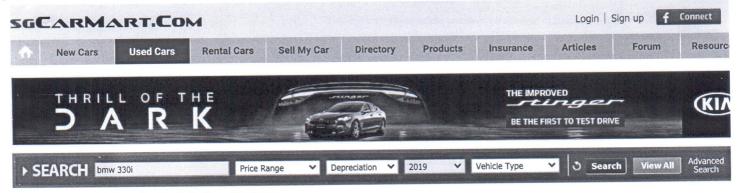
08/11/13) wef REF: CS CT1 200	11426. RIVd3 992E		
	GNMENT		
From: Date:	Veh No: SOV 1691 Yr Regn: No. Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /		
DD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or		
To Inspect Vehicle No: SOV 1693	Make: B-M .W 330 T MS PT HWD c.c 1998		
at Workshop m/s MoV P	Colour WHITE A/C: Insured / Std / NI / NA		
The state of the s	Sp.Reading 266 26 T/Radio: Insured / Std / NI / NA		
nsured: CT STP 7158 E	Eng/No:		
olicy No. DMPCSNAGOO JHH82005	C/No: WBA SR12010 MK 71980*		
claims No. SNM 20 D 203955 (02) TKL	Gen. Cond: Good / Pai / Poor / Burnt		
um Insured: Excess:	Steering: Inorder Jammed Leaked Burnt or		
(Client's Record)	Brake: horder / Jammed / Leaked / Burnt or		
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or		
	Tyre Size: F: 255 35R19		
(Policy Condition)	R:		
Remark: The veh had commenced its N/S O/S	BS J DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /		
repair at the time of inspection.	TOYO / YOKO or		
sal. or Market Value:	<u>Front</u> <u>Rear</u>		
DAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm		
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal. 6 mm		
Est. Repairs: days Res.: Yes or No	D.O.A. 10 (6/20 D.O.I. 22/03/21		
.um Sum: % 3 Val.: Yes or No	Survey held at MoVA (Jsm)		
24 / DEV / DED / 24 UPS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or		
CA / REV / REP. / 24 HRS Vehicle: IN / OUT			
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.		
Date / Time Action / Instruction Report Int - 102K DD 4 21 Final fig \$ 2263.35 Confin	med by emcil (Red 1057.55, 3290		
Date/Time, File Pass to? : Preli. Report 1) Date/Time, File Return to? 2) 23 4 - typich Report Format: Lump Sum / I.B.I: (\$ 2263.35)	Days Of Repair: 3 Resurvey No. of Trip: Survey Fee: Transportation: Set: Site Insp (\$)S+RS,SI Interview (\$) Photos Tech. Invs (\$) Weekend (\$)		
	TOTAL		

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

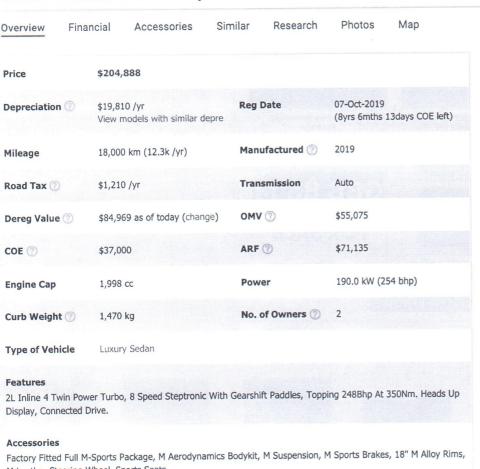
Owner ID Type:	Singapore NRIC
Owner ID:	992E
VanceDatalis	and the second
Vehicle No.:	SDV169J
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Mar 2021
Vehicle Make:	B.M.W.
Vehicle Model:	3301 MSPT HUD NAV FOGLIGHT
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	15665614B48B20B
Chassis No.:	WBA5R12010AK71980
Maximum Power Output:	190.0 kW (254 bhp)
Open Market Value:	\$54,376.00
Original Registration Date:	26 Apr 2019
First Registration Date:	26 Apr 2019
Transfer Count:	0
Actual ARF Paid:	\$69,877.00
Intended PARP Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Apr 2029
PARF Rebate Amount:	\$52,407.00
Intended COE Rebate Details	The state of the s
COE Expiry Date:	25 Apr 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,000.00
COE Rebate Amount:	\$38,826.00
Total Rebate Amount:	\$91,233.00

The information contained herein is correct as at 23 Mar 2021



Home » Used Cars » Axle Motors Pte Ltd » BMW 3 Series 330i M-Sport

BMW 3 Series 330i M-Sport



M Leather Steering Wheel, Sports Seats.

Description

Agent Unit, 3 Years 100k Km Warranty With Performance Motors, In Mint Condition, Low Mileage Clocked. Full M Works, Setting This Unit Apart From The Base Models, With A More Aggressive Styling, Inside And Out. Contact Us Now To Find Out More About This Unit. Trade In's Welcomed, Loan/Finance Arrangeable. Viewings By Appointment Only!

Category

PARF Car, Premium Ad Car

Available for sale. Shortlist this car to get alerted whenever the price or availbility changes.

Resources



sqCarMart Used Car Warranty

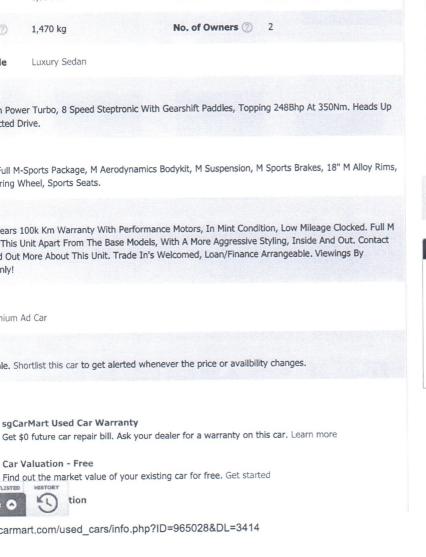
Get \$0 future car repair bill. Ask your dealer for a warranty on this car. Learn more



Car Valuation - Free









PREMIUM AD









Axle Motors Pte Ltd

62 vehicles for sale. 39 sold in past 3 mths

② 33 Ubi Avenue 3 #01-72 Search cars nearby

Jaspal Harold 97207707

92700406

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 <u>truthful and accurate</u> 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.
- 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

7. By the lodgement of this report to the insurers, you hereby con aforesaid.	nsent to the archiving of this report at the centre and to copies of the report being made available
经验证的现在分词 医 克克斯氏	ACCIDENT STATEMENT
Date Of Report	12/10/2020 14:30
Date Of Accident	10/10/2020 19:30
Exact Location Of Accident	NEWTON HAWKER CENTRE CAR PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDV169J
Insured/Policyholder	
Name Of Registered Owner	CHUA TOCK LING
NRIC No	SXXXX992E
Email Address	CHUATL@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96601319
Alternative Phone No	OTHERS-NOPHONE
Vehicle Particulars	
Manufacturer	BMW
Model	330I MSPT HUD NAV FOGLIGHT
Exact Purpose for which vehicle was being used a time of accident	ıt
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	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPG20003632
Cover Note Number	
Driver	
Name of Driver	CHUA TOCK LING
NRIC No	SXXXX992E
Date Of Birth	13/10/1953
Occupation	INDOOR
Date Of Driving Pass	02/05/1980
Driving Experience	40 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96601319
Fax Number	

OTHERS-NOPHONE

CHUATL@SINGNET.COM.SG

Address 7C BALMORAL PARK #03-02

Postcode 259865

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

enicie

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

NO

NO

0

NO

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Attachment(s)

Are accident photos available for attachment?

0

Was there any video captured by Car Camera?

NO NO

YES

Was there any audio recorded?

N

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJP7158E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver MR JEFFREY

NRIC/Passport Number

Contact Number

84845700

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)

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

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

Sketch Plan Pg. 2

The state of the s		
	MARKING	1 1075
	GRASS	PATEH
owners .	- SDV169 J]	SJP7158E] + Too Much Inside par
	NCES OF THE ACCIDENT	ACCIDENT DATE & TIME Tolonger (in ACT)
CONTACT NUMBER:	9160 12,9	E-MAIL ADDRESS: Chinatl@ Singrat.com. 59
LOCATION: #	lewton Hawker of	- con Park
rear bunge	n as seen in f.	
rear bunge	n as seen in f.	et about location after dinner at cl. No. SIP 7158 & redged to my photos taken. Thotos taken. Inturned to hissar at about & property a dent on the way bumper. He have close his man it was to my a g system is part working. I tact details for further investigations.
when the contract of the applies said he course he claims	owen my. Joeffrance out for the cause out and fudgo warning warning warning out that your insurer may	hotos taken. neturned to hissar at about I prosing a dent on the way bumper. He how close his man or was to my a g system is part working.
when the confirmed when the confirmed when the confirmed with the conf	owen my. Joeffrance ould not judgo is parking warning At changed Con OTE THAT YOUR INSURER MAY	Inturned to his ear at about & problem a dent on the way bumper. He have close his man it was to my a g system is most working. Have 14 Days TIME FRAME FOR YOU TO SUBMIT AN PLEASE CHECK YOUR POLICY FOR MORE INFORMATION
May bungs When the co As a pulling Said Le co Micause Air What the co Micause Air Claims NOTE: PLEASE N OWN DAMAGE CLAI Please state: () Claim Own Policy DECLARATION	owen my. Joeffrance ould not judgo is parking warning At changed Con OTE THAT YOUR INSURER MAY	Inturned to his ear at about & problem a dent on the way bumper. He have close his man of was to my a g system is next working. HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN PLEASE CHECK YOUR POLICY FOR MORE INFORMATION () Claim OD/TP at other workshop () Reporting Only



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

Page # :- 1

- SDV169J Veh#

Veh Model :- BMW 330I

Estimate# :- CK421130

Claim # :- TP/CK 139300

ACC. Date :- 10/10/20

Terms

:- C.O.D Days

Remarks :- WFA 26 APR 2019 (2019)

Ο.	Description	Qty	U.Price	Amounts S\$
1.	LIST ITEMS: REAR BUMPER de -	1 PC	1,793.00	1,793.00
2.	REVERSE SENSOR CTR LH	1 PC	240.00	240.00
3.	REVERSE SENSOR CTR RH X XVC	1 PC 1 PC	240.00 271.00	240.00 271.00
4. 5.	REAR BUMPER GARNISH TEPANY REAR BUMPER SPONGE X	1 PC	162.00	162.0
6.	REAR BUMPER CTR BRACKET X SVL	1 PC	116.00	116.0
	LIST TOTAL S\$			2,822.0
	5% DISCOUNT S\$	19m		-141.1
		1 Hp 90010068		2,680.9
	LABOUR: TO INSTALL REVERSE SENSOR & DIAGNOSE FUNCTION	3 days		60 80.0
	10 INSTALL REVERSE SENSOR & DIAGNOSE FUNCTION	o wy		60 %
	TO REMOVE & REPLACE DAMAGED ITEMS, REALIGN	PP		250 280.0
	CONNECTION			270.0
	TO SPRAY PAINT ON REPAIRED AREAS	-12/21	2	280.0
	LABOUR TOTAL S\$	22/03/21		640.0
	LABOUR TOTAL 30	@ 1130		
		Rasy before	paint	
	E, & O.E			
		NON-TAX AMOUNT	ΓS	
		AMOUNT S\$		3,320.9
		GST @ 7 %		232.4
	Jacelyn	AMOUNT DUE S\$		3,553.3

Estimate

CHINA TAIPING INSURANCE (S) PTE LTD

21/10/2020

3 Anson Road

Singapore 079909.

Attention :- XA017

#16-00 Springleaf Tower

- 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:



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

Singapore 159722 Tel: (65) 6272 3892 Fax: (65) 6270 8314

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

Estimate

21/10/2020

CHINA TAIPING INSURANCE (S) PTE LTD

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909.

Attention :- XA017

Page #

Veh#

SDV169J

Veh Model :-

BMW 3301

Estimate# :-

CK421130

Claim #

:- TP/CK 139 300

ACC. Date :-

10/10/20

Terms

:- C.O.D Days

Remarks :- WFA 26 APR 2019 (2019)

No.	Description	Qty	U.Price Amounts S\$
1. 2. 3. 4. -5. 6.	LIST ITEMS: REAR BUMPER AL REVERSE-SENSOR-CTR-LH-X REVERSE-SENSOR-CTR-RH-X REAR BUMPER GARNISH report REAR-BUMPER-SPONGE REAR-BUMPER-GTR-BRACKET LIST TOTAL S\$ 5% DISCOUNT S\$	1 PC PC PC PC PC PC PC PC PC	1,793.00 1,793.00 240:00 240:00 240:00 271:00 162:00 162:00 116:00 116:00 1793-00 2,822.00 - 5% -141.10
	LABOUR: TO INSTALL REVERSE SENSOR & DIAGNOSE FUNCTION	1 Hp 9volvo 18 3 days	1703-35 2,680.90 6. 80.00
7	TO REMOVE & REPLACE DAMAGED ITEMS, REALIGN CONNECTION	Ple	250 280.00
	TO SPRAY PAINT ON REPAIRED AREAS LABOUR TOTAL S\$	22/03/21	660-00 640.00
	•	Rosn before	maint

1703-35 Part 2 560-00 \$ 2263-35

Customer's Signature/Co. Stamp

E, & O.E

MØVA AUTOMOTI

Jacelyn

NON-TAX AMOUNT S

AMOUNT S\$

GST @ 7 %

AMOUNT DUE S\$

3,553.36

3,320.90

232.46