

ASS. REC. BY:

REF:

C12 /

CS/CTI20014036/Kqd3

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No. DMHCSNW00007682000

Claims No. SNM20D204888C02

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

04 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SDA 63372

Yr Regn: 05, 13

Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

BMW

740Li

SF.C.C.

2879

Colour

M. P. White

A/C:

Insured / Std / NI / NA

Sp. Reading

184134

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WBA YE 42 05 000 87288

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

245/40R20

R:

275/35R20

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / M/R / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

15/12/20

D.O.I.

17/12/2020

Survey held at

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

M O/S

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

Date / Time

Action / Instruction

21/01/21 @ 3.37pm revised to Adeline Chng via Merimen.

Kenneth confirmed LS \$6550, 4 days (Red \$21929.80, 77%)

Date/Time, File Pass to?

☐

: Prell. Report

1) 21/01 Typist

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trlp:

1

Survey Fee:

Transportation:

S - R/S, SI

Fees

Others

TOTAL

Report Format:

MER-TP

Lump Sum / H.D. (\$

6550

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

# MBM WHEELPOWER PTE. LTD.

YOUR REF.: SMW1939K

OUR REF.: SDA6337L

TO: CHINA TAIPING INSURANCE

CC: MOTOR CLAIMS DEPARTMENT

FAX:

*Not Notified*

*1/12/20  
Paying After Repair  
4 days*

DATE: 16/12/2020  
FROM: Lee Shirley  
FAX: 64525333  
CONTACT: 86865188  
MAKE & MODEL: BMW 740LI AT SR LED DSC NAV HUD  
CHASSIS NO.: WBAYE42050DD87288  
ENGINE NO.: 10778424N55B30A  
YEAR MADE: 2013  
ACCIDENT DATE: 15 December 2020

ESTIMATE FOR VEHICLE NO.: SDA6337L

NO.	DESCRIPTION	PART NO.	QTY.	LIST PRICE
1	BONNET <i>X</i>		1	\$ 3,200.00 <i>X</i>
2	BONNET FRONT SEAL <i>X</i>		1	\$ 97.00 <i>X</i>
3	BONNET WEATHERSTRIP <i>X</i>		1	\$ 50.00 <i>X</i>
4	BONNET BMW LOGO <i>X</i>		1	\$ 130.00 <i>X</i>
5	FRONT BUMPER <i>✓</i>		1	\$ 1,980.00 <i>✓</i>
6	FRONT BUMPER TOWING COVER <i>✓</i>		1	\$ 65.00 <i>✓</i>
7	FRONT BUMPER LOWER SPOILER <i>?</i>		1	\$ 100.00 <i>?</i>
8	FRONT BUMPER LICENSE PLATE <i>✓</i>		1	\$ 110.00 <i>✓</i>
9	FRONT BUMPER RUBBER STRIP LH <i>?</i>		1	\$ 145.00 <i>?</i>
10	FRONT BUMPER RUBBER STRIP RH <i>?</i>		1	\$ 145.00 <i>?</i>
11	FRONT BUMPER SENSOR <i>✓</i>		1	\$ 460.00 <i>✓</i>
12	FRONT BUMPER CLIP <i>✓</i>		10	\$ 100.00 <i>✓</i>
13	FRONT BUMPER SPONGE <i>?</i>		1	\$ 130.00 <i>?</i>
14	FRONT BUMPER REINFORCEMENT <i>?</i>		1	\$ 900.00 <i>?</i>
15	FRONT BUMPER LOWER CENTER GRILLE <i>✓</i>		1	\$ 90.00 <i>✓</i>
16	FRONT BUMPER SIDE GRILLE LH <i>X</i>		1	\$ 90.00 <i>X</i>
17	FRONT BUMPER SIDE GRILLE RH <i>✓</i>		1	\$ 90.00 <i>✓</i>
18	FRONT GRILLE LH <i>✓</i>		1	\$ 200.00 <i>✓</i>
19	FRONT GRILLE RH <i>✓</i>		1	\$ 200.00 <i>✓</i>
20	FOG LAMP LH <i>X</i>		1	\$ 300.00 <i>X</i>
21	FOG LAMP RH <i>?</i>		1	\$ 300.00 <i>?</i>
22	HEADLAMP LH <i>X</i>		1	\$ 6,500.00 <i>X</i>
23	HEADLAMP RH <i>Pi?</i>		1	\$ 6,500.00 <i>✓</i>
24	FRONT FENDER LH <i>X</i>		1	\$ 1,220.00 <i>X</i>
25	FRONT FENDER INNER SHIELD LH <i>X</i>		1	\$ 200.00 <i>X</i>
26	FRONT FENDER RH <i>X</i>		1	\$ 1,220.00 <i>X</i>
27	FRONT FENDER INNER SHIELD RH <i>X</i>		1	\$ 200.00 <i>X</i>

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:

MBM WHEELPOWER PTE. LTD.  
160 SIN MING DRIVE, #06-02  
SIN MING AUTOCITY  
t 6262 8688 f 6452 5333  
COMPANY REG. NO.: 200204110W

28 FRONT FENDER INNER SHIELD CLIP X

20	\$	nn 200.00 X
TOTAL:		\$ 24,922.00
LESS 10%:		\$ (2,492.20)
PARTS TOTAL:		\$ 22,429.80

SPECIAL NETT

FRONT NUMBER PLATE & HOLDER

1 \$ nn 45.00 100.00

BODY SEALANT ON BONNET

1 \$ nn 50.00 X

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS, INCLUDING TO KNOCK-OUT, WELD & STRAIGHTEN ON THE AFFECTED PARTS

\$ 500 1,800.00

TO REMOVE, REFIT & UPHOLSTERY TO FACILITATE REPAIRS

\$ nn 100.00 X

TO CHECK & RECONNECT ALL NECESSARY WIRING

\$ 30 150.00

TO REMOVE & REFIT ALL SENSOR

\$ 60 100.00

TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC)

\$ 100 150.00

TO SPRAY PAINT ON THE AFFECTED AREAS

\$ 500 1,600.00

TOTAL: \$ 26,479.80

7% GST: \$ 1,853.59

GRAND TOTAL: \$ 28,333.39

MBM WHEELPOWER PTE. LTD.

160 SIN MING DRIVE, #06-02

SIN MING AUTOCITY

t 6262 8888 f 6452 5333

COMPANY REG. NO.: 200204110W



## 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 Submission	16/12/2020 12:28 (SGT)
Date of Accident	15/12/2020 21:00 (SGT)
Exact Location of Accident	Sixth Ave, Singapore
Additional Location Information	Junction of Sixth Ave and Bukit Timah Rd
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDA6337L
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Sim Moh Wee
NRIC No	SXXXX747B
Email Address	mohwee@yahoo.com.sg
Mobile Phone No	(Phone) +65-96387487
Alternative Phone No	(Home) +65-96387487

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	740li
Variant	-
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 - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	Axa
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	VPA/P1751417
Cover Note Number	-

#### DRIVER

Name of Driver	Sim Moh Wee
NRIC No	SXXXX747B
Date Of Birth	17/06/1963
Occupation	Indoor

Date Of Driving Pass	30/07/1986
Driving experience	34 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96387487
Alt. Phone Number	(Home) +65-96387487
Email Address	mohwee@yahoo.com.sg
Address	9A Cashew Crescent
Address complement	-
Postcode	679869
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	slightly wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

refer attached report.

#### ATTACHMENT(S)

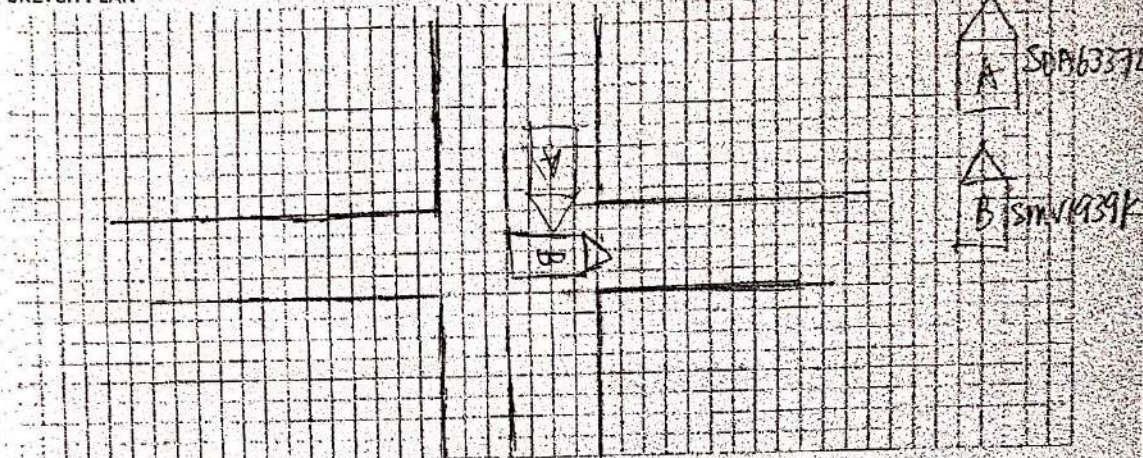
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMW1939K
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Muralidharan Govindarajah
NRIC No	-1
Contact Number	(Phone) +65-93671928
Address	-
Address complement	-
Postcode	-



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At around 9.00pm on 15/12/2020, I was at the traffic junction of Sixth Ave and Bukit Timah Road. I was on Sixth Ave headed towards Dunearn Road going on to Eng Neo Ave. I was stationery on the left lane with a dark colour car on my right. The traffic light in front of me was red and I was waiting for the light to turn green. We were the first in front.

When the ~~car~~ traffic light turned green, I drove forward and suddenly this white Mercedes-Benz number plate SLW1939K came in front of me. He was driving along Bukit Timah Road and he had crossed through the junction on his side when the lights on his side was red.

DECLARATION

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

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.:

(JAR)6C SketchPlanForm\_V3