

20000000

ASS. REC. BY:

REP: CS/C7719015 206 / 129 f3n2

Special Instruction:

Surveyor: Taufik

ASSIGNMENT (Office)

From (Person): Chong Boon Sen

of CTI

Date/Time: 28/8/19 @ 3:53pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SML 6746A

Insured:

GBJ 6214A

at Workshop m/s

Mova Automotive

Tel:

6272 3892

of

Blk 1008 Bkt Merah Jene 3 #01-04

Policy No:

PMCVSN 30470819000

Claim No:

SNM19D 203990002

Sum Insured:

Excess:

Make of Veh:

D.O.A. 23/08/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

4:22pm @ 28/8/19

Person Contacted:

Nitha

Vehicle IN/

OUT

Date/Time	Action/Instruction	Estimated	✓
	GBJ 6214A: X		
	SML 6746A: X		

Surabaya Taufik

REF: CT1

ASSIGNMENT

From: _____ Date: **2.9.2019**

Estimated Cost: _____

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

To Inspect Vehicle No: **SML 6746A**

at Workshop in/s: **MOVA Automotive**

of **BLK 1008 Bukit merah Lane 3701-04**

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.

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: **2** days Res.: Yes or No

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

CA / REV / REP. / 24 HRS **mp**

Date: _____ Person Contacted: _____ Vehicle: IN / OUT **B.k**

N/S	O/S

Veh No. **SML 6746A** Yr Regn. **2013, June**

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: **BMW X3** c.c. **1997**

Colour: **Black** A/C: Insured / Std / NI / NA

Sp. Reading: **106845** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **WBA7W X92050L999488**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size: F: **245/50R18**
R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or **Continental**

Front: _____ Rear: _____

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

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

D.O.A. _____ D.O.I. **2/9/190 1710**

Survey held at **MOVA BMW**

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

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

Date / Time	Action / Instruction
	4/5/2000, 2 days (Red to 1266.65, 39%)

Date/Time, File Pass to? : Preli. Report

1) **19/9 transit** : Final Report

Date/Time, File Return to? _____

Days Of Repair: **2**

Resurvey No. of Trip: **1**

Report Format: **WEB-TP**

Lump Sum / I.P.I. (\$) **2000**

Add Fee: Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Survey Fee:	
Transportation:	
S + RS: \$	
Photos	
Others	
TOTAL	220

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Wednesday, 28 August 2019 3:53 PM
To: Nitha
Cc: assignments
Subject: RE: our ref: snm19d203990 / TP CLAIM - SML6746A AGAINST GBJ6214J DOA: 23.8.19 JLN BUKIT MERAH

WITHOUT PREJUDICE

Dear Sir

We will be assigning M/s LKK Auto Consultants Pte Ltd to survey your client's vehicle.

Aside to LKK,

Please proceed to survey the third party vehicle on WP basis.

Thank you.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson
Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Chong Boon Sen

Sent: Tuesday, 27 August, 2019 5:05 PM

To: 'Nitha' <nitha@mova.com.sg>

Subject: our ref: snm19d203990 / TP CLAIM - SML6746A AGAINST GBJ6214J DOA: 23.8.19 JLN BUKIT MERAH

WITHOUT PREJUDICE

Dear Sir,

We intend to conduct a pre-repair survey of the damage to your client's vehicle jointly with your client/your motor workshop. We propose to use one of the following motor surveyors to conduct the joint pre-repair survey as a single joint expert.

ADRIAN LING
Kelvin Ang
SEE CHEW SENG
MOHD FADHILAH BIN OSMAN
XING QUO QIANG
KENNETH KONG
SIMON HO
CHUA WEIJIE

MARCUS CHUA
HENRY NG

Please let us know within two(2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG

Disclaimer: This e-mail and any files transmitted with it is intended only for the named recipients and may contain confidential information. Any unauthorized disclosure, use or dissemination of this message, either in whole or partial, is prohibited. If you are not the intended recipient, please notify the sender immediately. Please delete the e-mail and any copies of it thereafter.

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 aforesaid.

ACCIDENT STATEMENT

Date Of Report	24/08/2019 13:44
Date Of Accident	23/08/2019 19:30
Exact Location Of Accident	JLN BUKIT MERAH BLK 146 CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML6746A
Insured/Policyholder	
Name Of Registered Owner	PHUA LI HOON IRENE (PAN LIFEN)
NRIC No	S7235987I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93689668
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	BMW
Model	X3 XDRIVE28I ABS 4WD SR HID DSC NAV
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	5110896579
Cover Note Number	
Driver	
Name of Driver	PHUA LI HOON IRENE (PAN LIFEN)
NRIC No	S7235987I
Date Of Birth	03/10/1972
Occupation	INDOOR
Date Of Driving Pass	15/12/1998
Driving Experience	20 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93689668
Fax Number	
Contact Number	OFFICE-NOPHONE
EMail Address	NOEMAIL

Address APT BLK 146 JALAN BUKIT MERAH
#13-1072

Postcode

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 COLLIDED INTO PARKED VEHICLE

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle) involved in the accident 2

Was any body injured in the Accident? NO

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) 0

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 THE 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 GBJ6214J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver MOORTHY SEKAR

NRIC/Passport Number F7720325R

Contact Number 91749592

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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: 24 Aug 2019
2pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

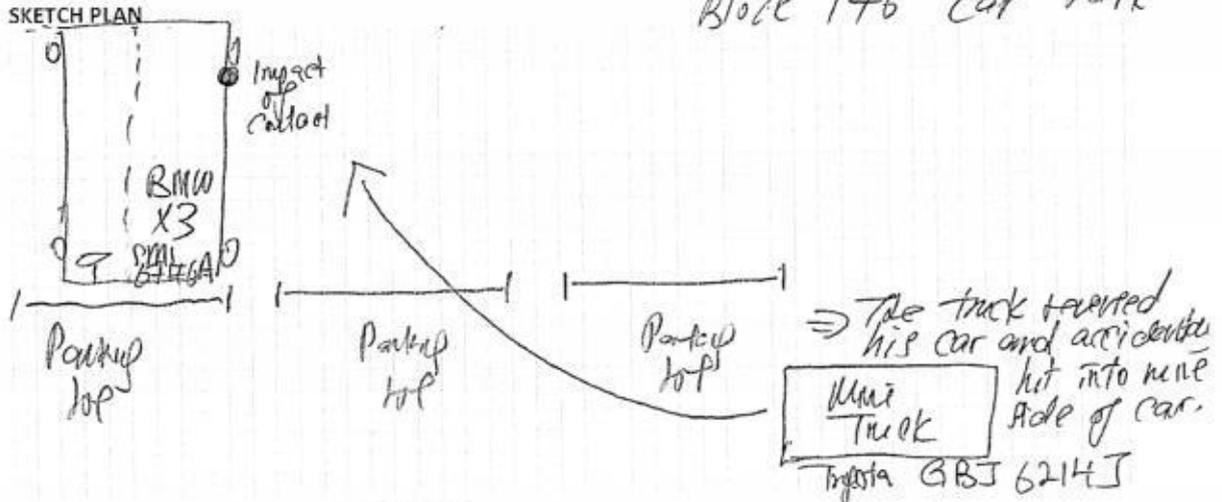


Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Block 146 Car Park



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: SMML 6746A	ACCIDENT DATE & TIME: 23 Aug 2019, Appx 1930 hrs
CONTACT NUMBER: 96819003	E-MAIL ADDRESS: XXXXXXXXXX
LOCATION: It was on the 23rd August 2019, approximately @ 1930 hrs, whereby the incident took place at Jalan Bukit Merah Block 146 car park.	
I was approached by a driver, Moorthy Sakar, who claimed his vehicle Toyota GBJ 6214J, hit the left passenger door of my car.	
He has offered to pay for the damages as the cause of repair	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 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:	
<input type="checkbox"/> Claim Own Policy <input checked="" type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only	

DECLARATION

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

Amirine
 Policyholder's Signature
 Date & Time: 24 Aug 2019
 2pm

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

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

Main Office:
 Mova Building
 No: 22, Jalan Kilang,
 Singapore 159419
 Tel: (65) 6476 3333
 Fax: (65) 6271 5891
 www.mova.com.sg

Workshop Dept:
 Block 1008,
 Bukit Merah Lane 3,
 #01-04/06/08/94
 Singapore 159722

Tel: (65) 6272 3892
 Fax: (65) 6270 8314

Co. Reg. 198904033G
 GST Reg. M2-0088864-2

Estimate

27/08/2019

CHINA TAIPING INSURANCE (S) PTE LTD
 3 Anson Road
 #16-00 Springleaf Tower
 Singapore 079909.

Attention :- XA017

Page # :- 1
 Veh # :- SML6746A
 Veh Model :- BMW X3
 Estimate# :- CK419601
 Claim # :-
 ACC. Date :- 23/08/19
 Terms :- C.O.D Days
 Remarks :-

No.	Description	Qty	U.Price	Amounts S\$
LIST ITEMS :				
1.	REAR DOOR LH	1 PC	1,458.60	1,458.60
2.	REAR DOOR WEATHERSTRIP LH	1 PC	165.50	165.50
3.	REAR DOOR BLACK STICKER (FRONT)	1 PC	95.00	95.00
4.	REAR DOOR BLACK STICKER (CENTRE)	1 PC	106.70	106.70
5.	REAR DOOR BLACK STICKER (BACK)	1 PC	92.70	92.70
6.	REAR DOOR REGULATOR LH	1 PC	309.55	309.55
LIST TOTAL S\$				2,228.05
5% DISCOUNT S\$				-111.40
				1918.50
				1822.58

LABOUR :
 TO REMOVE & REPLACE ACCIDENT DAMAGED PARTS
 STRAIGHTEN & REALIGN AFFECTED AREAS
 TO SPRAY PAINT ON AFFECTED AREAS
 TO REMOVE & REFIT DOOR MECHANISM
 TO RUST PROOF ON THE ACCIDENT AREAS
 LABOUR TOTAL S\$

200 350.00
 250 200 350.00
 60 100.00
 30 50.00
 540 850.00

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:

E. & O.E

NON-TAX AMOUNT S	2,966.65
AMOUNT S\$	2,966.65
GST @ 7 %	207.67
AMOUNT DUE S\$	3,174.32

Customer's Signature/Co. Stamp **MOVA AUTOMOTIVE PTE LTD**

1822.58
 540
 150
 2512.58
 1/5 \$2000 #
 02 days

Tanjong 27495745
 WP
 2/9/19 @ 1200pm
 Lumpsum
 Repair after repair
 02 days
 sum @ 11 months

Main Office:
Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: (65) 6476 3333
Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:
Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722

Tel: (65) 6272 3892
Fax: (65) 6270 8314

Co. Reg. 198904033G
GST Reg. M2-0088864-2

Estimate

27/08/2019

CHINA TAIPING INSURANCE (S) PTE LTD
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909.

Page # :- 1
Veh # :- SML6746A
Veh Model :- BMW X3
Estimate# :- CK419601
Claim # :-
ACC. Date :- 23/08/19
Terms :- C.O.D Days
Remarks :-

Attention :- XA017

No.	Description	Qty	U.Price	Amounts S\$
LIST ITEMS :				
1.	REAR DOOR LH	1	1,458.60	1,458.60
2.	REAR DOOR WEATHERSTRIP LH	1	165.50	165.50
3.	REAR DOOR BLACK STICKER (FRONT)	1	95.00	95.00
4.	REAR DOOR BLACK STICKER (CENTRE)	1	106.70	106.70
5.	REAR DOOR BLACK STICKER (BACK)	1	92.70	92.70
6.	REAR DOOR REGULATOR LH	1	309.55	309.55
LIST TOTAL S\$				2,228.05
5% DISCOUNT S\$				-111.40
				2,116.65
LABOUR :				
TO REMOVE & REPLACE ACCIDENT DAMAGED PARTS STRAIGHTEN & REALIGN AFFECTED AREAS				
TO SPRAY PAINT ON AFFECTED AREAS				
TO REMOVE & REFIT DOOR MECHANISM				
TO RUST PROOF ON THE ACCIDENT AREAS				
LABOUR TOTAL S\$				850.00

Part: \$1918.50
- 5% = \$1822.58
Labour: \$ 540.00
Supp: \$ 800.00

\$ 2662.58
Lumpsum = \$2130.06
- 20%

\$ 2100.00
\$ 2 Repair days

E. & O.E

NON-TAX AMOUNT S
AMOUNT S\$ 2,966.65
GST @ 7% 207.67

AMOUNT DUE S\$ 3,174.32

Customer's Signature/Co. Stamp **MOVA AUTOMOTIVE PTE LTD**

Tanjilun 27495741
WP
2/9/19 @ 120pm
Lumpsum
Repair after repair
02 days



Automotive Pte Ltd

Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: (65) 6476 3333
Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:

Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722

Tel: (65) 6272 3892
Fax: (65) 6270 8314

Co. Reg. 198904033G
GST Reg. M2-0088864-2

SUPPLEMENTARY

CHINA TAIPING INSURANCE (S) PTE LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Page : 1
Veh No : SML6746A
Model : BMW X3
Acc Date : 23-Aug-19
Incharge : BOBO

No	Description	Qty	U.Price	Amt \$
1	LABOUR: TO APPLY COATING ON ACCIDENT DAMAGED PARTS LABOUR TOTAL S\$			\$ 300.00 ^{150.} <u>\$ 300.00</u>

NON-TAX AMOUNTS	\$300.00
GST @ 7%	\$21.00
AMOUNT DUE	<u>\$321.00</u>

Customer's Signature/Co. Stamp

MOVA AUTOMOTIVE PTE LTD



Revol Carz Makeover Pte Ltd
42 Toh Guan Road East #01-75
Enterprise Hub S608583
Tel: 62679331
Website: www.revol.com.sg
Email: enquiry@revol.com.sg

Invoice No:
2019/08/08785

Name:	SAMUEL WONG
Address:	CONFIDENTIAL
Tel:	CONFIDENTIAL
Email:	CONFIDENTIAL

Car Make Model:	BMW X3 XDRIVE28I ABS 4WD SR HID DSC NAV
Car Plate No:	SML6746A

Date: 01 Aug 2019

Description	Amount
ZeTough Titanium Exquisite Program 1 x ZeTough Foundation. 2 x ZeTough Maintenances.	\$1600.00
Total Amount:	\$1600.00

Our In House Services	<ul style="list-style-type: none">• Paint Protection & Grooming• Third Party Insurance Claims• Paintless Dent Removal	<ul style="list-style-type: none">• Car Servicing & Repair• Panel Beating & Respray Works• Vehicle De-registration
------------------------------	---	--

Mode of Payment: UOB Instalment

For cheque payment, please make payable to:
"Revol Carz Makeover Pte Ltd "

Served by Alan Wong (96319558)

Terms and conditions:

- All Revol Carz Makeover Pte Ltd Services are strictly by appointment basis only.
- This program is to be used within 36 month(s) from date and thereafter will be expired.
- Revol Carz Makeover Pte Ltd management reserves the right to amend the terms and conditions without prior notice.

SAMUEL WONG's signature

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: CS/CT119015206/T1QF3N2

Date: 19/09/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN30470819000
Claimant Vehicle No :	SML6746A	Insured Vehicle No :	GBJ6214J
Date of Loss:	23/08/2019	Nature of Claim:	TP
		Claim No:	SNM19D203990C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SML6746A	Engine No:	A7240435N20B20A
Make & Model:	BMW X3, 2.0 (A)	Chassis No:	WBAWX92030L999488
Reg. Date:	28/06/2013 (Man. Year: 2013)	Odometer:	106845 km
Colour:	Black		
Engine Capacity:	1997 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	245/50R18	Rear Tyre Size:	245/50R18
Front Left Side:	Continental 6 mm	Rear Left Side:	Continental 6 mm
Front Right Side:	Continental 6 mm	Rear Right Side:	Continental 6 mm

*The above values represent the remaining tyre treads depth***COST OF CLAIMS**

	Repairer's	Adjuster's	Difference	Diff %	
Parts	2,116.65	1,822.57	294.08	13.89	
Miscellaneous Items	0.00	0.00	0.00		
Labour	1,150.00	690.00	460.00	40.00	
Paintwork Labour	0.00	0.00	0.00		
Towing	0.00	0.00	0.00		
Calculated Gross Total (S\$)	3,266.65	2,512.57	754.08	23.08	
Approved Total (Overridden) (S\$)		2,000.00			
	(S\$)	3,266.65	2,000.00	1,266.65	38.78
+ GST 7.00/7.00% (S\$)	228.67	140.00	88.67	38.78	
Nett Amount (S\$)	3,495.32	2,140.00	1,355.32	38.78	

INSPECTION

Date of Assignment:	19/09/2019	
Date Inspected:	02/09/2019	Inspected At:
		Mova Automotive Pte Ltd (Bukit Merah) Bik 1008, #01-04/06/08/94, Bukit Merah Lane 3 Singapore 159722

Estimated Period of Repair: 2.0 days**Adjuster:** MOHD TAUFIKH BIN HAMID**Manager:** SHIAU CHAN

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.

REPAIR DETAILS

Reference	
Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 19 Sep 2019)
Parts: M1-SUV	BMW X3 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SML6746A)	
Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with 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		*REAR DOOR LH	Dented	1,458.60 FL	*1,458.60 FL	
2	1		*REAR DOOR WEATHERSTRIP LH	Necessary	165.50 FL	*165.50 FL	
3	1		*REAR DOOR BLACK STICKER (FRONT)	Necessary	95.00 FL	*95.00 FL	
4	1		*REAR DOOR BLACK STICKER (CENTRE)	Necessary	106.70 FL	*106.70 FL	
5	1		*REAR DOOR BLACK STICKER (BACK)	Necessary	92.70 FL	*92.70 FL	
6	1		*REAR DOOR REGULATOR LH	Not Necessary	309.55 FL	*- FL	
					Sub Total (\$\$)	2,228.05	1,918.50
					- List Item Discount on L Items 5.00/5.00% (\$\$)	111.40	95.93
					Total Parts (\$\$)	2,116.65	1,822.57

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO REMOVE & REPLACE ACCIDENT DAMAGED PARTS STRAIGHTEN & REALIGN AFFECTED AREAS	New	350.00	200.00
2	TO SPRAY PAINT ON AFFECTED AREAS	New	350.00	250.00
3	TO REMOVE & REFIT DOOR MECHANISM	New	100.00	60.00
4	TO RUST PROOF ON THE ACCIDENT AREAS	New	50.00	30.00
5	TO APPLY COATING ON ACCIDENT DAMAGED PARTS	New	300.00	150.00
Gross Labour Cost (S\$)			1,150.00	690.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >