

ASS. REC. BY: 7/2/21REF: CS/CTI 21001380/Rvd3

1 2794

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SLB 639Eat Workshop m/s PERFORMANCEof 303, ALEXANDER RDInsured: CTI

Policy No. _____

Claims No. _____

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: 67K

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLB 639EYr Regn: 2016 / NARType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: B.M.W 216D ACTIVE TOURER c.c. 1496Colour: GRY

A/C: Insured / Std / NI / NA

Sp. Reading: 68917

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBA 2B32070V 259831Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / SRim / STD A/Rim orTyre Size: F: 205/65R16

R: _____

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 26/01/2021D.O.I. 29/01/2021Survey held at PERFORMANCEDes. of Damages: FR / REAR / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

Repair limit - 28K

Date/Time, File Pass to?

☐

: Prelt. Report

☐

: Final Report

Date/Time, File Return to?

2)

Rep. Format: _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)

☐

: _____

Survey Fee: _____

Transportation: _____

\$ + RS. \$ _____

Photos _____

Others _____

TOTAL

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 Business Centre
Singapore 159944
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

Car in

Estimate No. : b1 57361
Date Estimated : 27/01/2021
Prepared By : Han Kwan Yong

Page No. : 1 of 6

- ESTIMATE REPAIR FOR -

Tuor Christian Daniel
370B Alexandra Road
#01-04 The Anchorage

Singapore 159955

- ACCOUNT - 40000

Cash Sales - Service
Singapore

| REGN. NO. | CHASSIS NO. | REGN. DATE | MODEL | MILEAGE |
|-----------|-------------------|------------|----------|---------|
| SLB639E | WBA2B32070V259831 | 28/03/2016 | 216d CAT | 0 |

DESCRIPTION

→ 1 day?

VALUE

To replace rear bumper, boot lid, tail panel, trunk floor panel including to pull & straighten both rear chassis, tail panel and trunk floor before cutting and to knock out dent area caused by the accident

5100 ~~11,050.00~~

To respray front bumper, rear bumper, boot lid, tail panel, rear left fender, rear right fender and boot compartment

4627 ~~5,672.00~~

To carry out body cavity preservation.
(Per panel).

100 ~~118.00~~

To carry out body cavity preservation.
(For cut panel).

451 ~~531.00~~

To remove and install boot compartment carpet and garnish to facilitate repair.

231 ~~271.00~~

To remove and install rear windscreen glass to transfer from old to new boot lid

676.00

To conduct water leak tests.

75.00

To replace bootlid smart opener control unit, top and bottom sensor line including program and conduct check for proper function.

561? ~~661.00~~

To transfer lock mechanism from old to new bootlid including conduct check on new bootlid central locking system for proper function.

451 ~~531.00~~

To replace front exhaust silencer including alignment system and conduct check for leak.

451? ~~531.00~~

To replace rear exhaust silencer including alignment system and conduct check for leak.

451? ~~531.00~~

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Fax. 64747770

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

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : b1 57361
Date Estimated : 27/01/2021
Prepared By : Han Kwan Yong

Page No. : 2 of 6

| REGN. NO. | CHASSIS NO. | REGN. DATE | MODEL | MILEAGE |
|-----------|-------------------|------------|----------|---------|
| SLB639E | WBA2B32070V259831 | 28/03/2016 | 216d CAT | 0 |

DESCRIPTION

To replace each diesel particulate filter including alignment and conduct check for leak.

VALUE
564.00

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

250 295.00

To supply front emboss number plate. *st*

83.00

Sundries

7 150.00

Total Labour 1: 21,839.00

| DESCRIPTION | QTY | PRIC | VALUE |
|--|-----|----------|----------|
| # CLAMPING BUSH ? | 1 | 54.60 | 54.60 |
| # RUBBER MOUNTING ? | 2 | 17.70 | 35.40 |
| V BAND CLAMP ? | 1 | 43.25 | 43.25 |
| GASKET ? | 1 | 9.85 | 9.85 |
| # EXCHANGE EXHAUST PIPE CATALY ? | 1 | 1,694.80 | 1,694.80 |
| # REAR SILENCER ? | 1 | 1,015.05 | 1,015.05 |
| EXCH DIESEL PARTICULATE FILTER EU5 ? | 1 | 3,746.35 | 3,746.35 |
| TAILPIPE TRIM BLACK CHROME ? | 1 | 113.85 | 113.85 |
| # HOLDER EXHAUST SYSTEM ? | 2 | 58.95 | 117.90 |
| TRUNK LID <i>st</i> | 1 | 1,216.40 | 1,216.40 |
| # Trunk floor ? | 1 | 445.65 | 445.65 |
| # INTERIOR TAIL TRIM ? | 1 | 281.90 | 281.90 |
| # TAIL PANEL <i>st</i> | 1 | 358.80 | 358.80 |
| # REAR BUMPER PANEL PRIMED (PD turn) | 1 | 1,050.65 | 1,050.65 |
| # RR BUMPER LH SIDE GUIDE ? | 1 | 61.65 | 61.65 |
| RR BUMPER RH SIDE GUIDE ? | 1 | 61.65 | 61.65 |
| # REAR BUMPER CARRIER <i>st</i> | 1 | 460.40 | 460.40 |
| SUPPORT ? | 1 | 45.75 | 45.75 |
| # RR BUMPER LH INNER SIDE GUID ? | 1 | 61.65 | 61.65 |
| RR BUMPER RH INNER SIDE GUIDE ? | 1 | 61.65 | 61.65 |
| GROMMET <i>re</i> | 2 | 0.80 | 1.60 |
| PLAQUE 74MM <i>re</i> | 1 | 71.95 | 71.95 |
| STRIKER BOOT LID <i>re</i> | 1 | 59.80 | 59.80 |
| # LOCK TRUNK LID <i>JAM</i> | 1 | 195.75 | 195.75 |
| # ACTUATION UNIT ? | 1 | 615.15 | 615.15 |
| REAR FLAP TOWING EYE PRIMED <i>MIS</i> | 1 | 43.25 | 43.25 |
| REAR BUMPER HEAT INSULATOR <i>re</i> | 1 | 60.90 | 60.90 |
| # TRUNK LID SEALING ? | 1 | 97.85 | 97.85 |
| SENSOR WIRE FOR SMART OPENER TOP ? | 1 | 46.55 | 46.55 |
| SENSOR WIRE FOR SMART OPENER BOTTOM ? | 1 | 51.20 | 51.20 |
| CONTROL UNIT SMART OPENER ? | 1 | 499.50 | 499.50 |
| BLIND RIVET AVIBVLB ? | 70 | 0.55 | 38.50 |
| SCREW (SF PLUS M5X15) <i>re</i> | 20 | 0.55 | 11.00 |

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Page No. : 3 of 6

| REGN. NO. | CHASSIS NO. | REGN. DATE | MODEL | MILEAGE |
|-----------|-------------------|------------|----------|---------|
| SLB639E | WBA2B32070V259831 | 28/03/2016 | 216d CAT | 0 |

| DESCRIPTION | QTY | PRIC | VALUE |
|--|-----|--------|-----------|
| (DG/SL) BODY ADHESIVE K5B (195ML) <i>na</i> ✓ | 2 | 336.75 | 673.50 |
| (DG) BODYWORK ADHESIVE K5A (50ML) <i>na</i> ✓ | 1 | 116.15 | 116.15 |
| (DG) CLEANER R1 (100ML) <i>na</i> ✓ | 2 | 26.15 | 52.30 |
| (DG/SL) W/SCREEN SEALANT (COLD 1 HOUR) <i>na</i> ✓ | 2 | 131.55 | 263.10 |
| PUNCH RIVET N4 <i>na</i> ✓ | 30 | 0.55 | 16.50 |
| (DG/SL)ADHESIVE PRIMER VP 206 (30ML) <i>na</i> ✓ | 1 | 27.85 | 27.85 |
| (S/L) SEAM SEAL 300ML <i>na</i> ✓ | 5 | 33.80 | 169.00 |
| Total Parts : | | | 14,048.60 |

Claims OD 3rd Party Uninsured losses / Direct Settlement

Regn No. _____ Claim No. _____
Date & Time 29/01/2021 @ 1150 Excess S\$ _____
Surveyor's Name Rasul Sign _____
Surveyor's Tel 90010068 Authorised Yes / No _____
Authorised Date _____ Time _____
RESURVEY PARTS PHOTO BY SURVEYOR Yes / No _____ PML Yes / No _____
Surveyor's E-mail _____
No. of Working Days Recommend 8 days

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:



| | | |
|----------------|---|-----------|
| Labour 1 | : | 21,839.00 |
| Parts | : | 14,048.60 |
| Labour 2 | : | 0.00 |
| Excess | : | 0.00 |
| Total GST @ 7% | : | 2,512.13 |
| Grand Total | : | 38,399.73 |

** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY **

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 | 27/01/2021 16:10 (SGT) |
| Date of Accident | 26/01/2021 08:00 (SGT) |
| Exact Location of Accident | AYE, Singapore |
| Additional Location Information | ALONG AYE (MCE) |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------|
| Vehicle Registration Number | SLB639E |
|-----------------------------|---------|

INSURED/POLICYHOLDER

| | |
|--------------------------|-----------------------|
| Is company? | No |
| Name Of Registered Owner | TUOR CHRISTIAN DANIEL |
| Passport No/FIN | GXXXX279U |
| Email Address | FAMCHTUOR@GMAIL.COM |
| Mobile Phone No | (Phone) +65-93388408 |
| Alternative Phone No | (Home) +65-90624369 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | BMW |
| Model | 216d |
| 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 | AGI |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | - |
| Cover Note Number | - |

DRIVER

| | |
|-----------------|--------------|
| Name of Driver | KIM KYUNGHEE |
| Passport No/FIN | GXXXX402M |
| Date Of Birth | 23/10/1969 |
| Occupation | Indoor |

Driving Pass
Driving 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

29/11/2015
5 YEARS AND 2 MONTHS
Female
(Phone) +65-90624369
-
FAMCHTUOR@GMAIL.COM
370B ALEXANDRA ROAD
#01-04 THE ANCHORAGE
159955
No
Spouse
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Chain Collision
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
3
Yes
Yes
Yes
1
Yes

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Traffic Police
(Phone) +65-65470000
(Fax) +65-65474900
10 Ubi Avenue 3 Singapore 408865
No
-

CIRCUMSTANCES OF ACCIDENT

SEE ATTACHED SKETCH PLAN

ATTACHMENT(S)

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

Yes
No
No

DETAILS OF OTHER VEHICLE PROPERTY

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

SKA2600U
Porsche
-
-
-
Private car
LIM KOON PARK
-

SS
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

-
-
-
-
-
-

DETAILS OF OTHER VEHICLE PROPERTY 2

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
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

SMM4839Z
Honda
-
-
-
Private car
-
-
-
-
-
-
-
-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

KIM KYUNGHEE
-
-
-
-
-
SLB639E
Yes
Yes

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)**

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.


X 

Policyholder's Signature
Date & Time:

X 

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

26/01/21 (4.49pm)


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

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report no: T/20210126/2061

DECLARATION

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

X 

Policyholder's Signature

Date & Time:

X 

Driver's Signature

(If driver is not the policyholder)

Date & Time:

26/01/21 (H. 49000)



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20210126/2061

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

1 of 4

Report No. T/20210126/2061

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------|
| Date/Time Report Made: 26/01/2021 15:08 | Vide Report No.: | Station Diary No.: |
|--|------------------|--------------------|

Informant's Particulars

| | | | | | |
|---|------------|------------------------------|---|----------------------------|--|
| Name of Informant: KIM KY | | | Address: APT BLK 370B ALEXANDRA ROAD #01-04 THE ANCHORAGE SINGAPORE 159955 | | |
| ID Type / ID No.: FIN NO / G5990402M | | | Contact No.: Home/Office: 90624369 Mobile: | | |
| Nationality: KOREAN, NORTH | | | Email: | | |
| Sex: Female | Age: 51 | Date of Birth: 23/10/1969 | Type of Informant: Driver | | |
| Race: Korean | | | Language: English | Institution / School Name: | |
| Occupation: Housewife | | | Driving Licence Information: Class: Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|---------------------------------|---|---|---|
| Type of Accident: | Injury Conveyed By Ambulance | Drink Drive: No | Date/Time of Accident: 26/01/2021 08:00 | Type of Location: Straight Road |
| Location: AYER RAJAH EXPRESSWAY | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Heavy |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: Yes |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|---------|--------------------------------------|--------|-----------|-----------------|
| SKA2600U | Car | PORSCHE | PANAMERA GTS | Black | | 0 |
| SLB639E | Car | BMW | 216D ACTIVE TOURER D/AB LED | Silver | | 0 |
| SMM4839Z | Car | HONDA | SHUTTLE 1.5G CVT | Blue | | 0 |



**SINGAPORE
POLICE FORCE**



T/20210126/2061

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 4

Report No. T/20210126/2061

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|---------------------|--|-----------------------------------|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | Unknown Driver | ID No. | NIL |
| Related Vehicle | SKA2600U (Car) | Contact No. | NIL |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | KIM KY | ID No. | G5990402M |
| Related Vehicle | SLB639E (Car) | Contact No. | 90624369 |
| Hospital/Clinic | NUH WARD 1 @ JURONG | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | 26/01/2021 | Date Discharge | 26/01/2021 |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Unknown Driver | ID No. | NIL |
| Related Vehicle | NIL | Contact No. | NIL |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

ON STATED DATE TIME AND LOCATION

ON 26/01/2021 AT ABOUT 0800 HRS. I WAS BEARING A VEHICLE PLATE NUMBER A (SLB639E) AND THE OTHER TWO PARTY WAS BEARING A VEHICLE PLATE NUMBER B (SMM4839Z), AND C (SKA2600U). I WAS TRAVELLING ALONG AYE(MCE) GOING HOME. AS I WAS ABOUT TO EXIT THE HIGHWAY, I NOTICE ALL THE VEHICLE WAS STOPING DUE TO TRAFFIC LIGHT AHEAD OF US, AND I WAS AT A STATIONARY MOOD AND OUT SUDDEN I FELT AND IMPACT FROM THE REAR



**SINGAPORE
POLICE FORCE**



T/20210126/2061

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

3 of 4

Report No. T/20210126/2061

CONTINUATION OF REPORT

OF MY VEHICLE, THE VEHICLE C (SKA2600U) COLLIDED ONTO ME AND ,AFTER THE IMPACT MY CAR COLLIDED THE VEHICLE INFRONT OF ME B (SMM489Z). THERE WHERE DAMAGES ON MY CAR AND I WAS CONVEY BY THE AMBULANCE AND WAS SENT TO HOSPITAL. THEREFORE I AM MAKING A POLICE REPORT AND FOR INSURANCE PURPOSE .



**SINGAPORE
POLICE FORCE**

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



T/20210126/2061

4 of 4

Report No. T/20210126/2061

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

TP /

SC MUHAMMAD SHAFFIY BIN ROSLAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt YAN MINGSHENG DANIEL

Contact No.: 65476252

Authentication Stamp

NP 168

Signature Of Informant:

Date/Time:

26/01/2021 15:08

Classification Of Case:



**SINGAPORE
POLICE FORCE**

Signature: _____

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|---|-------------------------------|
| Owner ID Type: | Foreign Identification Number |
| Owner ID: | 279U |
| Vehicle No.: | SLB639E |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 31 Jan 2021 |
| Vehicle Make: | B.M.W. |
| Vehicle Model: | 216D ACTIVE TOURER D/AB LED |
| Primary Colour: | Silver |
| Manufacturing Year: | 2015 |
| Engine No.: | 39529386B37C15A |
| Chassis No.: | WBA2B32070V259831 |
| Maximum Power Output: | 85.0 kW (113 bhp) |
| Open Market Value: | \$26,954.00 |
| Original Registration Date: | 28 Mar 2016 |
| First Registration Date: | 28 Mar 2016 |
| Transfer Count: | 2 |
| Actual ARF Paid: | \$19,736.00 |
| Inventory (ARF) - (ARF) - (ARF) - (ARF) | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 27 Mar 2026 |
| PARF Rebate Amount: | \$14,802.00 |
| Inventory (COE) - (COE) - (COE) - (COE) | |
| COE Expiry Date: | 27 Mar 2026 |
| COE Category: | E - Open Category |
| COE Period(Years): | 10 |
| QP Paid: | \$46,667.00 |
| COE Rebate Amount: | \$23,461.00 |
| Total Rebate Amount: | \$38,263.00 |

The information contained herein is correct as at 31 Jan 2021

OK

Silver

► BMW 2 Series 216d Active Tourer

Overview

Financial

Accessories

Similar

Research

Photos

Map



HAMILTON

AUTOMAR PTE LTD | AUTOBARN PTE LTD | CAPITAL PTE LTD

Member of:



Singapore
Vehicle
Traders
Association



2017
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MIND AWARD

| | | | |
|------------------------|---|------------------------|---|
| Price | \$67,800 | Fuel Type | Diesel (Euro 5 Engine and Above) |
| Depreciation ⓘ | \$11,250 /yr View models with similar depre | Reg Date | 24-Mar-2016 (5yrs 1mth 20days COE left) |
| Mileage | 90,000 km (18.5k /yr) | Manufactured ⓘ | 2015 |
| Road Tax ⓘ | \$1,082 /yr | Transmission | Auto |
| Dereg Value ⓘ | \$38,331 as of today (change) | OMV ⓘ | \$27,077 |
| COE ⓘ | \$45,504 | ARF ⓘ | \$19,908 |
| Engine Cap | 1,496 cc | Power | 85.0 kW (113 bhp) |
| Curb Weight ⓘ | 1,395 kg | No. of Owners ⓘ | 1 |
| Type of Vehicle | Hatchback | | |

Features

1.5L Twin Power Turbocharged Engine At 113 Bhp. Traction Control. Front-End Collision/Pedestrian/Lane
 De Auto LED/DRL Headlights. View specs of the BMW 2 Series Active Tourer Diesel (2015-2018)

