

ASS. REC. BY:

Steve

REF

CS/CT121007180/CVC

## 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: SMV 5665D

Policy No. DMPCSNW00113942000

Claims No. SNM21D203659/C02/TANKW

Sum Insured:

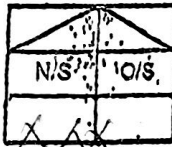
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Cum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Locked / Burnt or

Brake: Inorder / Jammed / Locked / Burnt or

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

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Date / Time

Action / Instruction

MIV-199K

2/8/21

Final fig \$7077 confirmed by email (Red 5141.30,42%)

Time/Time, File, Pass list



: Procl. Report



: Final Report

Time/Time, File Return list

3/8/21-Typist

Approved by: Merimen

Total Sum / L.P. / C: \$7077.00

Days Of Repair: 6

Resurvey No. of Trip: 1

Add Fee:



: Site Insp



: Interview



: Tech. Inve



: Wash and

(\$

(\$

(\$

(\$

Survey Fee:

Transportation

\$ - RS - SI

Phone

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

Estimate No. : b1 58853  
Date Estimated : 02/07/2021  
Prepared By : Chua Kee Sin

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -  
You Jianming  
23 Sembawang Crescent  
#12-07

- ACCOUNT - 40000  
Cash Sales - Service  
Singapore

SINGAPORE 757054

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMS9998H	WBAJA12060BJ21248	31/05/2019	520i	16573

### DESCRIPTION

Replace rear bumper include attachment etc and repair on rear boot lid

1275 2,125.00

Painting rear boot lid and rear bumper

1972 2,076.00

To check electrical wiring system and lighting at the rear section for proper function.

168 177.00

To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.

168 177.00

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

257 271.00

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

? 531.00

Sundries.

? 150.00

Total Labour 1: 5,507.00

DESCRIPTION	QTY	PRIC	VALUE
CLAMPING BUSH	1	60.90	60.90
TAILPIPE TRIM BLACK CHROME D=80MM	2	159.20	318.40
REAR SILENCER	1	1,353.40	1,353.40
LEFT PROTECTION FOIL	1	13.50	13.50
RIGHT PROTEC	1	13.50	13.50
REAR BUMPER CARRIER	1	582.55	582.55
REAR BUMPER BOTTOM REINFORCEMENT	1	75.90	75.90
REAR BUMPER CENTRE GUIDE	1	67.80	67.80
REAR BUMPER TRIM STRIP	1	116.60	116.60
REAR BUMPER TOWING EYE FLAP PRIMED	1	52.90	52.90
REAR BUMPER PANEL PRIMED (PDC/PMA)	1	1,627.25	1,627.25
SET MOUNTING PMA SENSOR	1	69.70	69.70
EMBLEM GROMMET	2	0.85	1.70

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GST REG. NO : M2 - 0020081 - X

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Date Estimated : 02/07/2021  
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Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMS9998H	WBAJA12060BJ21248	31/05/2019	5201	16573

DESCRIPTION	QTY	PRIC	VALUE
LETTERING 5201 / ncc	1	64.75	64.75
PLAQUE 74MM / ncc	1	71.95	71.95
REAR SILENCER LH HEAT INSULATION / n	1	98.90	98.90
REAR LH LIGHT IN THE SIDE PANEL / CUT	1	641.15	641.15
REAR LH LIGHT IN TRUNK LID / CUT	1	378.70	378.70
LH TAIL LIGHT FINISHER TRUNK LID / X	1	35.15	35.15
ULTRASONIC SENSOR BLACK / n	4	251.20	1,004.80
DECOUPLING RING PDC TORQUE CONVERTER / ncc	4	5.15	20.60

Total Parts : 6,670.10

Steve (LKK)  
9/7/21, 1239an

WIL AL  
5 dpr  
P/P  
My Bel Sy

Claims OD / 3rd Party / Uninsured losses / Direct Settlement	
Regn No. _____	Claim No. _____
Date&Time _____	Excess S\$ _____
Surveyor's Name _____	Sign _____
Surveyor's Tel _____	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 _____	

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

- This 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	:	5,507.00
Parts	:	6,670.10
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	852.40
Grand Total	:	13,029.50

\*\* 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 Submission	29/06/2021 16:36 (SGT)
Date of Accident	28/06/2021 16:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CENTRAL EXPRESSWAY (LAMPPOST 208F)
Country/State of Loss	Singapore

Vehicle Registration Number	SMS9998H
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YOU JIANMING
NRIC No	SXXXX002E
Email Address	jianming1816@gmail.com
Mobile Phone No	(Phone) +65-94387857
Alternative Phone No	+65-94387857

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	520i
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
Transmission	Auto
CC	1998

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00094562100
Cover Note Number	31/05/21 - 30/05/22

### DRIVER

Name of Driver	YOU JIANMING
NRIC No	SXXXX002E

Date Of Birth	12/07/1979
Occupation	Indoor
Date Of Driving Pass	05/10/2009
Driving experience	11 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94387857
Alt. Phone Number	+65-94387857
Email Address	jianming1816@gmail.com
Address	BLK 23 SEMBAWANG CRESCENT #12-07
Address complement	-
Postcode	757054
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

#### 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 vehicle 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?	Yes
Police Station Name	Sembawang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005549999
Police Station Address	4 Sembawang Crescent Singapore 757633
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO NOTICE OF COMPLIANCE ATTACHED.

#### 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

Vehicle Registration Number	SMV5665D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	PEH HOCK SENG

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

SXXXX513D  
(Phone) +65-93848458

-  
-  
-  
-  
-  
-  
-

SKETCH PLAN

1 VEHICLE NO: SMS 9998H  
 2 INSURER CO: Chiron  
 3 ACCIDENT DATE & TIME: 28/6/21 @ 16:45

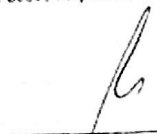
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- 1 Please report correctly the details of the accident to speed up the claims process
- 2 This Form must be completed by the Policyholder and/or the Authorised Driver
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- 6 The report will be forwarded 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 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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

 28/6/21  
 Witnessed by Reporting Centre Personnel (YS)

Sketch Plan

PLEASE TURN OVER

