100	
ASS. REC. BY: REF: LPC/	210008521K
Kennerh	ASSIGNMENT
From:	
Estimated Cost: Date:	Veh No: Jan 56327 Yr Regn: 05/1/
OD /APDWS / TP RES / OD RES / EVA / INV / MV	M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
21 Woden	Make: BMW 7304: c.c 299%
of 176 04	Colour M. Pilv AC: Insured / Std / NI / NA
Insured:	Sp.Reading 57032 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	Gen Condi Control 18 18 12020 CN 74Pa
Sum Insurad:	Out. Cold. 8000 / Fair / Poor / Bumt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NII / S/Rim / STD A/Rim or
(Policy Condition)	Tyre Size: F: 245/50R18
Remark: The yeh had common and to	R:
repair at the time of inspection.	- PSTOON PEXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Bal. or Market Value: 844/	TOYO/YOKO or
	<u>Front</u> <u>Rear</u>
	R/Bal / mm R/Bal
Est De la Company : 163 OF NO	UBal. 7 mm UBal. 7
Day's Tros 188 or No	D.O.A. 15/1/21 D.O.I. 19/1/2021
JU A SVAI 168 OF NO	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt   Rear   O/S   N/S   U/C   Rooftop or
Date:Person Contacted: Vehicle: IN / OUT	
Date / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
1 67A 8 38,717-co	Solitorii.
Oate/Time, File Pass to? : Prell. Report	
1) Final Day	ays Of Repair:
Cuta/Time, File Return to?	esurvey No. of Trip: Survey Fee:
Add Fee:	: Site Insp (\$
	Intendeur (s
Report Format:	Tech Inve (\$
Lump Sum / I.B.I: (S	Weekend (\$
	TOTAL

## WEGA ENGINEERING PTE LTD

Blk 176 Sin Ming Drive #04-16 Sin Ming Autocare Singapore 575721

Tel: 6452 1493

Fax: 6452 9153

GST Reg: 19-9900741 / Z

Claim Ref:

Lonpac Insurance Bhd

300 Beach Road ,#17-04/07 The Concourse Singapore 199555

Vehicle No

SMW5632T

Description

Chassis No

WBAKB22020CN7490

Make/Model:

BMW 730LI AT

Year

S/N

Date

**Unit Price** 

: 18.01.2021

Not Norhain

Using &

Russing After Paint

2-3day

Qty **Estimate Cost Of Repair** 

1	1pc	REAR BUMPER	Bu	\$ 2,376.00	s	2,376.00
2	1pc	REAR BUMPER ABSORBER GARNISH NO:13		\$ 786.84		786.84 7
3	1pc	REAR BUMPER LOWER LIP NO:3	Bulles	\$ 638.00	\$	638.00
4	1pc	REAR BUMPER RENTANNAL LH NO:11	Sy	\$ 52.80	\$	52.80 🗶
5	1pc	REAR BUMPER REFECTOR LH		\$ 93.50	\$	93.50 7
6	1pc	REAR BUMPER REVERSE SENSOR	Shap	\$ 424.60	\$	424.60
7	1pc	REAR FENDER LAMP LH	In	\$ 825.00	\$	825.00 X
8	2pc	REAR END PANAL	K	\$ 1,358.50	Ś	1,358.50 🗶
9	5pc	REAR EXHAUST PIPE OULER		\$ 198.00	Ś	198.00 7
10	1pc	REAR EXHAUST PIPE MOUNTING BRACKET	n	\$ 27.50	Ś	27.50 🗶
11	1pc	EXHAUST PIPE MOUNTING	54	\$ 71.50	\$	71.50
			5	9		
				/		

### **Labour Charges**

1	To check wiring & system function	¢	100.00	15%
2	To remove & refix rear reverse sensor	Š	120.00	6-1
3	To check & reset reverse sensor system function	Š	80.00	7
4	To conduct re-programme and setting of ecu systemto fault code	Š	180.00	7
6	To replace, repair & knocking accident rear portion rear bumper, chassis Ih rear tailgate, rear tyre panal and rear end panal	\$	1,000.00	30d
7	To respray rear bumper, rear tail gate, rear end panal, tyre panal n chassis Ih	\$	1,000.00	30d

**Grand Total** 

Wega Engineering Pte Ltd

Authorised Signature Leong Chee Kwong Mobile No: 84917768

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:

9332.24



SS17211F0003 / SIN MING AUTOCARE BFG PTE LTD ENTRY DATE & TIME: 15/01/2021 17:01 (SGT)
SUBMITTED BY: Serene Lim VERSION: 1 (15/01/2021 17:01 (SGT))

# SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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 witholding of material facts may allow insurance companies to repudiate

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.

Any false reporting may be referred to the Police for investigation.
 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.
 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

15/01/2021 17:01 (SGT) 15/01/2021 11:45 (SGT) Bukit Merah, Singapore ALONG BUKIT MERAH ROAD / HENDERSON ROAD Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMW5632T

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

TAN E WEI BERNARD

SXXXX400H

bernard@bmjworldwide.com

(Phone) +65-98329397

+65-98329397

VEHICLE PARTICULARS

Manufacturer

odel

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

**BMW** 

730li

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

**Policy Number** 

Cover Note Number

NTUC

Comprehensive

No

5120036441

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report SS17211F0003

TAN E WEI BERNARD SXXXX400H 03/04/1970 Outdoor

Page 1 of 17

**Driving Pass** ng experience Gender Mobile Number Alt. Phone Number **Email Address** Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

Collision - Head to Rear Clear Dry

19/10/1994

+65-98329397

Male

307705

Yes

No

26 YEARS AND 3 MONTHS

bernard@bmjworldwide.com

(Phone) +65-98329397

6 TAN SIM BOH ROAD

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident No 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) 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? Was notice of intended Prosecution given? If yes, against whom?

No No

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver Contact Number Address

Address complement Postcode Insurance Company Name

**GBA9238T** 

Commercial vehicle

Accident report SS17211F0003

Page 2 of 17

ETCH PLAN
tenderson to
9
31941
E-47
SCRIBE CIRCUMSTANCES OF THE ACCIDENT
On about 1145 I was travelling Jalan Rukit
On additional property of the state of the s
Merah. I was preparing to exit from a small
lane onto the main word . (I am car 4)
Reform T could divid off the War hit
THOUSE I TOMM CHINE TO IND. WALL BY
The fact is willing. The Childs Sales of the fact
was looking at the years road instead of my
car which was in front of Nim.
and given young was beginning as a proper over the control of the property of the control of the control of the
DECLARATION
I/We declare the foregoing particulars are true in every respect.
ASAC .
Policyhpider's Signatura  Driver's Signature  Date & Time:  Driver's Signature  (if-driver's not the policyholder)  Name: