

ASS. REC. BY:

REF:

AGU 210110911K9

Kenneth

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.

Sum Insured:

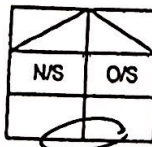
Excess:

(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:

3-6

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SMT 1016P Yr Regn: 06, 18

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

Truck / Trailer or

Make:

BMW

216d

c.c

1498

Colour

M. Grey

A/C: Insured / Std / NI / NA

Sp. Reading

70183

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WBA2B320XOV926388

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / RIM or

Tyre Size:

F:

205/60R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

3

mm

R/Bal.

9

mm

L/Bal.

3

mm

L/Bal.

9

mm

D.O.A.

27/10/21

D.O.I.

1/11/2021

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

EST NOT ready

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS. \$

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Thiam Heng Huat Pte Ltd

176 Sin Ming Drive #05-14 Sin Ming Autocare Singapore 575721

Mobile: 82636295 Email: thiamhenghuat@gmail.com

Make/Model: BMW 216D ACTIVE TOURER

Engine/Chassis No.: WBA2B320X0V926388

Date of accident:

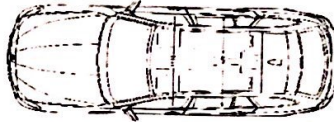
Damaged area: Rear

Date: 29/10/2021

Claim Type: TP

VRN: SMT1016P

Not Authorized
L1Ry &
Resony After Poring
5-6 days



List items				
S/N	Parts description	QTY	UNIT PRICE	AMOUNT
1	Tailgate	1	\$ 1,892.30	\$ 1,892.30
2	Tailgate "BMW" logo	1	\$ 89.00	\$ 89.00
3	Tailgate hinge	2	\$ 118.00	\$ 236.00
4	Tailgate outer moulding	1	\$ 793.00	\$ 793.00
5	Tailgate windscreen moulding	1	\$ 180.00	\$ 180.00
6	Tailgate windscreen inner seal	1	\$ 78.00	\$ 78.00
7	Tailgate damper	2	\$ 175.00	\$ 350.00
8	Tailgate inner trim	1	\$ 561.60	\$ 561.60
9	Tailgate lamp	2	\$ 399.40	\$ 798.80
10	Tailgate lamp inner seal	2	\$ 32.00	\$ 64.00
11	Taillamp	2	\$ 789.40	\$ 1,578.80
12	Taillamp inner seal	2	\$ 40.00	\$ 80.00
13	Rear bumper upper	1	\$ 1,563.40	\$ 1,563.40
14	Rear bumper side retainer	2	\$ 80.00	\$ 160.00
15	Rear bumper attachment retainer	2	\$ 60.00	\$ 120.00
16	Rear bumper lower	1	\$ 930.00	\$ 930.00
17	Rear bumper inner bracket	1	\$ 578.00	\$ 578.00
18	Rear bumper tow cover	2	\$ 48.00	\$ 96.00
19	Rear bumper reinforcement	1	\$ 782.00	\$ 782.00
20	End panel	1	\$ 981.40	\$ 981.40
21	End panel top trim	1	\$ 387.70	\$ 387.70
22	End panel bottom trim	1	\$ 179.00	\$ 179.00
23	Tailgate weatherstrip	1	\$ 285.00	\$ 285.00
24	Rear fender inner trim	2	\$ 396.00	\$ 792.00
25	Tools compartment top board	1	\$ 414.00	\$ 414.00
26	Tools compartment side board	2	\$ 165.00	\$ 330.00
27	Tailgate inner lock	1	\$ 254.00	\$ 254.00
28	Tailgate inner lock striker	1	\$ 89.00	\$ 89.00
29	Rear floor panel	1	\$ 1,012.00	\$ 1,012.00
30	Tailgate release sensor	1	\$ 395.00	\$ 395.00

Repair Estimate

31	Tailgate release sensor module	1	\$ 532.00	\$ 532.00
			Subtotal	\$ 16,582.00
			List discount	5.00%
			Total	\$ 15,752.90

Special nett items				
No.	Parts description	QTY	UNIT PRICE	AMOUNT
1	Tailgate inner trim clips	10	\$ 5.50	\$ 55.00
2	Taillamp clips	6	\$ 5.50	\$ 33.00
3	Rear bumper clips	10	\$ 5.50	\$ 55.00
4	End panel top trim clips	6	\$ 5.50	\$ 33.00
5	End panel bottom trim clips	6	\$ 5.50	\$ 33.00
6	End panel sealant	1	\$ 100.00	\$ 100.00
7	Reverse sensor	3	\$ 280.00	\$ 1,120.00
8	Reverse camera	1	\$ 450.00	\$ 450.00
9	Rear licence plate & frame	1	\$ 55.00	\$ 55.00
10	Rear windscreen sealant	1	\$ 100.00	\$ 100.00
11	Rear fender inner trim clips	12	\$ 4.50	\$ 54.00
12	Rear floor panel sealant	1	\$ 100.00	\$ 100.00
13	Sundries	1	\$ 50.00	\$ 50.00
			Total	\$ 2,238.00

Labour			
No.	Description	Work unit	Amount
1	To dismantle / renew the accident damaged portion. To panel beat, reshape, straighten, orientate and align repair / replacement parts.	8	\$ 1,600.00
2	To disconnect rear wire harness of electrical components to facilitate repairs, reconnect and check functions including taillamp lightings.	0.25	\$ 50.00
3	To remove, refit tailgate components to replace tailgate, check and re-adjust close gap, alignment and water seepage.	0.5	\$ 100.00
4	To remove and refit rear windscreen to facilitate repair work.	0.75	\$ 150.00
5	Supply spray paint material and necessary items to respray affected area / panel.	8	\$ 1,600.00
6	To rust proof all affected portions after repair.	0.5	\$ 100.00
		Total labour	\$ 3,600.00

Estimate Grand Total	\$ 21,590.90
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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:

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	29/10/2021 11:27 (SGT)
Date of Accident	27/10/2021 18:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TOWARDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT1016P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ZAITON BINTE SAMAT
NRIC No	SXXXX175E
Email Address	FANDYFND94@HOTMAIL.COM
Mobile Phone No	(Phone) +65-91003931
Alternative Phone No	+65-91003931

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
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5118529333-01
Cover Note Number	-

DRIVER

Name of Driver	ZAITON BINTE SAMAT
NRIC No	SXXXX175E

SKETCH PLAN

IMPORTANT NOTICE

1. Please read carefully the details of the accident to speed up the claim process.
2. This form must be completed by the Reporting Party and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may void insurance coverage to particular policy holder(s).
4. The insured's acceptance of this Form by Insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any claims may only 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. Any disagreement of this report to the Insurers, you should write to the archiving of this report at the centre and to copies of the report being made available if possible.
8. Consistent under the Personal Data Protection Act (PDPA):
I understand and 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 provided 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 to 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 regulatory authority (such as the police), for the purpose(s) of investigating and settling and/or dealing with my claims including investigation of the claims and any necessary investigations relating to the claims;
(b) Investigating the accident and/or my claims;
(c) Carrying out underwriting with my instructions or responding to any enquiries by me;
(d) Substantiating my claims (including the making 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 claims as well as on the external cover of envelopes/small packages) and/or;
(e) Complying with applicable law in conducting, 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 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 lawyers/law firms), which may be cited addition of Singapore, for one or more of the above Purposes.

Sketch Plan

Insured's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

AMVA 2011-2012