Truck / Trailer or A Colour S/A/C Insured / Std / Sp. Reading 109 659 T/Radio: Insured / Std / Sp. Reading 109 659 T/Radio: Insured / Std / Sp. Reading 109 659 T/Radio: Insured / Std / S	
ASSIGNMENT  Veh No: SAA 6288A Yr Regn: 3  Type M.C. HM.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /  Truck / Trailer or (A)  at Workshop m/s  of  Insured: SAM 7209 J  Policy No. 39088463  Claims No. 594685  ASSIGNMENT  Veh No: SAA 6288A Yr Regn: 3  Type M.C. Hm.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /  Truck / Trailer or (A)  Make: // Mw // S20 / Colour // Colour // A/C: Insured / Std //  Eng/No:  Criva: Wilk A SA // A 320.50 D f 2  Gen. Cong Good / Fair / Poor / Burnt or	
From:  Estimated Cost:  OD / TP / NS / TP RES / OD RES / EVA / INV / MV  To Inspect Vehicle No:  SLA 6284  Make:  SM W S20 / Co  A/C: Insured / Std / Sp. Reading 109 (%) Treads: Insured /	
Estimated Cost:  OD / TP / WS / TP RES / OD RES / EVA / INV / MV  To Inspect Vehicle No:  SLA 62864  at Workshop m/s of Insured:  Policy No.  J9088463  Claims No.  Type: M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /  Truck / Trailer or (A)  Make:  SM W S20 / Co  A/C: Insured / Std / Insured / Std	16
Truck/Trailer or A  Truck/Trailer or A  Make	10
To Inspect Vehicle No: SLA 6.2864 Make: ISM w \$20 i cc  at Workshop m/s  of Sp.Reading 109 45-9 T/Radio: Insured / Std / Sp.Reading 109 45-9 T/Radio: Insured / Sp	
Colour   S/gell   A/C: Insured / Std / Sp. Reading   109 (5-9)   T/Radia: Insured / Sp. Reading	1997
Sp.Reading 109 45-9 T/Radia: Insured / Std / Sp.Reading 109 45-9 T/Radia: Insured / Std / Eng/No: Policy No. 39088463 Claims No. 594685  Gen. Conv. Good / Fair / Poor / Burnt Stagens   Marked / Burnt of	
Eng/No: 54M 7209 J Eng/No: 0/No: W3AS-A 32050 D f2 (Seins No. 594685 Gen. Conv. Good / Fair / Poor / Burnt of	
C/No: W3AS-A32050Df2.  Claims No. 594685  Cons. Cons. Good / Fair / Poor / Burnt or	NI/ NA
Standard Jammed II oaked (Rurnt of	02 2
Standard Jammed II oaked (Rurnt of	1254
Sum Insured: Excess: Steering: Londer / Jammed / Leaked / Burnt or	
(Client's Record) Brake: Trorder I Jammed I Leaked I Burnt or	
Make of Veh: Modi: Nil S/Rim or	
Tyre Size: F:	
(Policy Condition) R: 275/5581	7
Remark: The veh had commenced its N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / M/C / OHTSU (PTR) SUM	m /
repair at the time of inspection. TOYO / YOKO or	
Bail, or Market Value / 120 U - Front 6 Rear 6	3
IDAC Accident Rport: Consistent?: Yes or No R/Bal, mm R/Bal.	mm
GIA / PR Seem: Consistent?: Yes or No L/Bal. 6 mm L/Bal. 6	nym.
Est. Repairs: 4 days Res.: Yes or No D.O.A. 25/5/19 D.O.I. 27/5	118
Lum Sum: 20 % 3 Val.: Yes or No Survey held at	
CA / REV / REP. / 24 HRS LTN 66334 Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop of	×
Vehicle: IN / OUT Rep	====
Date: Person Contacted: The U/C / Chassis frame / Body Structure effected due to  Date / Time Action / Instruction	o collision.
28/5/19 Email GIA to MSIG 30/5/19 4/5 # 3250 Confirmed with Alm. (Red 18,928.25, 85/4)	mark
3/6/19 Send preli revised via merimen	1
RECEIVED 0 3-JUN 2019	V3/6/20
NEW CONTRACTOR OF THE PARTY OF	1 1
Data/Time, File Pass to? Days Of Repair: 4	
t) : Final Report Resurvey No. of Trip: Survey Fee: Transportation:	2005
2 3/6- typist Add Fee: : Site Insp (\$ ) _S+RS_S	
: Interview (\$ ) Phinton	11
Report Format : Merimen : Tech. Invs (\$ ) Ottes	
Lump,Sum / I.B.I: (\$ 3>50 > ) :Weekend (\$ )	
4 TOTAL	911

#### LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

MSIG Insurance (Singapore) Pte. Ltd. To:

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

Koh Ming Shao

Date:

03 Jun 2019

# **Preliminary Advice**

Insured Vehicle No : SLM7209J

TP Vehicle No : SLA6288A Make

Accident Date

: 24/05/2019

: BMW 5201 : 27/05/2019

Assignment Date Est, Duration of Repair : 28/05/2019

Date of Inspection

: 4.00

(LUMP SUM)

Inspection At

: FASTECH AUTO PTE LTD (HQ)

1 KAKI BUKIT AVE 6, #01-46/48/50 AUTOBAY

SINGAPORE 417883

#### Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	22,178.25
Revised Amount	:5\$	3,250.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,250.00

:S\$ Lump Sum Repair

#### Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:5\$

#### Remarks

The vehicle is economical/not economical for repair.

( X )

The above survey was conducted on a 'without prejudice' basis.

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

Case 1	otrified	Est Submitted	Adj Assigned	Adj lipt	Adj Sub	milited	Ins Authred	Status	
	7 May 2019		28 May 2019 12:19 Edit Adj Rpt					Report Cancel	
M	am	Re	ference		Claim Details		Documer	its	Show All
CLAIM SUB	FOLDER DE	TAILS				[Create	ed by insurer]		
Insured:	GRAB REN	TALS PTE LTD,	Co. Reg. No.: 2	016172000	3		173		
Main Claimant:	THOMAS,	ID: S1819551H							
Vehicle Reg. No.:	SLA6288	ВА			Date of Loss:		019 17:00 - :59 hths From LTA Reg	Date (Man	Yr}]
Claim Type:	TP / 594	685			Policy/Cover Note No.:		63 (Comprehensiv e: 02/07/2018 - 0		
Vehicle Reg. No. (Insured):	SLM72093	Е			Policy No. (Claimant):				
Repairer:	Eastach A	uto Pto Ltd (HO	t Kabi Bubit Au	w 6. #01-4	Excess: 6/48/50 Autobay	417883	Kaki Bukit - Tel; 6	7465405	
Handling Insurer:							by Koh Ming Sh		2546]
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-356	[Handled by	VERON C	HEN] [Imm.	Advice d	ue 29/05/2019]
Driver/Custo dian (Insured):	1	ENDRA SHETTI (3							
Adj Asg. Remarks:	direct surv	ey done on 27/05,	/2019.						
ASSOCIATI	D MAIL RE	CEIVED						View All	Compose Case Mail
There are no	mail for this	case.							
ALL ASSO	LIATED TAS	KS <sup>E</sup>				View A	All Search Tasks	Create f	lew Task   Complete
Due Date No results.	Priority	Type Task	Group Sub	jest He	ndler Assig	ned By	Completed O	n Cre	rated On Done

#### Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Tuesday, 28 May 2019 9:03 AM

To:

motorsurvey@sg.msig-asia.com KKLau; Accounts (LKKAuto); SUR

Subject:

DIRECT SURVEY INSPECTION ON WORKSHOP - FASTECH AUTO PTE LTD, DOA:

25/5/2019, SLA 6288A (TP VEHICLE), SLM 7209J (OI VEHICLE)

Attachments:

GIA.pdf, POLICE REPORT.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SLA 6288A at M/s: FASTECH AUTO PTE LTD, 1 KAKI BUKIT AVENUE 6#01-46/48/50 AUTOBAY SINGAPORE 417883 on 27/5/2019.

Enclosed herewith a copy of TP's GIA report, police report and estimated cost of repair will forward to you shortly.

Meanwhile, kindly provide us the claim reference number for our necessary action.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



All prices and other information displayed on sigCarMart.com are gathered from sources and based on algorithms that are believed by apCarMart.com to be reliable, but no assurance can be given that this information is accurate, complete or current, apCarMart.com does not assume any responsibility for errors or orientation or warrant the accuracy of this information.

Compare

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: /ehicle Details	9551H
/ehicle No.:	SLA6288A
/ehicle to be Exported:	No
ntended Deregistration Date:	27 May 2019
/ehicle Make:	B.M.W.
/ehicle Model:	520I AT 2WD 4DR HID NAV
Primary Colour:	Brown
Manufacturing Year:	2015
Engine No.:	B0151323N20B20B
Chassis No.:	WBA5A32050D829234
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$37,993.00
Original Registration Date:	24 Mar 2016
First Registration Date:	24 Mar 2016
Fransfer Count:	0
Actual ARF Paid: ntended PARF Rebate Details	\$45,191.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Mar 2026
ARF Rebate Amount: ntended COE Rebate Details	\$33,893.00
COE Expiry Date:	23 Mar 2026
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$48,002.00
COE Rebate Amount:	\$32,441.00
Total Rebate Amount:	\$66,334.00

The information contained herein is correct as at 27 May 2019

OK

#### 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.
- 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.
- 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.

<ol> <li>By the lodgement of this report to the insurers, you hereby com aforesest.</li> </ol>	sent to the archiving of this report at the centre and to copies of the report being made available
THE RESERVE ASSESSMENT AND ADDRESS.	ACCIDENT STATEMENT
Date Of Report	27/05/2019 11:44
Date Of Accident	25/05/2019 17:00
Exact Location Of Accident	NEWTON FLYOVER TWDS ROCHOR
Country/State of Loss	SINGAPORE
THE RESERVE AND ADDRESS OF THE PARTY OF THE	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLA6288A
Insured/Policyholder	
Name Of Registered Owner	THOMAS
NRIC No	S1819551H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91469860
Alternative Phone No	OFFICE-91469860
Vehicle Particulars	
Manufacturer	BMW
Model	(a)
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

Insura	Ph	A AND DESCRIPTION OF THE PARTY

Name of Insurance Company FWD SINGAPORE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number PNPV2019-00005585

Cover Note Number -

Driver

Name of Driver LEH CHWEE PING

 NRIC No
 \$1819551H

 Date Of Birth
 27/08/1967

 Occupation
 INDOOR

 Date Of Driving Pass
 06/07/1987

Driving Experience 31 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91469860

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 30 MARINE CRES #15-167

Postcode

440030

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 - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

YES

Was any body injured in the Accident? 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

MARINE PARADE NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4428999 - FAX NO: 62447678

Was notice of intended Prosecution given?

NO

If Yes against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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

SLM7209J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 17

# DETAILS OF INJURED PERSON 1 LEH CHWEE PING

Approximate Age

Name

Injuries Sustain BODY

Injured person in which vehicle? SLA6288A

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance?

ambulance? Address

Address Postcode

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 2. Please report sampsily the datable of the accident to spreed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as pratiful and accurate as possible. Any willul managementation or withholding of material facts may allow incurance 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.
- 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.
- 3 By the lodgment of this report to the insurers, you hereby consent to the enchang of this report at the centre and its capies of the report being mucle available aforesaid.
- 5. Consent under the Personal Data Protection Act (POPA)

understand, scinowinge, 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 maured vehicle(s) involved in this accident (all insurer(s) who have maured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' tempera/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (nucle as the police), for the purpose(s) of
  - processing, harding and/or dealing with my claims including the satisfement of the claims and any increasery 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;
  - first administering my claims (including the mailing of correspondence, statements, involces, reports or notices to the, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as in the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my dailms (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this account and the insurers' lawyers/law ficus, may/are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes, and
- my Personal Information may/ten 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.
- (id) 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.
- (ii) the information so collected under (d) above may be shared / disclosed:
  - (ii) to all insurers antifor any other third parties that assist is evaluating, investigating, controlling or managing fraud, inquisitors, law enforcement and government agencies as reasonably required for the purposes stated, or
  - [10] for complying with requirements under any regulations, laws or court orders.

Policyholden's Signature Date & Time:

Oriver's Signature (If driver is not the pulcoholder) Date & Time: Reporting Centre Personnel's Signature Name NRICIPIN No.

NRCP)

Date of Accident	: 25/5/19 Accident Time: 5 pm (24-HR-Format)
Accident Place	: Alony Dunearn Road
Vehicle, No. (Car Plate No.)	: SLA 6388 A Make/Model: B MW
Insurace Company	: FWD Policy No: PNPV2019 -000055
Owner or Company Name /IC No.	: Leh Churce Piny / 51819551H
Owner or Company Contact No.	:Owner's Hp 91469860 Company Tel
DRIVER'S Name / IC No.	: as where
DRIVER'S Date Of Birth	: 37/8/1967 DRIVER'S License Pass Date 6/7/1987
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK 30 Marine Cresent #15-167
DRIVER'S Contact No./ Alt No.	:1)2)
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	river): 1 Drive
Was there any video Captured by ca Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	s being used at the time of accident: Private use \ Work purpose
Other I	Party Driver's Particular (if any)
Vehicle. No: SLM 7207	Vehicle, No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

<sup>\*</sup> NEW - Passenger's name & gender:

#### SKETCH PLAN

#### 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 Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:

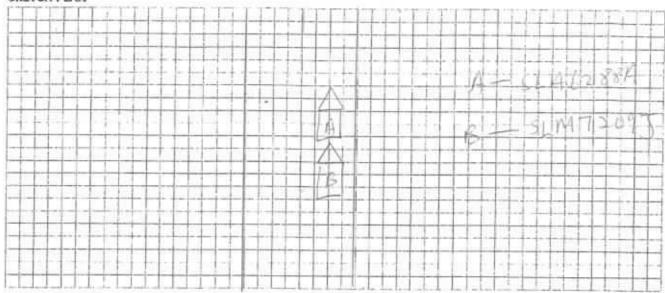
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
  - 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:
  - 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.

4

Policyholder's Signature Date & Time: K

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

# SKETCH PLAN



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

67/	the	Stated	dete	and	time.	3	WW	div	lm	201
vehic	ls A	dog	Dunear	2 Road	l. Sudo	losly	veh	Le	В	hit
m	m	ner pa	rtion.							
									_	
	TA .									

#### DECLARATION

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

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

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:





Report No. T/20190526/2057

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/05/2019 15:22			Vide Report No.:	Station Diary No.: 57		
Informa	nt's Partic	ulars				
	f Informant: IWEE PING		Address: APT BLK 30 MARINE CRESO 440030	CENT #15-167 SINGAPORE		
	/ ID No.: O / S18195	51H	Contact No.: Home/Office:	Mobile: 91469860		
	Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 51	Date of Birth: 27/08/1967	n: Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Self-employed			Driving Licence Information: Class: 3	Date of Expiry:		

General Infor	mation of the Acci	dent			District College
Type of Accident:	/ The core		Drink		Type of Location: Flyover
Location: Along Road 1 NEWTON RO Newton Flyor					
Weather: Clear		Road Dry	Surface:		Road Speed Limit: 70 Km/h
Traffic Flow: One Way		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Control:		Traffic Volume: Heavy
Type of Collis Between Mov	ion: ing Vehicles - Head	To Rear			Anyone conveyed by ambulance:

Details of V	ehicle Invo	lved	Marin San San San San San San San San San Sa	Wines of		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLA6288A	Car	BMVV	520I AT 2WD 4DR HID NAV	Brown	Slightly Damaged	0
SLM7209J	Car				Slightly Damaged	0

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			





Report No. T/20190526/2057

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

#### CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLA6288A	FWD Singapore Pte. Ltd	PNPV2019- 00005585	23/03/2019	22/03/2020

Details of Perso	n Involved	Park and		1116	10.00	
Any Pedestrian Ir	rvolved: No					
No. of Pedestrian		Use of Pedestrian Crossing: NA				
Driver		ELEVILLE				
Name	LEH CHWEE PING			ID No	es .	S1819551H
Related Vehicle	SLA6288A (Car)			Conta	ct No.	91469860
Hospital/Clinic	ospital/Clinic MOUNT ALVERNIA HOSPITAL			Class of Class: 3 Driving Date of Exp Licence & Expiry Date		Class; 3 Date of Expiry: NIL
Date Treatment	26/05/2019		Date Discha	arge	26/05	5/2019
No. of Days granted Medical Leave 07		07	Degree of I	egree of Injury NIL		
Driver						
Name	Kara			ID No	12	NIL
Related Vehicle	SLM7209J (Car)			Conta	ct No.	81189101
Hospital/Clinic	NIL			Class Drivin Licen Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disch	arge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of I	njury	NIL	

#### Brief Details.

On 25/05/2019, at about 1700hrs, I was driving along Newton Flyover towards Rochor.

At that point of time, the traffic at the said location was quite heavy. Hence, the traffic was very slow. While I driving, I noticed that the car in front of my stop, and I followed. As my car had come to a complete stop. I felt a knocking impact from the rear of my car. I then see the rear mirror of my car, and saw the driver at the back of my car was apologising to me.

I then went down of my car, and realised that my car was knocked by another car (SLM7209J). There are 2 dents at the rear bumper of my car. While the front bumper of the car behind my car was slightly dented. We then took photos of the said incident and left the scene.

When I went back home, I realised that the back of my neck was in pain, I then took pain killer and went to sleep.





Report No. T/20190526/2057

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

CONTINUATION OF REPORT

Earlier today I went to consult the doctor and was given a 7 days of medical leaves.





Report No. T/20190526/2057

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

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 / Staff Sgt KWOK WEI JIE, DANIEL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 26/05/2019 15:22
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204 SINGAPORE POLICE FORGE	Classification Of Case:
authentication Stamp	

NOT HOW 1 FASTECT AUTO PTE LTD BLK1 KAKI BUKIT AVE 6 #01-46,48,50 AUTOBAY SINGAPORE 417883 VEHICLE NO:SLA 6188A QTY PARTICULAR 11 \$1,866.10 BOOTLID 1 PCS 11 \$85.000 1 PCS BOOTLID REAR LOGO 11 \$57.00 % 1 PCS BOOTLID '520' EMBLEM \$315.00, BOOTLID INNER LOCK 1 PCS \$1,370.00 2 PCS BOOTLID REFLECTORS@\$685.00 \$366.00 BOOTLID WEATHERSTRIP 1 PCS 11 \$365.000 BOOTLID INNER TRIM 1 PCS \$50.00 BOOTLID INNER TRIM CLIPS 1 SET 17 \$1,500.00 X 2 PCS TAILLAMPS @\$750.00 1565-32 00/20 \$1,658.00 REAR BUMPER 1 PCS 1. \$423.65 % REAR BUMPER LOWER SPOILER 1 PCS \$36.00 🗴 REAR BUMPER TOW COVER 1 PCS shill. \$1,252.00 IPC REAR BUMPER PDC SENSORS @\$313.0 266 4 PCS \$386.00 X REAR BUMPER PDC SENSOR WIRE 1 PCS S \$685.00 REAR BUMPER REINFORCEMENT 1 PCS 11 \$280.00 X REAR BUMPER REINFORCEMENT STAY BRACKETS @\$140.00 2 PCS CAL \$185.00-REAR BUMPER LOWER GUIDE 1 PCS 111 \$390.00 🗴 REAR BUMPER SIDE RETAINERS @\$195.00 2 PCS nu \$50.00 REAR BUMPER CLIPS 1 SET 11 \$230.00 X REAR BUMPER REFLECTORS @\$115.00 2 PCS ene \$268.00 REAR BUMPER INNER PAD 1 PCS con REAR BUMPER INNER FRAME GARNISH 2 KG 03 \$335.00 1 PCS \$1,018.50 X REAR END PANEL 1 PCS \$388.00 X 1 PCS REAR END PANEL TOP GARNISH \$1,980.00 0 REAR EXHAUST 1 PCS \$245.00 N REAR EXHAUST HEAT SHIELD 1 PCS \$120.00 X REAR EXHAUST MOUNTING @\$50.00 2 PCS \$1,495.00 0 REAR FLOOR PANEL 1 PCS 11 3194.12 \$485,000 REAR FLOOR PANEL TOP BOARD 1 PCS \$794.000 REAR FENDER INNER TRIMS @\$397.00 2 PCS 5% \$18,658.25 S.NETT 11 \$50.00 0 REAR END PANEL SEALANT 1 PCS 5200.00 Q 1 PCS REAR EXHAUST CHROME \$50.00 % REAR LICENCE PLATE W/HOLDER 1 PCS LABOUR CHARGES: \$80.00 2 0 TO CHECK WIRING \$80.00 (7) TO DISMANTLE & REPLACING REVERSE SENSOR \$80.00 TO TRANSFER BOOTLID MECHANISM \$150.00 TO DISMANTLE & REFIX REAR EXHAUST \$120.00 fo TO DISMANTLE & REFIX SEAT, CUSHION UPHOLSTERY \$100.00 . X TO SPRAY RUST PROOFING \$1,080.00 500 LABOUR FOR PANEL BEATING & REPLACING PARTS \$1,500.00 400 TO PUTTY & SPRAY PAINTING 24. 8F1 14 = 12TOT

> 40f4-60 3167.

#### LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

#### VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CC3/MSG19009338/UVD3N2

Date:

06/06/2019

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

29088463

Claimant Vehicle No:

SLA6288A

Insured Vehicle No:

SLM7209J

Date of Loss:

24/05/2019

Nature of Claim:

TP

Claim No: 594685

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SLA6288A

Make & Model:

BMW 5201, 2.0 D/AB 2WD 4DR GAS/D NAV (A)

Engine No:

B0151323N20B20B

Reg. Date: Colour:

Black

Chassis No: Odometer:

WBA5A32050D829234 109459 km

**Engine Capacity:** 

1997 cc

Market Value/New Car Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

24/03/2016 (Man. Year: 2015)

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

85.35

Handbrake (Serviceable):

CONDITION OF TYRES Front Tyre Size:

225/55R17

Rear Tyre Size:

225/55R17

Front Left Side:

23,730.73

Pirelli 6 mm

Front Right Side:

Pirelli 6 mm Pirelli 6 mm Rear Left Side: Rear Right Side:

Pirelli 6 mm

20,253.23

The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		18,988.25	3,034.60	15,953.65	84.02
Miscellaneous Items		0.00	0.00	0.00	
Labour		3,190.00	1,050.00	2,140.00	67.08
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	22,178.25	4,084.60	18,093.65	81.58
A	approved Total (Overridden) (S\$)		3,250.00		
	(S\$)	22,178.25	3,250.00	18,928.25	85.35
	+ GST 7.00/7.00% (S\$)	1,552.48	227.50	1,324.98	85.35

INSPECTION

Date of Assignment:

28/05/2019

Date Inspected:

27/05/2019 Inspected At:

Nett Amount (S\$)

Fastech Auto Pte Ltd (HQ) 1 Kaki Bukit Ave 6, #01-46/48/50

Autobay

3,477.50

Singapore 417883

Estimated Period of Repair:

4.0 days

Adjuster: VERON CHEN

Manager: MARCUS CHUA

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our

knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

Adjuster Report Page 3 of 4

# REPAIR DETAILS

Referen	ce	
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 06 Jun 2019)
Parts:	143	BMW 520I 2.0 D/AB 2WD 4DR GAS/D NAV (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted	d, no print-code for SLA6288A)
Validity:		ates are valid only if they contain the print code (above) on all estimate pages, running page in the END OF ESTIMATES marker on the last estimate page
Further Info	: Items/values	not in reference catalogue are prefixed with an asterisk *.

# Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BOOTLID	Not Necessary	1,866.10 F	*-FL
2	1		*BOOTLID REAR LOGO	Not Necessary	85.00 F	*-FL
3	1		*BOOTLID 520 EMBLEM	Not Necessary	57.00 F	*-FL
4	1		*BOOTLID INNER LOCK	Not Necessary	315.00 F	*-FL
5	2		*BOOTLID REFLECTORS	Not Necessary	1,370.00 F	*-FL
6	1		*BOOTLID WEATHERSTRIP	Not Necessary	366.00 F	•-FL
7	1		*BOOTLID INNER TRIM	Not Necessary	365.00 F	*-FL
8	1		*SET BOOTLID INNER TRIM CLIPS	Not Necessary	50.00 F	*-FL
9	2		*TAILLAMPS	Not Necessary	1,500.00 F	*-FL
10	1		*REAR BUMPER	Dented/Deformed	1,658.00 F	*1,565.32 FL
11	1		*REAR BUMPER LOWER SPOILER	Not Necessary	423.65 F	*-FL
12	1		*REAR BUMPER TOW COVER	Not Necessary	36.00 F	*-FL
13	1		*REAR BUMPER PDC SENSORS (4 Pcs)	Shorted (1 Pc only)	1,252.00 F	*266.00 FL
14	1		*REAR BUMPER PDC SENSOR WIRE	Not Necessary	386.00 F	*-FL
15	1		*REAR BUMPER REINFORCEMENT	Dented	685.00 F	*685.00 FL
16	2		*REAR BUMPER REINFORCEMENT STAY BRACKETS	Not Necessary	280.00 F	*-FL
17	1		*REAR BUMPER LOWER GUIDE	Cracked	185.00 F	*185.00 FL
18	2		*REAR BUMPER SIDE RETAINERS	Not Necessary	390.00 F	*-FL
19	1		*SET REAR BUMPER CLIPS	Necessary	60.00 F	*60.00 FL
20	2		*REAR BUMPER REFLECTORS	Not Necessary	230.00 F	*-FL
21	1		*REAR BUMPER INNER PAD	Cracked	268.00 F	*188.00 FL
22	1		*REAR BUMPER INNER FRAME GARNISH	Cracked	335.00 F	*245.00 FL
23	1		*REAR END PANEL	Repair	1,018.50 F	*-FL
24	1		*REAR END PANEL TOP GARNISH	Not Necessary	388.00 F	*-FL
25	1		*REAR EXHAUST	Not Necessary	1,980.00 F	*-FL
26	1		*REAR EXHAUST HEAT SHIELD	Not Necessary	245.00 F	*-FL
27	2		*REAR EXHAUST MOUNTING	Not Necessary	120.00 F	*-FL
28	1		*REAR FLOOR PANEL	Not Necessary	1,495.00 F	*-FL
29	1		*REAR FLOOR PANEL TOP BOARD	Not Necessary	485.00 F	*-FL
30	2		*REAR FENDER INNER TRIMS	Not Necessary	794.00 F	*-FL
31	1		*REAR END PANEL SEALANT	Not Necessary	50.00 FS	*-FS
32	1		*REAR EXHAUST CHROME	Not Necessary	200.00 FS	*-FS
33	1 enchise	part. S=S	*REAR LICENCE PLATE W/HOLDER pcNett. L=ListItemDisc.	Not Necessary	50.00 FS	*-FS
Transfer	TO HEAV	NO VISTORS		Sub Total (S\$)	18.988.25	3,194,32

159.72 - List Item Discount on L Items 0.00/5.00% (S\$) 0.00 Total Parts (S\$) 18,988.25 3,034.60

Report was unsubmitted during this print-out.

Adjuster Report Page 4 of 4

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

#### Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	TO CHECK WIRING	New	80.00	20.00
2	TO DISMANTLE & REPLACING REVERSE SENSOR	New	80.00	50.00
3	TO TRANSFER BOOTLID MECHANISM	New	80.00	0.00
4	TO DISMANTLE & REFIX REAR EXHAUST	New	150.00	0.00
5	TO DISMANTLE & REFIX SEAT, CUSHION UPHOLSTERY	New	120.00	80.00
6	TO SPRAY RUST PROOFING	New	100.00	0.00
7	LABOUR FOR PANEL BEATING & REPLACING PARTS	New	1,080.00	500.00
8	TO PUTTY & SPRAY PAINTING	New	1,500.00	400.00
	Gross Labou	ır Cost (S\$)	3,190.00	1,050.00
	Report was unsubmitted duri	no this print out		

< END OF ESTIMATES >