

ASS. REC. BY:

Steve 1 REPT CS/CTI 21008446/K

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

Insured:

Policy No.

Claims No.

SNM21D204407/C02

Sum Insured:

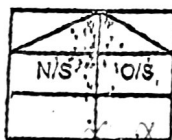
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Est. or Market Value:

IDAC Accident Report

Consistent? : Yes or No

SIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5 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:

SMR 6926R

Yr Regn:

17/1/20

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

Truck / Trailer or

Make:

BMW 216

C.C.

1499

Colour:

Blue

A/C:

Insured / Std / Nil / N

Sp. Reading

23907

T/Radio: Insured / Std / Nil / N

Eng/No:

C/No:

WBA 2 X 977 437 E 31158

Gen. Cond: Good / Fair / Poor / Burnt

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:

205/55R17

R:

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

TOYO / YOKO or B

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

S

mm

L/Bal.

S

mm

D.O.A.

6/8/21

D.O.A.

17/8/21

Survey held at

Performance Motor

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

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

Date / Time

Action / Instruction

MV-114K

18/08/21 @ 1.54pm revised to Jacqueline Tan via Merimen.

26/08/21 Steve finalised with Mohd Sanif final fig \$7714.75, 5 days (Red \$6045.35, 44%)

Date/Time, File, Page No.



: Prel. Report

27/08 Typist



: Final Report

Date/Time, File, Page No.

Days Of Repair:

5

Resurvey No. of Trip:

1

Survey Fee:

Transportation

\$ 75.00

Phone

Others

TOTAL

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Inve (%)



: Weekend (%)

Date/Time, File, Page No.

MER-TP

Date/Time, File, Page No.

7714.75

BMW Dealer

Performance Motors Limited

A Sime Darby Motors Company
Co. Reg. No. 197401559K GST Reg. No M2-0020081-X
Toll-Free Number (1800 2255269)

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Fax: 64747770

280, East Coast Road
East Coast Centre
Singapore 438180
Fax: 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Fax: 64796601 (After Sales)
64796624 (Motorrad)



17/8/2021
Sunny day
9am - 3pm

GST REG. NO : M2 - 0020081 - X

E S T I M A T E

Estimate No. : b1 59181
Date Estimated : 11/08/2021
Prepared By : Chua Kee Sin

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -
LEOW KWOK LEONG JIMMY
BLK 416 CANBERRA ROAD
#12-379

SINGAPORE 750416

- ACCOUNT - 40000
Cash Sales - Service
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMR6926R	WBA2X920407F37158	17/01/2020	216i Active Tourer	19942

DESCRIPTION	VALUE
Replace rear bumper, rear boot lid include remove attachment etc	1700 2,125.00
Painting rear boot lid, rear tail panel and rear bumper	1826 2,666.00
To replace rear windscreen glass.	574.00
To conduct water leak tests.	75.00
To supply and install rear windscreen solar film.	504.12 531.00
To remove and install boot compartment carpet and garnish to facilitate repair.	257 271.00
To check electrical wiring system and lighting at the rear section for proper function.	168 177.00
To carry out body cavity preservation. (Per panel).	112 118.00
Sundries.	150.00

Total Labour 1: **6,687.00**

DESCRIPTION	QTY	PRIC	VALUE
TRUNK LID	1	1,216.40	1,216.40
RR BUMPER RH SIDE GUIDE	1	161.15	161.15
REAR BUMPER CARRIER	1	483.40	483.40
SUPPORT	1	45.75	45.75
RR BUMPER RH INNER SIDE GUIDE	1	161.15	161.15
LH PROTECTION FOIL	1	5.65	5.65
RH PROTECTION FOIL	1	5.65	5.65
REAR BUMPER TRIM STRIP (BLACK)	1	88.20	88.20
REAR BUMPER PANEL PRIMED (LINES PDC	1	1,050.65	1,050.65
SET MOUNTS PDC SENSOR REAR	1	61.00	61.00
LETTERING 216 I	1	64.75	64.75

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Singapore 159944
Fax: 64794401 (AfterSales)
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

Page No. : 2 of 5

Estimate No. : b1 59181
Date Estimated : 11/08/2021
Prepared By : Chua Kee Sin

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMR6926R	WBA2X920407F37158	17/01/2020	216i Active Tourer	19942

DESCRIPTION	QTY	PRIC	VALUE
GROMMET / <i>nrc</i>	2	0.80	1.60
PLAQUE 74MM / <i>nrc</i>	1	71.95	71.95
STRIKER BOOT LID / <i>X</i>	1	60.10	60.10
LOCK TRUNK LID / <i>X</i>	1	195.75	195.75
BUMP STOP / <i>X</i>	10	3.20	32.00
REAR FLAP TOWING EYE PRIMED / <i>CRU</i>	1	43.25	43.25
REAR WINDOW ESG / <i>n</i>	1	657.60	657.60
TRUNK LID SEALING	1	97.85	97.85
REAR RH LIGHT IN THE SIDE PANEL / <i>X</i>	1	376.30	376.30
REAR RH LIGHT IN TRUNK LID / <i>X</i>	1	263.40	263.40
RH GUTTER STRIP / <i>n</i>	1	53.30	53.30
DECOUPLING RING PDC TORQUE CONVERTER / <i>nrc</i>	4	5.15	20.60
ULTRASONIC SENSOR IMPERIALBLAU(WA89)	4	371.20	1,484.80
SET ADHESIVE PADS FOR ACE 2.0 / <i>nrc</i>	1	43.65	43.65
(DG) CLEANER R1 (100ML) / <i>nrc</i>	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR) / <i>nrc</i>	2	131.55	263.10
(DG/SL)ADHESIVE PRIMER VP 206 (30ML) / <i>nrc</i>	1	27.85	27.85
Total Parts :			7,063.00

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 _____

W/L PL

P/P

My Bel SL

S dys

- To resurvey before/after spray painting
- To display damaged parts, 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: _____

Labour 1	:	6,687.00
Parts	:	7,063.00
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	962.50
Grand Total	:	14,712.50

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

** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **

SA0N21870001-01: Automotive Repair Centre Pte Ltd
ENTRY DATE & TIME: 07/08/2021 11:26 (SGT)
SUBMITTED BY: PONG JIA JUN OSCAR
VERSION: 2 (07/08/2021 09:18 (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 Authorized 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.

REPORT SUMMARY

Date of Submission	07/08/2021 11:26 (SGT)
Date of Accident	06/08/2021 22:48 (SGT)
Exact Location of Accident	7 Paya Lebar Rd, Singapore 409002
Additional Location Information	JUNCTION OF AIRPORT ROAD AND EUNOS LINK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR6926R
INSURED POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LEOW KWOK LEONG JIMMY
NRIC No	SXXXX075C
Email Address	mr.jimmyleow@gmail.com
Mobile Phone No	(Phone) +65-96513993
Alternative Phone No	+65-96513993

VEHICLE PARTICULARS

Manufacturer	BMW
Model	216i
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1499

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2021-00000588
Cover Note Number	-

DRIVER

Name of Driver	LEOW KWOK LEONG JIMMY
NRIC No	SXXXX075C

Date Of Birth	26/04/1980
Occupation	Indoor
Date Of Driving Pass	07/07/1999
Driving experience	22 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96513993
Alt Phone Number	+65-96513993
Email Address	mr.jimmyleow@gmail.com
Address	BLK 416 CANBERRA ROAD #12-379
Address complement	-
Postcode	750416
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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

Vehicle Registration Number	SMW7115G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
NRIC No	SXXXX504E
Contact Number	(Phone) +65-97511229
Address	-

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

*

*

*

*

*

*

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.
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- 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' 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.

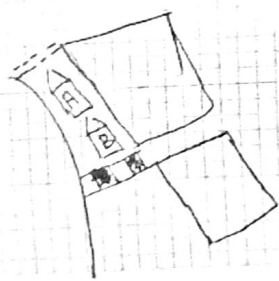


[Signature] 01/09/2021
Policyholder's Signature / Date & Time
9.30am

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A8 SMR 6926R
B8 SMW 71154

Junction of Airport Road and Eunos Link

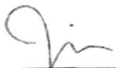
SKETCH PLAN #2

Describe Circumstances of the Accident

On 06 August 2021, around 2248, at the junction of Airport Road and Euros Link, I was making a left turn from Airport Road to Euros Link using the Give Way lane. I made a stop as there was an incoming vehicle from the right on Euros Link. The behind vehicle, SMW 715G, hit the back of my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.

 07/08/2021
Policyholder's Signature / Date & Time
9:30am

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


Witnessed by Reporting Centre Personnel