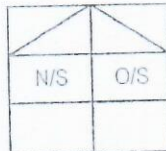


ASSIGNMENT

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. _____
 Claims No. **SNM21D204079/C02**
 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 Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: **9** 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: **5m22966J** Yr/Mgr: **2014 Jan.**
 Type: M.Cat / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: **BMW 520i** Co: **1997**
 Colour: **Bronze** A/C: Insured / Std / Nil / NA
 Sp. Reading: **118894** T/Radio: Insured / Std / Nil / NA
 Eng/No: _____
 C/No: **WBASA32090D334907**
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Order / Jammed / Leaked / Burnt or
 Brake: Order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: **275/35R19**
 R: **275/35R19**
 BS / DUN / EXNOVA GY FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front _____ Rear _____
 R/Bal. **06** mm R/Bal. **06** mm
 L/Bal. **06** mm L/Bal. **06** mm
 D.O.A. _____ D.O.I. **26/07/21**
 Survey held at **HS Twinlac**
 Des. 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
TP Chirn

27/07/21@3.47pm Informed Jenny Lew, we are pending for estimate from repairer.
 21/10/21@3.46pm revised to Jenny Lew via Merimen.

MV: **68K**
 PV: **51.5K**
 Nett: **16.5K**

LS \$16500, 9 days (Red \$19765.92, 55%)

21/10 Typist ☐ : Preli. Report

☐ : Final Report

Date/Time File Return to?

Days Of Repair: **9**

Resurvey No. of Trip: **1**

Survey Fee:

Transaction:

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Insp (\$)

☐ : Weekend (\$)

MER-TP

LS \$16500

Temp. Temp / L/S / C

SS1Y217N000D / SME MOTOR PTE LTD
ENTRY DATE & TIME: 23/07/2021 17:19 (SGT)
SUBMITTED BY: Chia Pei Ying
VERSION: 1 (23/07/2021 17:19 (SGT))



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	23/07/2021 17:19 (SGT)
Date of Accident	22/07/2021 18:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TWDS TUAS BEFORE THOMSON FLYOVER
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ2966J
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SUMARNI BINTE SULEIMAN
NRIC No	SXXXX409A
Email Address	sumarni23@hotmail.com
Mobile Phone No	(Phone) +65-97940133
Alternative Phone No	+65-97940133

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	2000

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5122478563
Cover Note Number	-

DRIVER

Name of Driver	MOHAMMED KAMAL BIN SUPANDI
NRIC No	SXXXX484H



Date Of Birth	10/10/1974
Occupation	Indoor
Date Of Driving Pass	04/09/2008
Driving experience	12 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90692174
Alt. Phone Number	-
Email Address	voltz_1010@hotmail.com
Address	28 CHO A CHU KANG ST 64 #02-03
Address complement	-
Postcode	689097
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	IFFA DIYANAH BINTE MOHAMED KAMAL
Gender	Female

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

ON 22/07/2021 AT 1815HRS, I WAS TRAVELLING IN MY VEHICLE (SMZ2966J) ALONG PIE TOWARDS TUAS BEFORE THOMSON FLYOVER ON THE EXTREME RIGHT. I SLOWED DOWN AND STOPPED DUE TO TRAFFIC JAMMED AHEAD. SUDDENLY, A CAR (SLP8827C) FROM BEHIND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. THE IMPACT WAS SO STRONG THAT PUSHED MY VEHICLE FORWARD AND CAUSED MY VEHICLE TO COLLIDE ONTO THE VEHICLE AHEAD OF ME.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP8827C
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMA2941L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE C
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLC9225B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE D
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMMED KAMAL BIN SUPANDI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMZ2966J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	IFFA DIYANAH BINTE MOHAMED KAMAL
------------------------	----------------------------------



Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SMZ2966J
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

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 QIA Records Management Centre established by the General Insurance Association of Singapore (QIA) 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 if needed.

6. 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 be 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers, law enforcement firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) protecting, handling and/or dealing with my claims concerning the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating this 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 entail disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelops/postal 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 enforcement firms, may be 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 also be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law enforcement firms), which may be used 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

Witnessed by Reporting Centre Personnel

Sketch Plan

(A) SMZ 2966J
(B) 9LP 8827C
(C) SMA 2941L
(D) 9LC 9225B



P12 towards Tuas before Thomson Flyover

SKETCH PLAN #2

Describe Circumstances of the Accident

On 22/07/2021 at @ 18:15 hrs, I was travelling in my vehicle (SM2 2966J) along PIE towards Inas before Thompson Flyover on the extreme right. I slowed down stopped due to traffic jammed ahead. Suddenly, a car (SLP 8837C) from behind collided onto the rear portion of my vehicle. The impact was so strong that pushed my vehicle forward and caused my vehicle to collide onto the vehicles ahead of me.

Declaration

I/We declare the foregoing particulars are true & correct to the best of my/our knowledge.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC

Owner ID: 409A

Vehicle Details

Vehicle No.: SMZ2966J

Vehicle to be Exported: No

Intended Deregistration Date: 26 Jul 2021

Vehicle Make: B.M.W.

Vehicle Model: 520i AT D/AB 2WD 4DR LED NAV

Primary Colour: Silver

Manufacturing Year: 2013

Engine No.: A080C659N20B20B

Chassis No.: WBA5A32090D334907

Maximum Power Output: 135.0 kW (181 bhp)

Open Market Value: \$46,962.00

Original Registration Date: 28 Jan 2014

First Registration Date: 28 Jan 2014

Transfer Count: 1

Actual ARF Paid: \$52,747.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 27 Jan 2024

PARF Rebate Amount: \$31,648.00

Intended COE Rebate Details

COE Expiry Date: 27 Jan 2024

COE Category: B - Car (1601cc & above)

COE Period(Years): 10

QP Paid: \$79,000.00

COE Rebate Amount: \$19,771.00

Total Rebate Amount: \$51,419.00

The information contained herein is correct as at 26 Jul 2021

OK



Get up to **\$200** cashback
with HSBC Revolution Credit Card.

bmw 520

Price Range

Depreciation

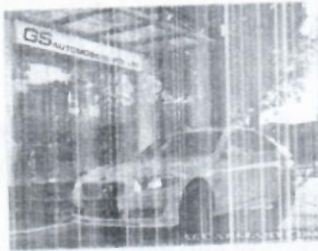
> 7 year(s)

Vehicle Type

Used Car Comparison

--- Comparing 4 Vehicles ---

BMW 5 Series 520i



Clear All

Add to Shortlist

Back to search result

BMW 5 Series 520i Highline



Add to Shortlist

BMW 5 Series 520d



Add to Shortlist

BMW 5 Series 520i



Add to Shortlist

CAR DETAILS

	BMW 5 Series 520i	BMW 5 Series 520i Highline	BMW 5 Series 520d	BMW 5 Series 520i
Price	\$54,800	\$61,800	\$53,000	\$74,000
Instalment	\$1,823	\$1,820	\$1,666	\$1,677
Registration Date	24-Jun-2013	26-Aug-2013	29-Nov-2013	22-May-2014
Manufactured	2013	2013	2013	2013
Mileage	-	119,000 km	-	-
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,997 cc	1,997 cc	1,995 cc	1,997 cc
Road Tax	\$1,210 /yr	\$1,210 /yr	\$1,806 /yr	\$1,210 /yr
Power	135.0 kW (181 bhp)	135.0 kW (181 bhp)	135.0 kW (181 bhp)	135.0 kW (181 bhp)
Curb Weight	1,610 kg	1,615 kg	1,700 kg	1,615 kg
Features	Powerful And Reliable 2.0L Twin Turbo Engine. 8 Speed With Paddle Shifters, Keyless Entry /Go, SRS Airbags.	Powered By 2L Inline 4 Cylinder TwinPower Turbocharge Engine Producing 181bhp, 8 Speed Auto Transmission With Paddle Shifts, Keyless Start/Stop/Entry	Diesel Engine, Producing 181BHP, Fuel Efficiency, Keyless Entry, Reverse Camera, Multi-Steering Wheel And Multi-Zone Aircon, Soft Close.	The 520 Is A Fine High-Performance Luxe Cabin Makes In A Limousine, With
Accessories	Factory Fitted Navigation, Bluetooth Telephone, Leather Seats, Sports Rims, Kick Boot Release, 19" Hamann Rims.	Digital Odometer Display, iDrive With Bluetooth And Navi, Multi Control Steering With Paddle Shifters, All Round Park Sensors, Front Electric Seats.	Front And Back Recording Cameras, Local Map, Leather Seats, Digital Cluster, NBT System, With Reverse Camera, Live Traffic Updates, DVD Motion.	Front & Reverse Sports Rims, JBT B LED Headlights, Cr Shifters, Elec Tailg
Description	Owner Consignment Unit, Viewing By Appointment Only. High / Flexible Loan Solution. Trade In Welcome! Original Stock Condition. Call/WhatsApp Our Sales Consultant Now To Arrange For A Viewing Before It's Gone!	Facelifted LCI Model. High APF Value. Car Well Maintain And Most Of Worn Out Parts I Have Replace It. No Sticky Handle. Loan Car Be Arrange! Consignment Agent Do Not Contact Me. I'm Open To Trade In.	Luxury Yet Spacious 520D, With An Excellent Condition, Wear & Tear Replaced By Reputable Workshop (Garage R). Repaired Receipt Provided, 20Gb Hard Disk For Music Storage, Stock Condition, View To Believe, STA Evaluation Are Welcome, Interest From 1.88% Only, Contact Our Friendly Sales Executive To Help You With The Best Deal.	All Wear And Tear Receipts. Last Serv By Trusted Workshop Pipes, AC Fan+Con All Replaced! The 5 Bimmers Most Popular Reliable+Luxurious Inside+Out! High 1 Loan Plans! Viewing
COE	\$67,304	\$83,001	\$79,300	\$70,002
OMV	\$40,186	\$46,345	\$45,077	\$47,895
ARF	\$43,261	\$51,883	\$45,108	\$54,053
Depreciation	\$17,370 /yr	\$17,220 /yr	\$17,270 /yr	\$16,650 /yr
No. of Owners	2	3	2	2