

A.S.S. REC. BY: Paul

REF:

CS/CT120012515/R19/3

265J

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

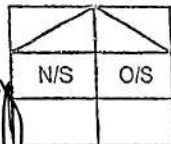
To Inspect Vehicle No: SMP 9237Lat Workshop m/s PERFORMANCEof 303, ALEXANDRA RDInsured: CTIPolicy No. DMPCSNW00108052000Claims No. SNM20D204306C02

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: 129K

IDAC Accident Report: _____ 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: SMP 9237L Yr Regn: 2019 OCTType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: B.M.W X1 DRIVE BT LEONN.C.C 1499Colour WHITE A/C: Insured / Std / NI / NASp. Reading 14763 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBAJA12005N18497

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/60R18

R: _____

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

TOYO / YOKO or _____

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 07/11/2020

Survey held at

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

N/S REAR

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

Date / Time

Action / Instruction

25/11/20@11.54am revised to Pauline Tham via Merimen.

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Rep. Format: _____

Lump Sum / L.B.H. (\$ _____)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Dealer

Performance Motors Limited

A Sime Darby Motors Company
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X
Toll-Free Number (1800-2255269)

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Fax. 63449773

315, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Fax. 64796601
64796624

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
- Any damaged part(s) must be resurveyed and subject to final approval from Insurance Company (After Sales)



Acknowledged by Repairer

Signature: _____
Date: _____

GST REG. NO : M2 - 0020081 - X

13 NOV 2020

ESTIMATE

Estimate No. : b1 56549
Date Estimated : 13/11/2020
Prepared By : Foong Shiuh Jye

Page No. : 1 of 4

- ESTIMATE REPAIR FOR -

Yip How Chee (Ye QiaoZhi)
82 Bedok North Rd
#06-316

Singapore 460082

- ACCOUNT - 135

China Taiping Insurance (S) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMP9237L	WBAJG120005N18497	23/10/2019	X1 sDrive18i	0

DESCRIPTION

To remove and install bumper rear cover, rear left door and attachments

1700 2,550.00

To spray paint bumper rear cover, rear left door and door rear left handle

1806 2,087.00

To check electrical wiring system at the front section for proper function including adjustment of headlights.

150 177.00

Sundries

? 80.00

Total Labour 1: 4,814.00

DESCRIPTION

LH DOOR OUTER HANDLE PRIMED repair
LH COVERING PRIMEND X
REAR LH WHEEL ARCH TRIM SC-

QTY	PRIC	VALUE
1	95.55	95.55
1	47.80	47.80
1	151.80	151.80

Total Parts : 295.15

Claims OD / 3rd Party Uninsured losses / Direct Settlement

Regn No. _____ Claim No. _____

Date & Time 23/11/2020 @ 1445 Excess S\$ _____

Surveyor's Name RASUL Sign _____

Surveyor's Tel 9608068

Authorised Date _____ Time _____

RESURVEY PARTS PHOTO BY SURVEYOR Yes / No PVL Yes / No

Surveyor's E-mail rasul@lkkauto.com

No. of Working Days Recommend 3-4 days

Labour 1	:	4,814.00
Parts	:	295.15
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	357.64

Grand Total : 5,466.79



** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**
** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **

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	07/11/2020 12:46
Date Of Accident	07/11/2020 10:20
Exact Location Of Accident	BEDOK NORTH RD / NEW UPPER CHANGI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP9237L
Insured/Policyholder	
Name Of Registered Owner	YIP HOW CHEE
NRIC No	S7240265J
Email Address	WONDERJANE01@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97626651
Alternative Phone No	OTHERS-97626651

Vehicle Particulars

Manufacturer	BMW
Model	X1-1.5 SDRIVE 18i (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

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119348798
Cover Note Number	23/10/2020 - 22/10/2021

Driver

Name of Driver	YIP HOW CHEE
NRIC No	S7240265J
Date Of Birth	30/10/1972
Occupation	INDOOR
Date Of Driving Pass	18/11/2004
Driving Experience	15 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97626651
Fax Number	
Contact Number	OTHERS-97626651
Email Address	WONDERJANE01@YAHOO.COM

Address BLK 82 BEDOK NORTH ROAD #06-316
 Postcode 460082
 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 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) 4
 Passenger 1 NAME: : CHILDREN
 GENDER: : FEMALE
 Passenger 2 NAME: : CHILDREN
 GENDER: : FEMALE
 Passenger 3 NAME: : CHILDREN
 GENDER: : FEMALE

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

MY VEHICLE WAS TRAVELLING BEHIND VEHICLE B ALONG THE LEFT LANE OF BEDOK NORTH ROAD, TURNING RIGHT INTO NEW UPPER CHANGI ROAD. THERE WAS ROAD WORKS AHEAD AND THUS I CHANGED LANE TO THE RIGHT AND PROCEED TO DRIVE STRAIGHT. BEFORE REACHING THE JUNCTION, VEHICLE B MADE A LANE CHANGE DUE TO THE ROAD WORKS AHEAD. VEHICLE B DRIVER SOUNDED HER HORN AND I HEARD A BANG SOUND. I THEN STOPPED MY VEHICLE ALONG NEW UPPER CHANGI ROAD AND VEHICLE B ALSO STOPPED. VEHICLE B DRIVER THEN ASKED ME WHY I DID NOT GIVE WAY TO HER ON THE MERGING LANE AND ASKED FOR MY PARTICULARS. BUT I SAY NO AND TO WAIT FOR TRAFFIC POLICE. THERE WAS TWO CISCO OFFICER (ONE MALE AND ONE FEMALE) ON SITE AND INFORMED THAT THE MALE OFFICER WILL CALL TRAFFIC POLICE. THE FEMALE OFFICER THEN INFORMED ME TO SHIFT MY VEHICLE INTO ONE NEARBY OPEN CARPARK NEAR BLK 58, IN ORDER NOT TO BLOCK THE TRAFFIC. THE TRAFFIC POLICE CALL CENTRE STAFF THEN INFORMED THAT THERE WILL BE NO CASE AS THERE IS NO INJURY. WE LEFT AFTERWHICH. NO ONE WAS INJURED. MY VEHICLE ONLY SUSTAIN ONE SCRATCH ON MY REAR LEFT DOOR. VEHICLE B HAD SCRATCH ON HER FRONT TOP RIGHT MIRROR. I WISH TO INFORM THAT THERE WAS ALSO OTHER DAMAGES ON THE FRONT RIGHT BUMPER OF VEHICLE B (WHICH I CONFIRM IS NOT CAUSED BY THIS ACCIDENT AS THERE WAS EXISTING ORANGE PAINT MARK AND THE HEIGHT OF MY VEHICLE DAMAGE DOES NOT MATCH AND TALLY WITH VEHICLE B FRONT RIGHT BUMPER).

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES
Remarks/ Reasons: SD CARD WITH OWNER
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY:

Vehicle Registration Number SKU9512P
Vehicle Make/Model/Colour NISSAN SYLPHY
Details Of Properties FRONT RIGHT MIRROR
Vehicle Category PRIVATE CAR
Name of Driver CHINESE FEMALE DRIVER
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Report No: M1

D.O.A:

Vehicle No.

Make Model:

SM P9237L
BMW X1

Report Date: 7/11/2020 Start Time: 1:20 PM

Reporting Type: PO End Time:

IMPORTANT NOTICE

SKETCH PLAN

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.
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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.

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 reasonable required for the purposes stated, or

(ii) for complying with requirements under any regulations, law or court orders.

Policyholder's Signature
Date & Time:

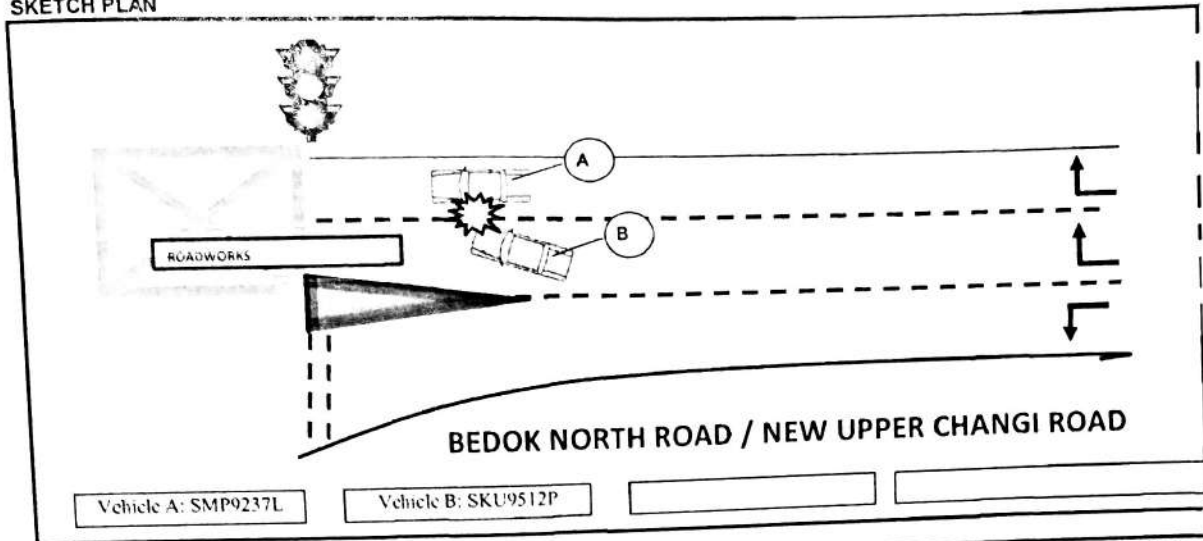
7/11/2020 13:20

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

7/11/2020 13:20

Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC/ Fin No: S990765

SKETCH PLAN



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DECLARATION

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


 Policyholder's Signature
 Date & Time: 7/11/2020 13:20


 Driver's Signature (If driver is not the policyholder)
 Date & Time: 7/11/2020 13:20


 Reporting Centre Personnel's Signature
 Name: Chen JunLiang
 NRIC/ Fin No: S990765

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	265J

Vehicle No.:	SMP9237L
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Nov 2020
Vehicle Make:	B.M.W.
Vehicle Model:	X1 SDRIVE18i LED NAV
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	33695655B38B15A
Chassis No.:	WBAJG120005N18497
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$36,901.00
Original Registration Date:	23 Oct 2019
First Registration Date:	23 Oct 2019
Transfer Count:	0
Actual ARF Paid:	\$43,662.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Oct 2029
PARF Rebate Amount:	\$32,746.00

COE Expiry Date:	22 Oct 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$41,361.00
COE Rebate Amount:	\$36,860.00
Total Rebate Amount:	\$69,606.00

The information contained herein is correct as at 23 Nov 2020

OK



Merimen e-Claims



Used 2019 BMW X1 sDrive18i for



PARF/COE Re

com/used_cars/info.php?ID=934736&DL=3317

BMW X1 sDrive18i

Overview

Financial

Accessories

Similar

Research

Photos

Map

VANTAGE PRE-OWNED

Price	\$128,800		
Depreciation ⓘ	\$12,240 /yr View models with similar depre	Reg Date	12-Sep-2019 (8yrs 9mths 19days COE left)
Mileage	16,800 km (14k /yr)	Manufactured ⓘ	2019
Road Tax ⓘ	\$684 /yr	Transmission	Auto
Dereg Value ⓘ	\$63,213 as of today (change)	OMV ⓘ	\$35,726
COE ⓘ	\$36,001	ARF ⓘ	\$42,017
Engine Cap	1,499 cc	Power	103.0 kW (138 bhp)
Curb Weight ⓘ	1,430 kg	No. of Owners ⓘ	1
Type of Vehicle	SUV		

Features

BMW TwinPower Turbo 3 Cylinder Engine With 138Bhp, 220Nm Of Torque. 0-100Km/H In 9.7s, Top Speed 200Km/H, 7 Speed Transmission DCT, Front Wheel Drive. View specs of the BMW X1

