

ASS. REC. BY:

Steve

REF

CS/CT1210074.34/C

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

at

Insured:

Policy No.

Claim No.

Sum Insured:

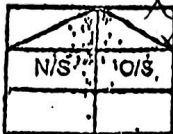
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

SIA / PR Sent:

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:

SKK 9789L

Yr Regn:

31/12/18

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

Truck / Trailer or

Make:

BMW 530i

C.C.

1998

Colour:

Grey

A/O:

Insured / Std / N / N

Sp. Reading

52264

T/Radio:

Insured / Std / N / N

Eng/No:

C/No:

WBATR 329198T16421

Gen. Cond: Good / Fair / Poor / Bught

Steering: In order / Jammed / Locked / Burnt or

Brake: In order / Jammed / Locked / Burnt or

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

Tyre Size:

F:

245/40R19

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

5/7/21

D.O.A.

26/7/21

Survey held at

Performance Motor

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

Frt RH

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

Date / Time

Action / Instruction

NIV-190K

Date/Time, File, Post to?



: Prel. Report



: Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Insp (\$



: Weekend (\$

S + RS \$

Previous

Others

TOTAL

Approved:

Date/Time, File, Post to?

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



Steve (LKK)
26/7/21, 11:00am

WL AL
5 dys
P/P, R/L BL L

GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : b1 58901
Date Estimated : 07/07/2021
Prepared By : Foong Shiuh Jye

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -
KPW Engineering Pte Ltd
7 Gambas Crescent
#03-23

Singapore 757087

- ACCOUNT - 40000
Cash Sales - Service
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKK9289L	WBAJR32010BJ16401	31/12/2018	530i	46024

DESCRIPTION

To replace front bumper including to knock out dented area caused by the accident

1-5

1275

VALUE
2,975.00

To respray front bumper and front right fender

1826

1,923.00

To replace right headlight.

456

481.00

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

168

177.00

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

148

177.00

Sundries.

?

150.00

Total Labour 1:

5,883.00

DESCRIPTION

C CLIP FOR PLASTIC NUT

111

QTY

PRIC

VALUE

RH FOG LAMP SUPPORT

?

14

1.10

15.40

RH BUMPER GUIDE

?

1

65.35

65.35

FRT BUMPER PANEL PRIMED (PMA

?

1

16.95

16.95

EXPANDING RIVET D=8MM

111

1

1,384.80

1,384.80

RH HEADLIGHT LED AHL HIGH (ICON LIG

111

10

1.10

11.00

DECOUPLING RING PDC TORQUE CONVERTER

111

1

4,887.60

4,887.60

PDC SENSOR SOPHISTOGRAU II W

?

1

5.15

5.15

383.15

383.15

Total Parts :

6,769.40

Supplementary Chrome foglamp strip

Performance Motors Limited

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GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : b1 58901
Date Estimated : 07/07/2021
Prepared By : Foong Shiuh Jye

Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKK9289L	WBAJR32010BJ16401	31/12/2018	5301	46024

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	:	5,883.00
Parts	:	6,769.40
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	885.67
Grand Total	:	13,538.07

** 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 willful 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	07/07/2021 17:58 (SGT)
Date of Accident	05/07/2021 05:00 (SGT)
Exact Location of Accident	649A Woodlands Ring Rd, Singapore 731649
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK9289L
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KPW ENGINEERING PTE LTD
Company Reg No	2XXXXX848H
Email Address	KPWENGRG@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-65709693
Alternative Phone No	+65-65709693

VEHICLE PARTICULARS

Manufacturer	BMW
Model	530i
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	2000

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SI20V15065/VPC/R02
Cover Note Number	-

DRIVER

Name of Driver	LEE KOK PUN
NRIC No	SXXXX547D



Date Of Birth	13/11/1969
Occupation	Indoor
Date Of Driving Pass	25/08/1989
Driving experience	31 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-65709693
Alt. Phone Number	-
Email Address	KPWENGRG@SINGNET.COM.SG
Address	BLK 652 WOODLANDS RING ROAD #10-376
Address complement	-
Postcode	730652
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	DIRECTOR
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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

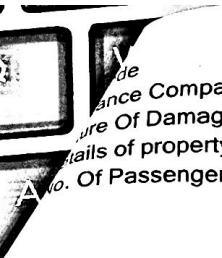
REFER TO ATTACH.

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	GBD1866S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-



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

-
China Taiping Insurance (Singapore) Pte. Ltd.
-
-
-

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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 willful 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.



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.:

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I collect my vehicle at multi-storey carpark. In
 I noticed there is a note left on my windscreen, saying about
 my car was tagged by GBD1866S.

DECLARATION

I/we declare the foregoing particulars are true in every respect

Policyholder's Signature
 Date & Time:

[Signature]

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

[Signature]

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

[Signature]