover Note Number	

Driver

Name of Driver	TOH YEW WAN
NRIC No	S7004831J
Date Of Birth	14/02/1970
Occupation	INDOOR
Date Of Driving Pass	14/09/1993
Driving Experience	24 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96788986
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	19 CACTUS CRESCENT
Postcode	809753
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	5
Was any body injured in the Accident?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

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	SJK6861R
Vehicle Make/Model/Colour	MERCEDES / BLACK
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	MULTIPLE PORTION

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBE485J
Vehicle Make/Model/Colour NISSAN / BLACK
Details Of Properties VEH. C
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage FRONT PORTION
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLN2364X
Vehicle Make/Model/Colour BMW / BLACK
Details Of Properties VEH. D
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage RH PORTION
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SGF1622J
Vehicle Make/Model/Colour HONDA / BLUE
Details Of Properties VEH. E
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage FRONT PORTION
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TOH YEW WAN
Approximate Age 48
Injuries Sustain NECK & BACK PAIN
Injured person in which vehicle? SKB6582G
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address 19 CACTUS CRESCENT
Postcode 809753

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 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 lodgment 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:

11/4/2018
12:30 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature]

Reporting Centre Personnel's Signature

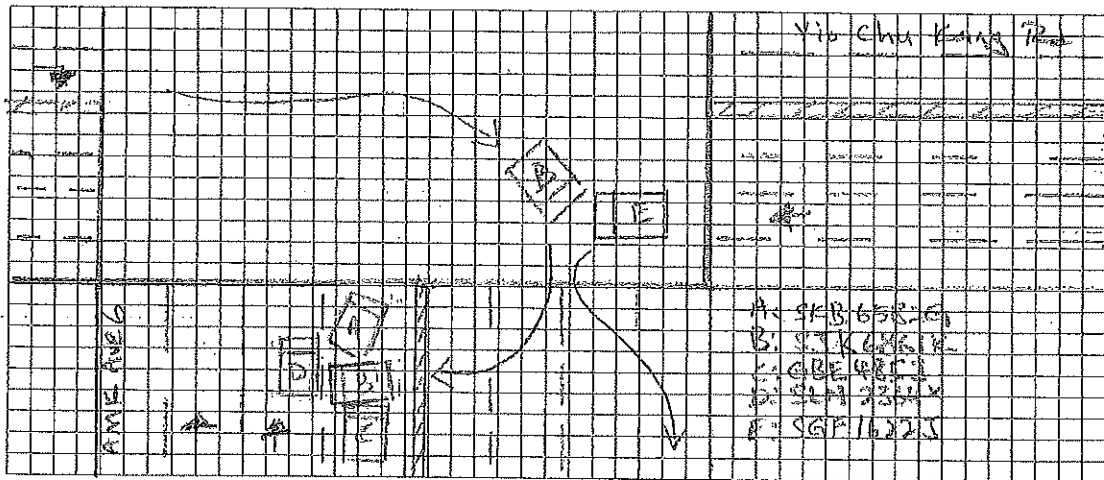
Name:

NRIC/FIN No.:

[Signature]
Joseph Tan
Claims Advisor
8686 5188

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11 Apr 2018 at approximately 7:30 am, I was driving along Ang Mo Kio Ave 6 towards Lentar Avenue, I was stationary stopped at the junction of Ang Mo Kio Ave 6 / Yio Chu Kang Road towards Lentar Avenue.

Suddenly, I felt an impact on my right rear position. I alighted from my vehicle and realised vehicle(s) collided to my vehicle while I was at stationary stopped. Vehicle (B) swerved across the divider from the opposite direction and hit onto 3 vehicles including mine. I will seek medical attention if required. Traffic police and ambulance on scene.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only
Claim OD
<input checked="" type="checkbox"/> Claim TP
Claim OD / TP at other workshop

DECLARATION

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

Policyholder's Signature

Date & Time:

11/4/2018 7:30pm

GIARMC SketchPlanForm V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 11/4/18 10:30pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Joseph Tan
Claims Advisor
8686 5188

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

Owner ID Type: Singapore NRIC

Owner ID: 4305A

Vehicle Details

Vehicle No.: SKB6582G

Vehicle to be Exported: No

Intended De-registration Date: 30 Apr 2018

Vehicle Make: B.M.W.

Vehicle Model: 520I AUTO ABS AIRBAG 2WD XENON HEADLAMP

Primary Colour: White

Manufacturing Year: 2009

Engine No.: B350I526N46B20BE

Chassis No.: WBANT12030CX30478

Maximum Power Output: 115.0 kW (154 bhp)

Open Market Value: \$41,925.00

Original Registration Date: 08 Feb 2010

First Registration Date: 08 Feb 2010

Transfer Count: 2

Actual ARF Paid: \$41,925.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 07 Feb 2020

PARF Rebate Amount: \$23,058.00

Intended COE Rebate Details

COE Expiry Date: 07 Feb 2020

COE Category: B - Car (1601cc & above)

COE Period(Years): 10

QP Paid: \$23,180.00

COE Rebate Amount: \$4,103.00

Total Rebate Amount: \$27,161.00

The information contained herein is correct as at 11 Apr 2018

OK