ASSURE AUTO ASSIST PTE LTD

23 Tuas Avenue 18 Singapore 638902 Tel: 6385 1171 BUS. REG. NO. 201919143Z GST.REG.NO.201919143Z

TAX INVOICE

Total

To: Lim Wei Jie

Invoice No.

AA20149

Date

24-12-2021

Vehicle No.

SMU6699E

12,412.00

No.	Description	Qty	Unit Price	I	Amount
1	REPAIR COST		\$ 11,600.00	\$	11,600.00
			Sub-Total	\$	11,600.00
			GST 7%	\$	812.00

Payment by cheque should be crossed and made payable to 'Assure Auto Assist Pte Ltd'

Issued By:

Authorised Signature



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800 Hotline: 6385 1171

Our reference:

21-8374

Date:

18/12/2021

INVOICE NO.

8374

Lim Wei Jie

c/o Assure Auto Assist Pte Ltd 23 Tuas Avenue 18 Singapore 638902

Registration No.

SMU6699E

We enclose our fee note for your kind attention, which remains payable irrespective of the outcome of this case.

S/No.	Description of Services Provided	Qty	Amount
1	Being vehicle damage assessment report, inspection, photographs, transport and miscellaneous.	1	\$ 857.00
		Total amount	\$ 857.00

Please kindly cross all cheques made payable to "Impact Analysis Consultant".

We thank you in anticipation for your prompt payment.



L. L. Tan (Ms) Principal Consultant



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800

Hotline: 6385 1171

Our reference:

21-8374

Date:

18/12/2021

c/o Assure Auto Assist Pte Ltd 23 Tuas Avenue 18 Singapore 638902

Dear Sirs

RE:

Road Traffic Accident on 30-11-2021

Lim Wei Jie

In accordance with your instructions received in this office on

02-12-2021 , we made arrangements to

examine the vehicle on

02-12-2021

at above-mentioned address. The following data was

recorded:

Vehicle details

Make	BMW	Registration	SMU6699E
Model	3201	Chassis	WBA5F32050FJ00253
Colour	White	Gearbox	Auto
Odometer	23126km	Paintwork	Good
Steering	In order	Brakes	In order
Condition	Good		J

Tyre Depths

Front left	225/45R18	85% Michelin
Front right	225/45R18	85% Michelin
Rear left	225/45R18	85% Michelin
Rear right	225/45R18	85% Michelin

Status	REPAIRABLE	
Magnitude	Medium	
Legal status	Unroadworthy	

Impact Direction & Area of Damage:



Following our examination of the accident damage, we have calculated repair times and method, which are detailed on page 2 & 3. We would recommend a sum of \$11,600.00 and 7 working days for repair, which is sufficiently lower than the pre accident value to render the vehicle an economically and physically reliable proposition.

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd
 Impact Analysis Academy Pte Ltd
 IA Racking Solutions Pte Ltd
- IA Accounting & Consultancy Pte Ltd
 Infoknights International Services (Philippines)
 IABN Pte Ltd www.iaconsultingsg.com



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800 Hotline: **6385 1171**

Our reference

21-8374

Date

18/12/2021

Page

2

Section A: Damaged Parts Assessment

Section A:	Damage	d Parts Assess	ment	
Part's Description	Qty	Condition As inspected	Repairer's Estimate	Our Adjustment
List Items:				
Front fender rh	1	crushed	1205.00	1205.00
Front fender inner shield rh	1	torn	159.40	159.40
Front fender emblem "M"	1	necessary	65.80	65.80
Front fender inner panel rh	1	repair	596.80	0.00
Bonnet - warped	1	repair.respray	2145.70	0.00
Headlamp rh	1	broken	3397.70	3397.70
Front lower arm rh	1	bent	343.35	343.35
Front shock absorber rh	1	bent	561.00	561.00
Front control arm rh	1	bent	398.00	398.00
Front knuckle arm rh	1	bent	689.50	689.50
Front knuckle arm bearing with hub rh	1	necessary	611.30	611.30
Front linkage rh	1	damaged	215.00	215.00
Front tie rod end rh	1	damaged	189.00	189.00
Front bumper	1	cracked	1224.50	1224.50
Front bumper inner side bracket rh	1	broken	134.20	134.20
Front bumper side retainer rh	1	necessary	65.20	65.20
Front bumper parking sensor @\$312.20	6	1pc damaged	1873.20	312.20
Front bumper fog lamp garnish rh	1	deformed	125.70	125.70
	Sub- Total	costs	14000.35	9696.85
^p ercentag	e discount :	5%	700.02	484.84
Sui	b-Total costs	for parts	13300.33	9212.01
Special Nett Items:				
Front bumper clips	set	necessary	55.00	20.00
Front tyre rh	1	abraded	280.00	238.00
Front tyre rim rh	1	multiple-cut	612.00	612.00
Headlamp film protective cover rh	1	necessary	140.50	140.50
Front bumper lower spoiler (carbon fibre)	1	damaged.cut	1124.50	1124.50
Sul	b-Total costs	for parts	2212.00	2135.00
Parts Repair		=		
	*	*	0.00	0.00
	Sub- Total	costs	0.00	0.00
. 7	otal costs fo	or parts =	15512.33	11347.01
		_		

Subsidiaries of Impact Analysis Consultant:

Impact Analysis Consulting Pte Ltd
 Impact Analysis Academy Pte Ltd
 IA Racking Solutions Pte Ltd

 [■] IA Accounting & Consultancy Pte Ltd
 ■ Infoknights International Services (Philippines)
 ■ IABN Pte Ltd
 www.iaconsultingsg.com

No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800

Hotline: 6385 1171

Our reference

21-8374

Date

18/12/2021

Page

3

Section B: Labour Cost Calculation

		19	Total
To dismantle, replace, cut, weld, knock out dents to straighten accident parts as-mentioned on the 'Parts Repair' column inclusive of replacement parts.	\$ 45.00	20	\$ 900.00
Putty & Spray painting to adjacent panels. Job allowance. Paint / material.	Sub-con	tract work.	\$ 950.00
Apply rust proofing on the adjacent panels.	Sub-con	tract work.	\$ 50.00
Remove and replace front parking sensor & conduct distance safety setting.	\$ 45.00	2	\$ 90.00
Remove and replace rear undercarriage work rh	\$ 45.00	6	\$ 270.00
Specialist charges - Wheel alignment	-	-	\$ 80.00
Specialist charges - Dignostic fault code / reset		I	\$ 150.00
Wiring and bulb checking	\$ 45.00	0.8	\$ 36.00
	Total la	bour cost	\$ 2,526.00

Manhour rate and the number of manhours required for each repairing task are formulated based on individual workshop's operating cost and in-house@ IA Research Guidelines respectively.



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800 Hotline: **6385 1171**

Our reference

21-8374

Date

18/12/2021

Section C: Summary Table of Total Repair Cost

Description Damaged Parts Assessment (See section A)		Cost	
		\$11,347.01	
Further discount	20%	\$2,269.40	
Recommended cost of parts replacement		\$9,077.61	(1)
Labour Cos	t Calculation	da 525 00	(2)
(See se	ection B)	\$2,526.00	(2)
Total Repair Cost (Round off to hundred)		\$11,600.00	(1) + (2)

We would recommend a sum of \$11,600.00 and 7 working days for repair. No further items will be approved without our expressed written agreement. Any significant additional items will be subject to a supplementary report.

Mechanical Engineer, Accident Expert Witness, Licensed Appraiser (Automobile)

B.Eng. (Hons, NUS)

Diploma.Mechanical Engineering

NTC-2 Automovite Technology

Sr.MIES, Institution of Engineers, Singapore (#20100091)

MATAI, Maryland Association of Traffic Accident Investigators

IAARS, International Association of Accident Reconstruction Specialists

PMC of Singapore Business Advisors & Consultants Council

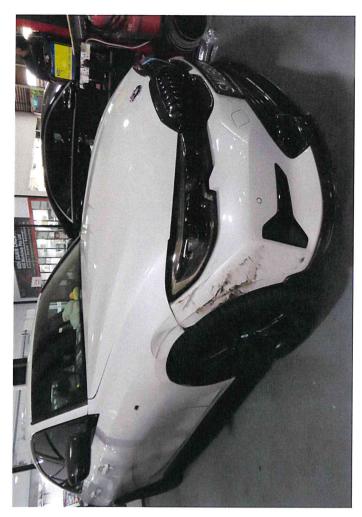
ACTA certified Trainer, Singapore

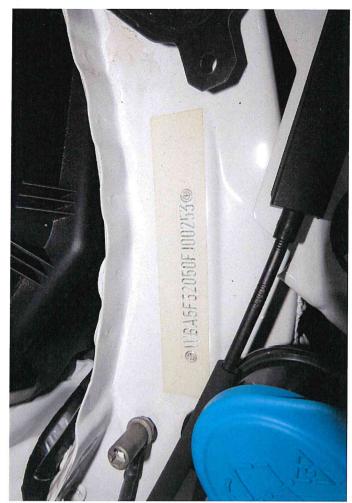
Enterprise Singapore - Recognised Certification for Management Consultants

IMI Professional Certificate In Vehicle Accident Damage Assessment (UK)

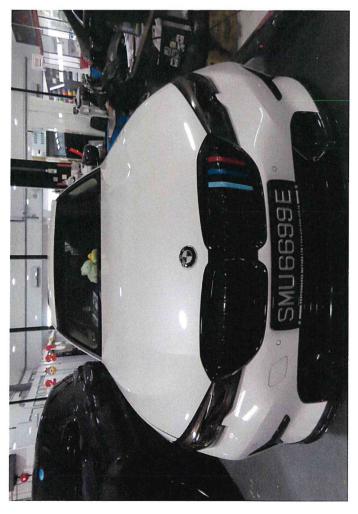
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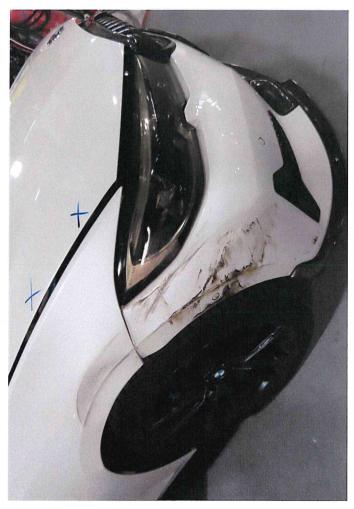




















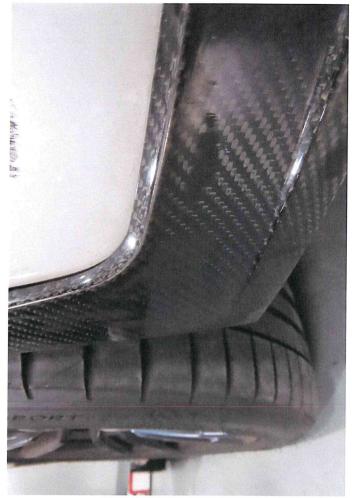




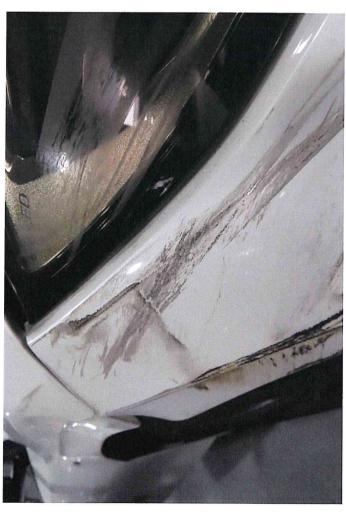
















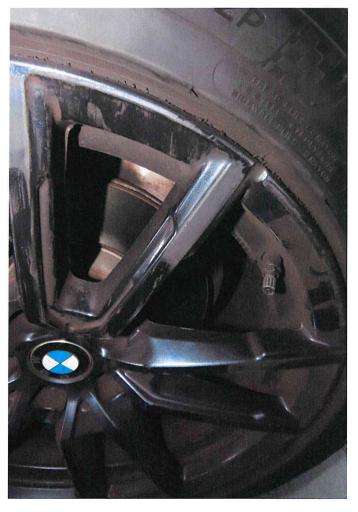




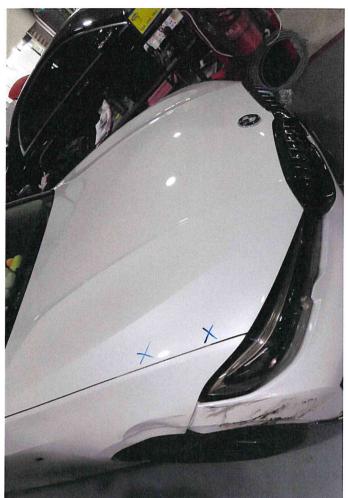


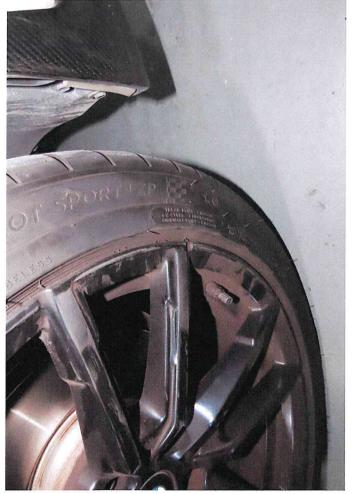








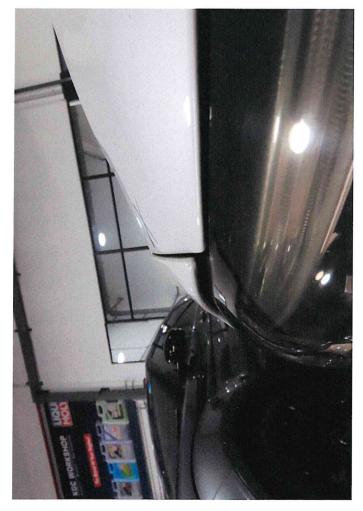












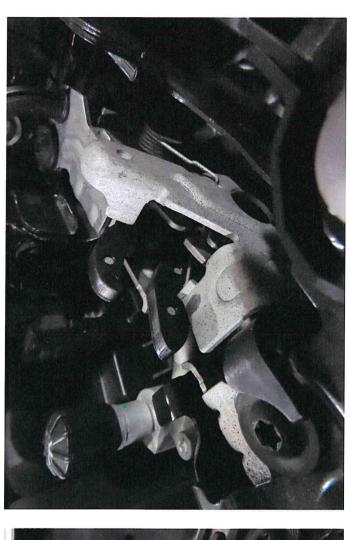








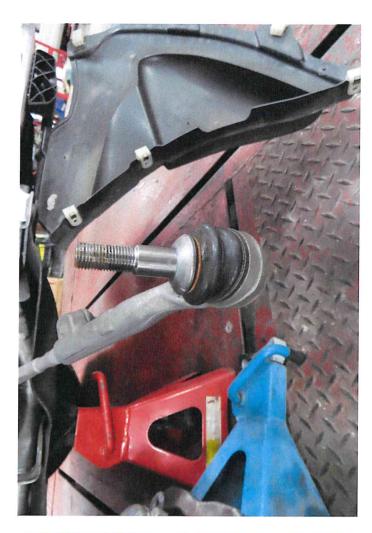


















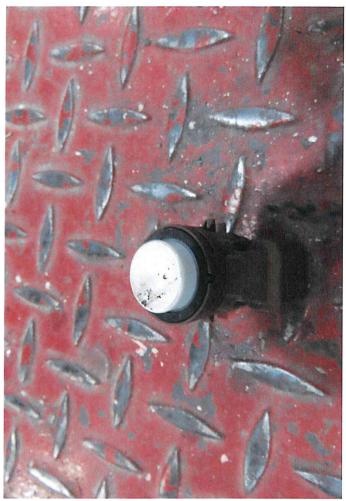














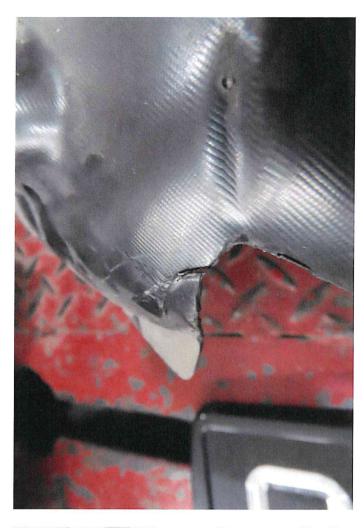






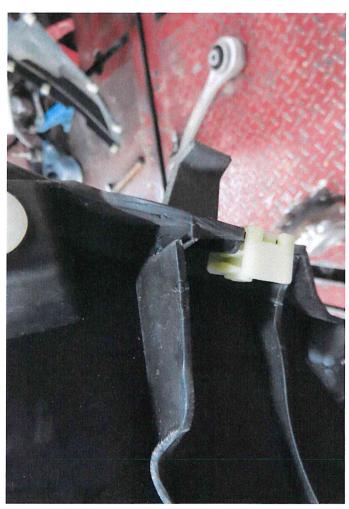




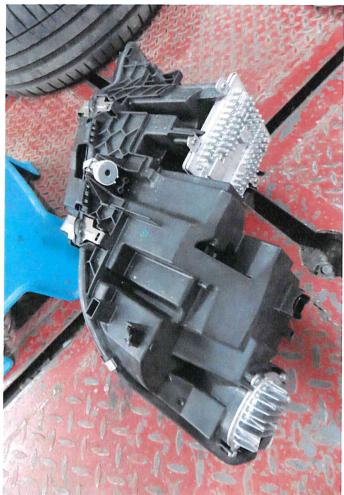














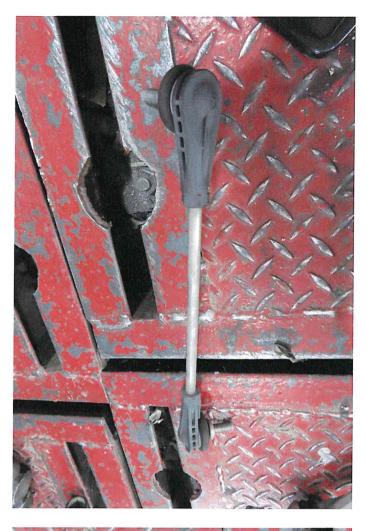






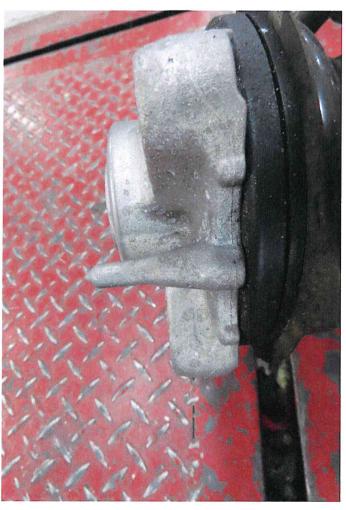


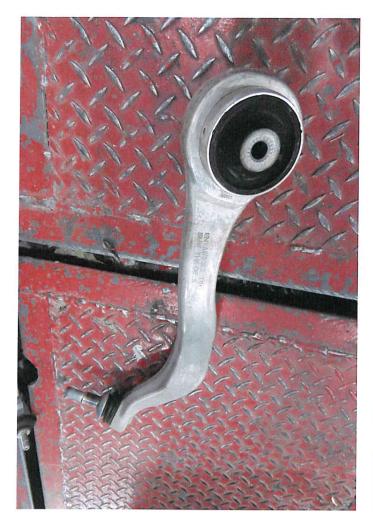




















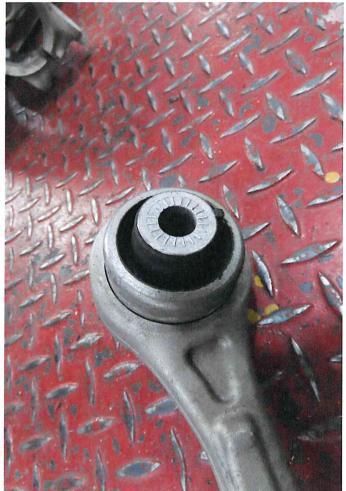


















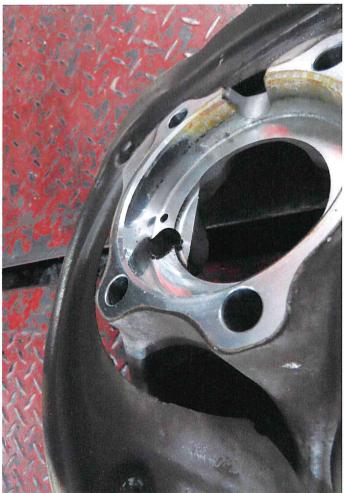




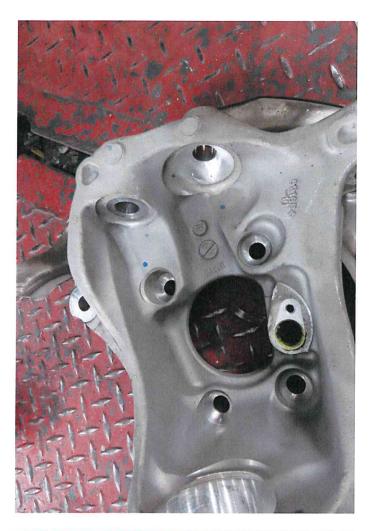










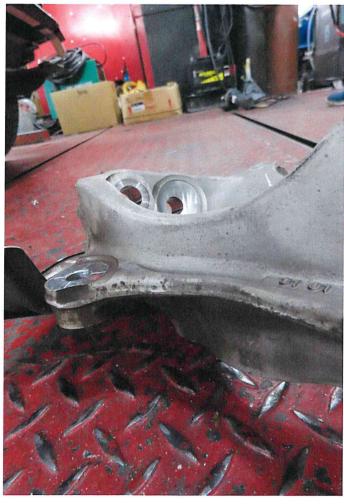


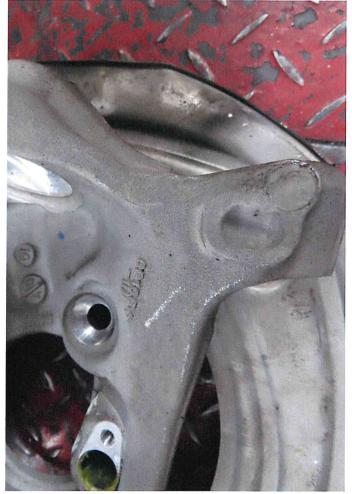












SINGAPORE ACCIDENT STATEMENT

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> 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 witholding 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.

- The issue and acceptance of this Porm by insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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 01/12/2021 17:09 (SGT) 30/11/2021 18:55 (SGT) Date of Accident **Exact Location of Accident** Newton Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SMU6699E

No - Claiming third party

Private car

Auto

1998

INSURED/POLICYHOLDER Is company? No Name Of Registered Owner Lim Wei Jie NRIC No S8849843G benlwj@hotmail.com **Email Address** Mobile Phone No (Phone) +65-91377580 Alternative Phone No +65-91377580

VEHICLE PARTICULARS

Vehicle Registration Number

BMW Manufacturer Model 320i Variant Exact purpose for which vehicle was being used at time of Private use

accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

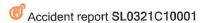
INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy No SD21V11465/VPC/R01 Policy Number

Cover Note Number

DRIVER

Name of Driver Lim Wei Jie NRIC No S8849843G



Date Of Birth 13/12/1988 Occupation Indoor Date Of Driving Pass 20/12/2011 Driving experience 9 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-91377580 Alt. Phone Number +65-91377580 Email Address benlwj@hotmail.com Address Blk 34 Lorong 5 Toa Payoh #10-313 Address complement Postcode 310034 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? 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 Side Swipe Weather Conditions Clear Road Surface 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? Yes Was any injured conveyed to hospital by ambulance? No 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 Orchard Neighbourhood Police Centre Police Station Phone No (Phone) +65-18007359999 Alt. Police Station Phone No (Fax) +65-67331934 Police Station Address 51 Killiney Road Singapore 239572 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to the police report ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident The video is with the car workshop. Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1**

SA AWA

Vehicle Registration Number SKZ2804S
Vehicle Manufacturer Mercedes
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	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender	Lim Wei Jie Male
A STATE OF THE STA	and the second second
Phone No	(Phone) +65-91377580
Address	<u>-</u>
Address Complement	
Post Code	- ,
Approximate Age Years Old	-
Injuries Sustained	e e e
Injured person in which vehicle?	SMU6699E
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 GA 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)

Lunderstand, 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 shall be collectively referred to as the "Insurers"; the Insurers' law yers/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;
- (ii) 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 yers/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 yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Pokcyholder's Signature / Date &

Sketch Plan 1 DEC 2021

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

Witnessed by Reporting Centre
Personnel Angle Soh

Newton Road

A: SM46699E

B: SKZ 2804E

Describe Circumstances of the Accident

Please refer to the afforhed

Authoritimessamens (1) etti appressy til sactig att bestånsst och 40 fer att bloken ett proposition til proposi		
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Declaration		
IWe declare the foregoing particular	rs are true in every respect	
1 A	o are the markly respect	
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		RIVE
Palicyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre
Policyholder's Signature / Date & Time 0 1 DEC 2021	& Time	Personnel Angle Soh

Traffic Police

Report.



Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

Report No. Γ 20211130 2121

REPORT	F A TRAFFIC	CACCIDENT		
Date/Time Report Made: 30/11/2021 23:31			Vide Report No.:	Station Diary No.: 130
Informa	nt's Partice	ulars		
Name of Informant: LIM WEI JIE			Address: APT BLK 34 LORONG 5 TOA PAYOH #10-313 SINGAPORE 310034	
ID Type / ID No.: NRIC NO / S8849843G			Contact No.: Home/Office: Mobile: 91377580	
National SINGAP	ity: PORE CITIZ	EN	Email:	
Sex: Age: Date of Birth: Male 32 13/12/1968			Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Banker			Driving Licence Information: Class: 3A	Date of Expiry:

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 30/11/2021 18:55		Type of Location Straight Road	
Location:						
NEWTON RO	DAD	Road Surface:		Road	Speed Limit:	
Clear		Dry				
Traffic Flow: Two Way		Traffic Control: Traffic Light - Wor	Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
I WO YVAY		and the same of th			e conveyed by	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SKZ2804S	Car	MERCEDES BENZ		Silver	Slightly Damaged	1
SMU6699E	Car	BMW	3201	White	Seriously Damaged	0

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMU6699E	LIBERTY INSURANCE PTE LTD			



Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

Report No. T 20211130-2121

CONTINUATION OF REPORT

Details of Perso					
Any Pedestrian Ir		Use of Ped	estrian	Cross	ing: NA
No. of Pedestrian	s injured: MIL	030 0,1 04		THE CO	DI BANDARA MARANTA
Driver Name	LIM WEI JIE		ID No.		S8849843G
Related Vehicle	SMU6699E (Car)		Contact No.		91377580
Hospital/Clinic	NIL		Class of Driving Licence &		Class: 3A Date of Expiry: NIL
			Expiry Date		
Date Treatment			ischarge NIL		
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	Sligh	t

Brief Details.

On the 30/11/2021 at about 1850hrs, while I was driving (SMU6699E) along Newton Road near Hotel Royal. I signaled and checked my blind spot and subsequently changed lane. Upon the completion of changing my lane, another car (SKZ2804S) from the right merged into my lane and swiped against the front right side of my car. The other driver then accelerated and drover in-front of my car and subsequently signaled the hazard light. We both later, stopped and exchange particulars but unfortunately my handphone was low on battery. However the other driver who is a female took my details.

However up till now, the other driver did not contact me to inform me about her details. I had informed the accident to my car insurance and I was advice to lodge a Police report. I will be seeking medical attention as I felt pain on my both knees. There is an in-car camera at my front and rear of my vehicle. My vehicle suffered some scratches and dents on the front bumper.





3.013

Report No. T 20211130 2121

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report E / Staff Sgt MUHAMMAD SAUFIE BIN MOHAMED ADAM	Signature Of Informant:
Signature Of Interpreter:	Oate/Time: 30/11/2021 23:31
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:
Authentication Stamp	