

(08/11/13) wef

ASS. REC. BY: MEVCS

REF:

CS/P 18022170 Uvd3n2

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SKD 6668Hat Workshop m/s 3m

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: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: 2 Consistent? : Yes or NoEst. Repairs: 4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SKD 6668H Yr Regn: 11, 17Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or TAMake: BMW X4 XDRIVE c.c. 1997Colour: white A/C: Insured / Std / NI / NASp. Reading: 32938 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: WBAFW120600V44998Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 245/50 R18

R: \_\_\_\_\_

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

TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 29/11/18 D.O.I. 10/12/18

Survey held at \_\_\_\_\_

Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop orMS Rf.  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

13/12/18 LIP  
L/S \$5300 (Red 4281.95, 4570)

RECEIVED 13 DEC 2018

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 13/12 - typistDays Of Repair: 4Resurvey No. of Trip: 1

Add Fee:

☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

S + RS, SI

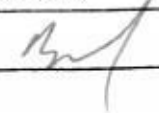
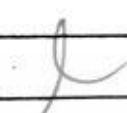
Photos

Others

TOTAL

Report Format: TPLump Sum / I.B.I: (\$ 5300 )

170
50
50
52
80
402

Ref. No :	CS/TP/8022170/Undr	Res. Date:	11/12/18	Date Received:	
Veh. No :	SK17 6668H	SP:		WKSP:	
C/No :					
Action/Instruction:					
1.File	2.Submit Photo?	YES / NO			
3.Indicate Res. Date On Photo Page?	YES / NO		Message:		
If No, due to		a) No authorisation		b) Days of repair	
others:					
Final Re-inspection or Progress Photos					
				Inspected By:	

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

4019A

### Vehicle Details

Vehicle No.:

SKD4668H

Vehicle to be Exported:

No

Intended Deregistration Date:

07 Dec 2018

Vehicle Make:

B.M.W.

Vehicle Model:

X4 XDRIVE20i M SPORT 4WD HID SR NAV

Primary Colour:

White

Manufacturing Year:

2017

Engine No.:

A1421723N20B20A

Chassis No.:

WBAXW120600V44998

Maximum Power Output:

135.0 kW (181 bhp)

Open Market Value:

\$43,698.00

Original Registration Date:

28 Nov 2017

First Registration Date:

28 Nov 2017

Transfer Count:

0

Actual ARF Paid:

\$53,178.00

### Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

27 Nov 2027

PARF Rebate Amount:

\$39,863.00

### Intended COE Rebate Details

COE Expiry Date:

27 Nov 2027

COE Category:

E - Open - all except motorcycle

COE Period(Years):

10

QP Paid:

\$52,000.00

COE Rebate Amount:

\$44,857.00

Total Rebate Amount:

\$84,740.00

The information contained herein is correct as at 07 Dec 2018

OK

MAHMB155158 / Lal Nuri (Meng Kae) Motor Pte Ltd - Sin Ming  
ENTRY DATE & TIME: 30/11/2018 15:03  
SUBMITTED BY: Poh Kwan Choo

## 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 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 if needed.

## ACCIDENT STATEMENT

Date Of Report 30/11/2018 15:03  
Date Of Accident 29/11/2018 16:50  
Exact Location Of Accident JUNCTION OF JLN BESAR TO ROCHOR CANAL ROAD  
Country/State Of Loss SINGAPORE

## DETAILS OF OWN VEHICLE

Vehicle Registration Number SKD6668H  
Insured/Policyholder  
Name Of Registered Owner KUM WEE LEE  
NRIC No S1574019A  
Email Address WEELEE@HEEM.COM.SG  
Mobile Phone No (LOCAL) +65-96668380  
Alternative Phone No OTHERS-96668380  
Vehicle Particulars  
Manufacturer BMW  
Model X4  
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  
If No, Please state action to be taken THIRD PARTY  
Vehicle Category PRIVATE CAR  
Insurance Company  
Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number DMPCSN1836281800  
Cover Note Number  
Driver  
Name of Driver KUM WEE LEE  
NRIC No S1574019A  
Date Of Birth 25/08/1963  
Occupation INDOOR  
Date Of Driving Pass 29/06/1981  
Driving Experience 37 YEARS AND 5 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-96668380  
Fax Number  
Contact Number OTHERS-96668380  
Email Address WEELEE@HEEM.COM.SG

Address	BLK 22 TELOK BLANGAH CRESCENT
	#07-63
Postcode	090022
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	COLLISION - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

**Other Information**

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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?	NO
If Yes, Please state which Police Station	
Was notice of Intended Prosecution given?	NO
If Yes, against whom?	

**Circumstances of Accident**

PLEASE 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	GV1186S
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MRUGESAN GOVINDARAJAM
NRIC/Passport Number	F7745314T
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan Pg. 1

SKETCH PLANIMPORTANT 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 revoke 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 &amp; Time:

30 NOV 2018

15:03 hrs

Driver's Signature

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

Name:

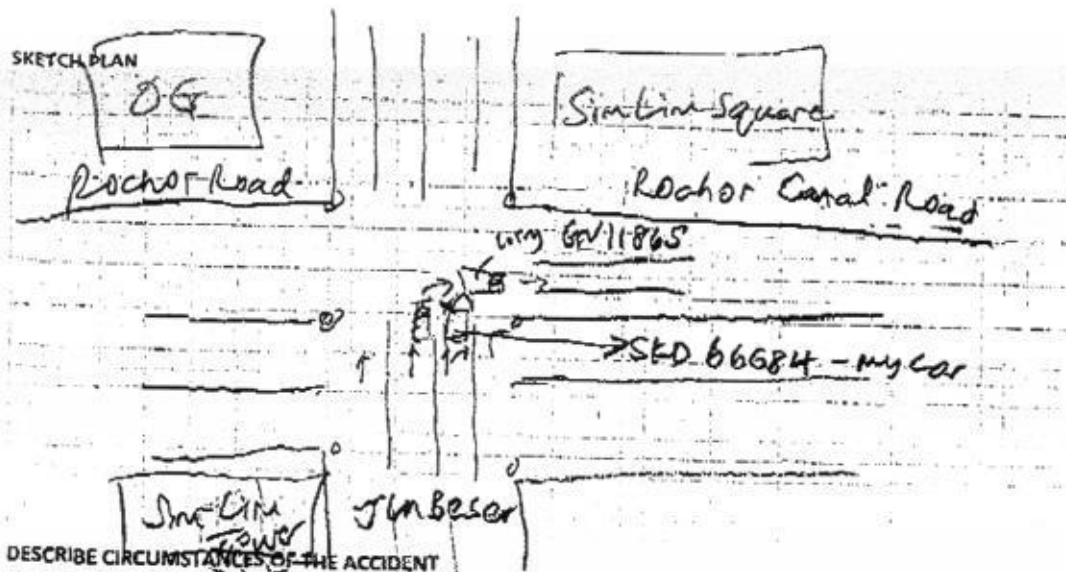
Poh Kwee Choo

NRIC/FIN No.:

S6840583A



## Sketch Plan Pg. 2



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The incident happened on 29/11/2018 at 4.50pm  
 I was stopping at the Traffic light on red light and  
 waiting for Green light. I able to turn my car and the lorry  
 cut into my lane and hit onto my car on left side front  
 The impact of my car front side dented and damaged.  
 The lorry GV11865 back right side scratched and  
 even my car paint was <sup>scraped</sup> on the back right side bumper.

## DECLARATION

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

Policyholder's Signature  
 Date & Time:

30 NOV 2018

1. POLICYHOLDER'S SIGNATURE

Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.: Poh Kwee Choo  
 56840583A



# BLUWEL AUTOMOTIVE SERVICE PTE LTD

Workshop: 1 Kaki Bukit Ave 6 (Unit B) #01-28  
 (Unit C) #01-28-53/55 Singapore 417883  
 Hp: 9755 2088 Tel: 6745 2088 Fax: 6841 2988  
 Website: www.bluwel.com.sg Email: bluwei2088@yahoo.com.sg  
 Co. Reg. No.: 200704951N  
 GST Reg. No.: 200704951N

not Allowed  
 2/s #300  
 Hdy.

SKD666FH

	Front bumper	Deep cut	1571.40	✓
	Front bumper side holder n/s	Bent	115.30	✓
1 set	Front bumper clips	neu	60.00	✓
	Front bumper reinforcement	nn	711.20	X
	Front headlamp n/s	neu	2437.65	✓
	Front fender n/s	nn/bent	804.50	✓
	Front fender outer protector n/s	Torn	179.75	✓
	Front fender emblem n/s	neu	65.00	✓
	Front fender inner shield n/s	neu/torn	241.15	✓
1 set	Front fender inner shield clips n/s	neu	50.00	✓
	Front fender inner side bracket n/s	Bent	121.00	✓
	Front PDC sensor n/s	nn	265.00	X
	Front sport rim n/s	SVC	1200.00	X
			7821.95	5645.75

To check wiring	50.00	-20
To spray rust proofing	50.00	-50
To dismantle & re-fix PDC sensor	80.00	-50
To conduct wheel alignment	nn 100.00	-X
labour for panel beating & replacing parts	680.00	-550
To putty & spray painting	800.00	-600
	<b>TOTAL</b>	<b>9581.95</b>

I/We, undersigned, hereby notify the Repairer that I/We agree to: • To allow the Repairer to carry out the work. • To obtain the Repairer's estimate of the cost of the work. • To pay the Repairer the amount of the estimate. • To indemnify the Repairer against all claims for damages or losses. • No illegal modifications to be made. • Supplementary item(s) must be approved and is subject to final approval from insurance Company.	
Acknowledged by Repairer	
Signature:	
Date:	

6633-46





# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

BLUWEL AUTOMOTIVE SERVICE PTE LTD

Ref : CS/TP18022170/Uvd3n2

BLK 1 KAKI BUKIT AVE 6  
#01-28/51/53/55(MAIN OFFICE)SINGAPORE  
417883

Date : 17-12-2018



ON BEHALF OF KUM WEE LEE

Code : TP149

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	SKD 6668H
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	10/12/2018

## 2. Vehicle Particulars & Condition

Make & Model	BMW X4 XDRIVE (A)	c.c	1997
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	WBAXW120600V44998	Colour	WHITE
Odometer	32938	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	245/50 R18	DUNLOP	6 mm
L/H Front Tyre	245/50 R18	DUNLOP	6 mm
R/H Rear Tyre	245/50 R18	DUNLOP	6 mm
L/H Rear Tyre	245/50 R18	DUNLOP	6 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.
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## 5. General Information

Accident Date	29/11/2018	Inspection Date	10/12/2018
Survey held at	BLUWEL AUTOMOTIVE SERVICE PTE LTD BLK 1 KAKI BUKIT AVE 6 #01-28/51/53/55(MAIN OFFICE) SINGAPORE 417883		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKD 6668H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	FRONT BUMPER	DEEP CUT	1,571.40	1,571.40
1	FRONT BUMPER SIDE HOLDER N/S	BENT	115.30	115.30
1	SET FRONT BUMPER CLIPS	NECESSARY	60.00	60.00
1	FRONT BUMPER REINFORCEMENT	NOT NECESSARY	711.20	-
1	FRONT HEADLAMP N/S	CRACKED	2,437.65	2,437.65
1	FRONT FENDER N/S	DENTED / BENT	804.50	804.50
1	FRONT FENDER OUTER PROTECTOR N/S	TORN	179.75	179.75
1	FRONT FENDER EMBLEM N/S	NECESSARY	65.00	65.00
1	FRONT FENDER INNER SHIELD N/S	DEFORMED / TORN	241.15	241.15
1	SET FRONT FENDER INNER SHIELD CLIPS N/S	NECESSARY	50.00	50.00
1	FRONT FENDER INNER SIDE BRACKET N/S	BENT	121.00	121.00
1	FRONT PDC SENSOR N/S	NOT NECESSARY	265.00	-
1	FRONT SPORT RIM N/S	SERVICEABLE	1,200.00	-
	LESS 5% DISCOUNT		-	-282.29
			<b>7,821.95</b>	<b>5,363.46</b>
	<b><u>LABOUR</u></b>			
	TO CHECK WIRING.		50.00	20.00
	TO SPRAY RUST PROOFING.		50.00	50.00
	TO DISMANTLE & REFIX PDC SENSOR.		80.00	50.00
	TO CONDUCT WHEEL ALIGNMENT.	NOT NECESSARY	100.00	-
	LABOUR FOR PANEL BEATING & REPLACING PARTS.		680.00	550.00
	TO PUTTY & SPRAY PAINTING.		800.00	600.00
			<b>1,760.00</b>	<b>1,270.00</b>
	<b>GRAND TOTAL</b>		<b>9,581.95</b>	<b>6,633.46</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>5,300.00</b>

Report Ref No. CS/TP18022170/Uvd3n2

CHUA KANG SENG

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.