

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SMS/616M
at Workshop m/s R.
of _____
Insured: FBP9589B
Policy No. _____
Claims No. CMTD2002753/AGC
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: \$155k.
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 L7A 76776
Vehicle: IN / OUT
Date: _____ Person Contacted: _____

Veh No: SMS/616M Yr Regn: 81 20
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or CA/
Make: BMW X1 M-sport.c 1998
Colour: Grey A/C: Insured / Std / NI / NA
Sp. Reading: 2206 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: WBA72AA0405R 39536
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modi: Nil S/Rim / STD A/Rim or
Tyre Size: F: _____ R: 225/45 R19
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Continental/
Front Rear
R/Bal. 9 mm R/Bal. 9 mm
L/Bal. 9 mm L/Bal. 9 mm
D.O.A. 20/9/20 D.O.I. 22/9/20
Survey held at _____
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
O/S Body/
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction
have video (glass coating w/tyrant correction package (\$898))

22/09/20@5.18pm Informed Agnes Chan, we are pending estimate from repairer.

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

1) ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____) ☐ : S + RS, SI
☐ : Interview (\$ _____) ☐ : Photos
☐ : Tech. Invs (\$ _____) ☐ : Others
☐ : Weekend (\$ _____)

Report Format : _____

Lump Sum / I.B.I: (\$ _____)

TOTAL

| |
|--|
| |
| |
| |
| |
| |
| |

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 | 22/09/2020 09:19 |
| Date Of Accident | 20/09/2020 19:05 |
| Exact Location Of Accident | MANDAI AVENUE TWRDS BKE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SMS1616M |
| Insured/Policyholder | |
| Name Of Registered Owner | BLACK & WHITE TRADING |
| Co Reg No | 5XXXX852L |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-88111616 |

Vehicle Particulars

| | |
|--|----------------------|
| Manufacturer | BMW |
| Model | X1-2.0 SDRIVE20I (A) |
| Exact Purpose for which vehicle was being used at time of accident | |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| Vehicle Category | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|---------------------------------------|
| Name of Insurance Company | INDIA INTERNATIONAL INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | WEE JING YU, DARYL |
| NRIC No | SXXXX273I |
| Date Of Birth | 16/01/1990 |
| Occupation | INDOOR |
| Date Of Driving Pass | 18/04/2017 |
| Driving Experience | 3 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-88111616 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|---------------------|
| Address | BLK 110 GANGSA ROAD |
| | #06-95 |
| Postcode | 670110 |
| 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 | SIDE SWIPE |
| 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) | 2 |
| Passenger 1 | NAME: : CHERYL KOH JIE MIN |
| | GENDER: : FEMALE |

Details of Police Action

| | |
|---|---|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | 10 UBI AVENUE 3 |
| Police Station Address | ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER THE ATTACHED POLICE REPORT T/20200920/7012

Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|------------|
| Vehicle Registration Number | FBP9589B |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | MOTORCYCLE |
| Name of Driver | |
| NRIC/Passport Number | |
| 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 lodging 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.

Black & White Trading
 Reg No. C0188852L
 Blk 110 Gangsa Road #08-05
 Singapore 670110
 Tel: 65111513 / 91921668

J~i

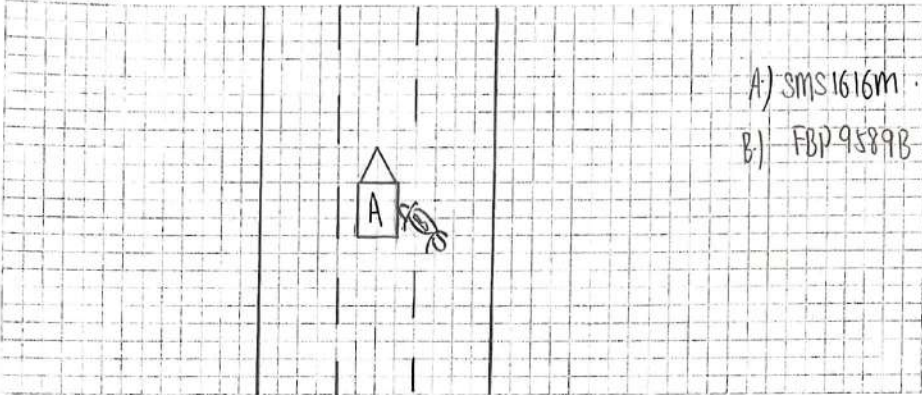


Policyholder's Signature
 Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

* Refer the attached Police Report T/20200920 / 7012

DECLARATION

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

Black & White Trading
Reg No. 1100000000
110 Geylang Road #10-11
Singapore 409010

Policyholder's Signature

Date & Time:

Lai

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20200920/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20200920/7012

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|-------------------------------------|--|--------------------|----------------------------|
| Date/Time Report Made: 20/09/2020 21:02 | | Vide Report No.: L/20200920/0166 | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: WEE JING YU, DARYL | | | Address: 110 GANGSA ROAD #06-95 HDB-BUKIT PANJANG SINGAPORE 670110 | | |
| ID Type / ID No.: NRIC NO / S9003273I | | | Contact No.: Home/Office: Mobile: 88111616 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: daryl304@hotmail.sg | | |
| Sex: Male | Age: 30 | Date of Birth: 16/01/1990 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: self employed | | | Driving Licence Information: Class: 2B,2A,3,4 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|----------------------------------|-----------------------|---|--|
| Type of Accident: | Non-Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 20/09/2020 19:04 | Type of Location: Straight Road |
| Location: MANDAI AVENUE | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Slide Swipe - Same Direction | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Conditio | No of |
|-------------|------------|--------|-------|---------------|---------------------|-------|
| FBP9589B | Motorcycle | YAMAHA | aerox | Multi-Colored | | 1 |
| SMS1616M | Car | BMW | x1 | Grey | Slightly Damaged | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|



**SINGAPORE
POLICE FORCE**



T/20200920/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 4

Report No. T/20200920/7012

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|---------------------------------------|--------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SMS1616M | INDIA INTERNATIONAL INSURANCE PTE LTD | | 27/08/2020 | 26/08/2021 |

| Details of Person Involved | | | | |
|-----------------------------------|-----------------------|--------------------------------|-----------------------------------|---|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | | |
| Pillion | | | | |
| Name | Unknown Pillion | | ID No. | NIL |
| Related Vehicle | FBP9589B (Motorcycle) | | Contact No. | NIL |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry | Class: NIL Date of Expiry: NIL |
| Date | NIL | | Date | NIL |
| No. of Days granted Medical Leave | NIL | | Degree of | NIL |
| Driver | | | | |
| Name | WEE JING YU, DARYL | | ID No. | S90032731 |
| Related Vehicle | SMS1616M (Car) | | Contact No. | 88111616 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry | Class: 2B,2A,3,4 Date of Expiry: NIL |
| Date | NIL | | Date | NIL |
| No. of Days granted Medical Leave | NIL | | Degree of | NIL |
| Passenger | | | | |
| Name | CHERYL KOH | | ID No. | NIL |
| Related Vehicle | SMS1616M (Car) | | Contact No. | 84986268 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry | Class: NIL Date of Expiry: NIL |
| Date | NIL | | Date | NIL |
| No. of Days granted Medical Leave | NIL | | Degree of | NIL |



**SINGAPORE
POLICE FORCE**



T/20200920/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 4

Report No. T/20200920/7012

CONTINUATION OF REPORT

Brief Details.

i was driving along mandai ave toward BKE on lane 2 of a 3 lane road. The motor bike FBP9589B was riding on lane 1 suddenly he ride too near to me without any signal to lane change to my lane 1 sound my horn to warn him that he was about to hit me. but the rider move back and suddenly pick up his speed to ride pass between me and a white car on lane 1 to prevent hitting the white car the rider came too near to my car and hit onto my right side both car door the cause a big dent with scratches. After the hit the biker did not stop the bike and ran away Instead. he & his pillon point middle finger at me before riding off. i called 999 as the rider refuse stop after the accident after i high bean me. 999 told me to stop following the bike and stop at the nearest spot to wait for the tp to arrive.

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20200920/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

4 of 4

Report No. T/20200920/7012

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
JOFILIANO BIN MOHAMED ALI
Contact No.: 65476960

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
20/09/2020 21:02

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars | |
|-------------------------------|---------------------------------------|
| Owner ID Type: | Business |
| Owner ID: | 852L |
| Vehicle Details | |
| Vehicle No.: | SMS1616M |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 22 Sep 2020 |
| Vehicle Make: | B.M.W. |
| Vehicle Model: | X1 SDRIVE20I MSPT |
| Primary Colour: | Grey |
| Manufacturing Year: | 2020 |
| Engine No.: | 33535976B48A20A |
| Chassis No.: | WBA72AA0405R39536 |
| Maximum Power Output: | 141.0 kW (189 bhp) |
| Open Market Value: | \$42,149.00 |
| Original Registration Date: | 27 Aug 2020 |
| First Registration Date: | 27 Aug 2020 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$51,009.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 26 Aug 2030 |
| PARF Rebate Amount: | \$38,256.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 26 Aug 2030 |
| COE Category: | B - Car above 1600cc or 97kW (130bhp) |
| COE Period(Years): | 10 |
| QP Paid: | \$38,802.00 |
| COE Rebate Amount: | \$38,520.00 |
| Total Rebate Amount: | \$76,776.00 |

The information contained herein is correct as at 22 Sep 2020

OK



Michelin PS4
17" Tyre
Promo at
\$165 Only



Premium
Italy Interior
Leather
Upholstery



TRW XPS
Slotted
Rotors Kit
\$280 (UP
\$380)



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BMW X1

Advanced Search Submit (

| | Make | Model | Price | Depreciation | Reg Date | Eng Cap | Mileage | Veh Type | Status |
|---|--------|-------------------|-----------|--------------|-------------|----------|----------|----------|-----------|
| Search Selection | BMW X1 | | Any | Any | 2020 | Any | Any | Any | Available |
| | BMW X1 | sDrive18i | \$136,800 | \$12,270 /yr | 31-Mar-2020 | 1,499 cc | 3,163 km | SUV | Available |
| The Only Facelift X1 S18i Available On The Pre-Owned Market. One Last White Unit Arriving On 2nd October. With PML Warranty(3yrs/2... | | | | | | | | | |
| BW Automobiles | | | | | | | | | |
| Posted: 16-Sep-2020 Tags: 2020 BMW X1, BMW X1, BMW, X1 | | | | | | | | | |
| | BMW X1 | sDrive20i M-Sport | \$158,800 | \$13,670 /yr | 09-Jul-2020 | 1,998 cc | 1,200 km | SUV | Available |
| New Condition! 5 Yrs Warranty And Free Servicing By PML! Low Mileage Done! Rare SDrive20i M Sport In Mineral Grey! Don't Miss! Vie... | | | | | | | | | |
| 360 VR Cars | | | | | | | | | |
| Posted: 01-Sep-2020 Tags: 2020 BMW X1, BMW X1, BMW, X1 | | | | | | | | | |

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