

ASS. REC. BY: Frame

REF:

CS/CTI 20008748/RIVf3

3862

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: 5JZ 9799Pat Workshop m/s NOVAof 1008, BUKIT MERAH W3 #01-04Insured: CTI

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: 141K

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 5JZ 9799P Yr Regn: 2014 APRType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: B.M.W 640I 4-Door c.c 2979Colour: WHITE

A/C: Insured / Std / NI / NA

Sp. Reading: 20849

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBA6A02030D211966Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 275/35R19

R: _____

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 18/08/2020D.O.I. 24/08/2020Survey held at NOVADes. 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

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 3/9/20-Typist

Rep. Format: MerimenLump Sum / L.S. (\$) LS \$7850Days Of Repair: 5Resurvey No. of Trip: 1

Add Fee:

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

Survey Fee:

Transportation:

S + RS. \$I

Photos

Others

TOTAL

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

21/08/2020

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

Page # :- 1

Veh # :- SJZ9799P

Veh Model :- BMW 640I GRAN COUPE

Estimate# :- CK420916

Claim # :-

ACC. Date :- 18/08/02

Terms :- C.O.D Days

Remarks :-

Attention :- XA017

No.	Description	Qty	U.Price	Amounts S\$
LIST ITEMS :				
1.	REAR BOOT <i>CR</i>	1 PC	2,759.55	2,759.55
2.	REAR BOOT LOGO <i>X</i>	1 PC	151.60	151.60
3.	REAR BOOT EMBLEM "640I" <i>na</i>	1 PC	164.60	164.60
4.	REAR BOOT LAMP LH <i>?</i>	1 PC	417.00	417.00
5.	REAR BOOT RUBBER <i>na</i>	1 PC	166.40	166.40
6.	REAR LAMP LH <i>X</i>	1 PC	707.00	707.00
7.	REAR BUMPER <i>CR</i>	1 PC	2,156.65	2,156.65
8.	REAR BUMPER PDC SENSOR <i>?</i>	1 PC	283.25	283.25
9.	REAR BUMPER NUMBER PLATE LAMP <i>cut</i>	1 PC	72.45	72.45
10.	REAR BUMPER REFLECTOR LH <i>?</i>	1 PC	73.30	73.30
11.	REAR BUMPER ADAPTER <i>?</i>	1 PC	198.50	198.50
12.	REAR BUMPER WIRE <i>X</i>	1 PC	289.45	289.45
13.	REAR BUMPER SPONGE <i>?</i>	1 PC	167.25	167.25
14.	REAR BUMPER REINFORCEMENT <i>?</i>	1 PC	873.65	873.65
15.	REAR BUMPER LOWER BRACKET <i>?</i>	2 PC	74.25	148.50
16.	REAR BUMPER RIVET <i>na</i>	10 PC	5.00	50.00
17.	REAR EXHAUST <i>?</i>	1 PC	1,429.75	1,429.75
18.	REAR EXHAUST TAIL LAMP <i>* pipe (scr -)</i>	1 PC	155.80	155.80
19.	REAR NUMBER PLATE <i>bt</i>	1 PC	60.00	60.00
	REAR PANEL - REPAIR	PC		
LIST TOTAL S\$				10,324.70
5% DISCOUNT S\$				-516.24
				9,808.46

LABOUR :

TO CUT & WELD REAR PANEL TO REPAIR REAR
 FENDER, REAR END PANEL. TO REMOVE & REFIX
 DAMAGED PARTS, STRAIGHTEN & REALIGN AFFECTED
 AREAS

TO SPRAY AFFECTED AREAS

TO REMOVE & REFIX REAR BOOT, REAR LOCK
 MECHANISM, CHECK & TEST FOR FUNCTION

TO REMOVE & REFIX REAR LUGGAGE, COMPARTMENT
 SIDE COVER, SIDE TRIM AND OTHER ATTACHMENT
 PARTS

TO RUST PROOF AFFECTED AREAS

LABOUR TOTAL S\$

500 ~~750.00~~

600 ~~780.00~~

40 ~~60.00~~

60 ~~80.00~~

X 50.00

1,720.00

Estimate

21/08/2020

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

Attention :- XA017

Page # :- 1 138827
Veh # :- SJZ9799P
Veh Model :- BMW 640I GRAN COUPE
Estimate# :- CK420916
Claim # :-
ACC. Date :- 18/08/02
Terms :- C.O.D Days
Remarks :-

Main Office:
Mova Building
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Tel: (65) 6272 3892
Fax: (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088864-2

No.	Description	Qty	U.Price	Amounts S\$
-----	-------------	-----	---------	-------------

E. & O.E

NON-TAX AMOUNT S	
AMOUNT S\$	11,528.46
GST @ 7 %	806.99
AMOUNT DUE S\$	12,335.45

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

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:

Rane
Hp 90010068
5 days
4/5
24/08/2020
P 1050
Resurvey after repair

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 19/08/2020 12:18
Date Of Accident 18/08/2020 14:30
Exact Location Of Accident HOLLAND ROAD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE:

Vehicle Registration Number SJZ9799P

Insured/Policyholder

Name Of Registered Owner HELLSPONG HANS OLOF
NRIC No SXXXX386Z
Email Address HANS.HELLSPONG@GMAIL.COM
Mobile Phone No (LOCAL) +65-98388635
Alternative Phone No OFFICE-67323405

Vehicle Particulars

Manufacturer BMW
Model 640I GRAN COUPE 4DR SR LED DSC NAV HUD
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 ETIQA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number M0010883
Cover Note Number

Driver

Name of Driver HELLSPONG MAUREEN
NRIC No SXXXX389D
Date Of Birth 11/08/1948
Occupation INDOOR
Date Of Driving Pass 22/01/1991
Driving Experience 29 YEARS AND 6 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-98388635
Fax Number
Contact Number
Email Address MAUREEN.HELLSPONG@GMAIL.COM

Address	327 RIVER VALLEY ROAD #24-03
Postcode	238359
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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)	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

-

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

Vehicle Registration Number	SFS5868J
Vehicle Make/Model/Colour	MERCEDES BENZ / C 180
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEW LEE YIN
NRIC/Passport Number	SXXXX776G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the 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:

19 Aug 12.30 2020

GIA/IRAF Sketch Plan Pg. 10, 11

Driver's Signature
(If driver is not the policyholder)

Date & Time: 19.08.2020
12.30 PM

Reporting Centre Personnel's Signature

Name:

NRIC/IN No.:



**SINGAPORE
POLICE FORCE**



T/20200819/2061

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

1 of 4

Report No. T/20200819/2061

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/08/2020 14:23		Vide Report No.:		Station Diary No.: 56	
Informant's Particulars					
Name of Informant: HELLSPONG MAUREEN			Address: 327 RIVER VALLEY ROAD #24-03 SINGAPORE 238359		
ID Type / ID No.: NRIC NO / S2665389D			Contact No.: Home/Office: 67323405 Mobile: 98388635		
Nationality: BRITISH			Email:		
Sex: Female	Age: 72	Date of Birth: 11/08/1948	Type of Informant: Driver		
Race: Caucasian			Language:		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 18/08/2020 14:30	Type of Location: Bend
Location: HOLLAND ROAD				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Controlled by Others e.g. Workmen		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJZ9799P	Car	BMW	640I	White	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20200819/2061

Police Station Of Origin:

Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

2 of 4

Report No. T/20200819/2061

CONTINUATION OF REPORT

Driver			
Name	HELLSPONG MAUREEN	ID No.	S2665389D
Related Vehicle	SJZ9799P (Car)	Contact No.	67323405
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	YEW LEE YIN	ID No.	S7135776G
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 18/08/2020 at about 1430hrs, I was driving my vehicle, SJZ9799P along Holland Road towards Holland Avenue, slightly after Taman Warna. I was driving on the middle of the three lanes. As I was approaching the bend, I noticed that there is a construction ongoing ahead from the most left lane to the middle lane. There were cones set up and also a big lorry parked within the construction works. Due to the ongoing construction, the traffic was slightly congested. It was raining at point of time and road surface was wet.

As I was nearing to the construction works, I signaled and filtered to the right lane and it was safe to do so. I then noticed a man manning the stop sign whom signaled to me to stop as there is another lorry exiting the construction site. Immediately, I stepped on the brakes and came to a stop. I wish to add that my vision ahead on the left was blocked by the big lorry parked at the construction works. Suddenly, I felt an impact from the rear of my vehicle. I then realized that one motorcar had collided onto the rear of my vehicle. I got out of my vehicle and made a check on my vehicle and noticed that the other driver was fine. Thus, we moved to stop at the side of the road.

We exchanged particulars and took pictures of the damages to our vehicles. The damages to my vehicle are scratches, dents and cracks to my rear bumper. My rear registration plate number holder and light was also broken. The damages to the other vehicle which is a Black Mercedes are scratches and dents on the front bumper. I wish to add that at the point of time, I did not realize that the front registration plate came off. The 'Mercedes' emblem located at the top middle of the bonnet. No visible injuries on the driver. Subsequently, we left the vicinity as we agreed on insurance claims.

On 19/08/2020, my insurance company ETIQA informed me that I could not make a claim yet as I do not



**SINGAPORE
POLICE FORCE**



T/20200819/2061

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 4

Report No. T/20200819/2061

CONTINUATION OF REPORT

have the other driver's contact number nor I have the registration number of the other vehicle. Thus, I am lodging this report for insurance claiming purposes.

The particulars of the other driver:
Yew Lee Yin
S7135776G
350 Laurel Wood Avenue
Female/ Chinese/ 14/10/1971



SINGAPORE
POLICE FORCE



T/20200319/2061

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

4 of 4

Report No T/20200319/2061

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:
D /
Sgt 3 HIDAYAT BIN SELAMAT

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151

Authentication Stamp
NP168

SIGNATURE

Signature Of Informant

Date/Time:
19/08/2020 14.23

Classification Of Case:

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	386Z

Vehicle No.:	SJZ9799P
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Aug 2020
Vehicle Make:	B.M.W.
Vehicle Model:	640I GRAN COUPE 4DR SR LED DSC NAV HUD
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	04858596N55B30A
Chassis No.:	WBA6A02030DZ11966
Maximum Power Output:	235.0 kW (315 bhp)
Open Market Value:	\$90,948.00
Original Registration Date:	29 Apr 2014
First Registration Date:	29 Apr 2014
Transfer Count:	1
Actual ARF Paid:	\$135,707.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Apr 2024
PARF Rebate Amount:	\$88,209.00

Intended COE Rebate Details

COE Expiry Date:	28 Apr 2024
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$84,001.00
COE Rebate Amount:	\$30,488.00
Total Rebate Amount:	\$118,697.00

The information contained herein is correct as at 24 Aug 2020

OK

mart.com/used_cars/info.php?ID=919763&DL=1079

► BMW 6 Series 640i Gran Coupe Sunroof

Overview

Financial

Accessories

Similar

Research

Photos

Map



Price \$141,800

Depreciation \$21,650 /yr
View models with similar depre

Reg Date 22-Apr-2014
(3yrs 7mths 28days COE left)

Mileage N.A.

Manufactured 2013

Road Tax \$2,362 /yr

Transmission Auto

Dereg Value \$112,267 as of today (change)

OMV \$85,073

COE \$84,504

ARF \$125,132

Engine Cap 2,979 cc

Power 235.0 kW (315 bhp)

Curb Weight 1,750 kg

No. of Owners 1

Type of Vehicle Luxury Sedan

Features

BMW 3.0L 6 Cylinder TwinPower Turbocharged Engine Producing 315Bhp, 450Nm Of Torque. 8 Speed (A) Steptronic Transmission With Paddle Shifters. View specs of the BMW 6 Series Coupe (2011-2017)