

ASS. REC. BY:

Steve

REF:

CS/SMR22000787/Eqf3

## 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. TAX/01/22/2018

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S
X	X

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SKA 5866 Yr Regn: 27/12/18

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

Truck / Trailer or

Make: BMW 216T c.c. 1496

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 80871 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: WBA 6V12090ED05675

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rim / STD A/Rim or

Tyre Size: F: 205/55R17

R: 11

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. 12/1/22 D.O.I. 12/2/22

Survey held at Performance Motors

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

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

Date / Time Action / Instruction

MV-118X

We will be advising our Principal a cost of repair of \$7518.90 (P/P before GST) - with 5 days of repair, subject to their approval. (Red \$5576.60, 43%)

Date/Time, File Pass to?

1) 29/03 Typist

Date/Time, File Return to?

2)

Report Format: TP

Lump Sum / I.B.I: (\$ 7518.90)

Days Of Repair: 5

Resurvey No. of Trip: 1

Add Fee: ☐ Site Insp (\$ )☐ Interview (\$ )☐ Tech. Invs (\$ )☐ Weekend (\$ )

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

BMW Dealer

**Performance Motors Limited**

A Sime Darby Motors Company  
Co. Reg. No. 197401559M 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)

26/1/2022  
Surry only ✓  
Change to  
4 / Feb 2022  
Surry only



GST REG. NO : M2 - 0020081 - X

**E S T I M A T E**

Estimate No. : b1 60601  
Date Estimated : 13/01/2022  
Prepared By : Chua Kee Sin

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**- ESTIMATE REPAIR FOR -**

Lim Kai Seong  
4E Lim Ah Pin Road

Singapore 547853

**- ACCOUNT - 40000**

Cash Sales - Service  
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKQ586G	WBA6V12090ED05675	27/12/2018	216i Gran Tourer	77582

**DESCRIPTION****VALUE**

Replace rear boot lid rear bumper includ e remove attachment etc

1730 2,550.00

Painting rear boot lid and rear bumper

1731 1,823.00

To replace rear windscreen glass.

574.00

To conduct water leak tests.

75.00

To supply and install rear windscreen solar film.

? 531.00

To remove and install rear hat-tray, rear seat, carpet and roof top lining to facilitate repair.

873.00

To check electrical wiring system and lighting at the rear section for proper function.

168 177.00

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

168 177.00

To carry out body cavity preservation.  
(Per panel).

112 118.00

Sundries.

150.00

Total Labour 1: 7,048.00

**DESCRIPTION****QTY****PRIC****VALUE**

BOOTLID

1

1,239.35

1,239.35

REAR BUMPER CARRIER

1

483.40

483.40

RR BUMPER LH INNER SIDE GUIDE

1

161.15

161.15

RR BUMPER RH INNER SIDE GUIDE

1

161.15

161.15

REAR BUMPER TOWING FLAP EYE PRIMED

1

43.25

43.25

REAR BUMPER PANEL PRIMED (LINES PDC

1

1,035.00

1,035.00

SET MOUNTS PDC SENSOR REAR

1

61.80

61.80





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

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315, Alexandra Road  
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Fax. 64796601 (AfterSales)  
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

## ESTIMATE

Estimate No. : b1 60601  
Date Estimated : 13/01/2022  
Prepared By : Chua Kee Sin

Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKQ586G	WBA6V12090ED05675	27/12/2018	216i Gran Tourer	77582

DESCRIPTION	QTY	PRIC	VALUE
LETTERING 216i / nk	1	65.60	65.60
GROMMET / nk	2	0.80	1.60
PLAQUE 74MM / nk	1	72.85	72.85
REAR WINDOW (ESG)	1	620.90	620.90
REAR BUMPER TRIM STRIP CHROM / CMT	1	109.40	109.40
HOOK AND LOOP FASTENER / nk	10	2.50	25.00
BOOTLID SEALING / nk	1	144.55	144.55
DECOUPING RING PDC TORQUE CONVERTER / nk	4	5.15	20.60
ULTRASONIC SENSOR MINERALWEISS(WA96)	4	371.20	1,484.80
(DG) CLEANER R1 (100ML) / nk	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR) / nk	2	131.55	263.10
(DG/SL)ADHESIVE PRIMER VP 206 (30ML) / nk	1	27.85	27.85

Total Parts : 6,047.50

Steve (LKK)  
4/2/22, 10.00am

WML R2  
P/P  
M BL H  
5 days

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	:	7,048.00
Parts	:	6,047.50
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	916.69
Grand Total	:	14,012.19



\*\* 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 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	13/01/2022 10:58 (SGT)
Date of Accident	12/01/2022 13:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE BEFORE EXIT TO BALESTIER ROAD, LANE 1 (HEADING TO CITY)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ586G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM KAI SEONG
NRIC No	SXXXX130D
Email Address	KAISEONG.LIM@GMAIL.COM
Mobile Phone No	(Phone) +65-91682220
Alternative Phone No	(Home) +--

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	216i
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	1499

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SI21V16688/VPC/R03/E00
Cover Note Number	-

### DRIVER

Name of Driver	LIM KAI SEONG
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NRIC No	SXXXX130D
Date Of Birth	15/12/1969
Occupation	Indoor
Date Of Driving Pass	09/09/1993
Driving experience	28 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91682220
Alt. Phone Number	(Home) +--
Email Address	KAISEONG.LIM@GMAIL.COM
Address	4E LIM AH PIN ROAD
Address complement	-
Postcode	547853
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	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?	No
Was any injured conveyed to hospital by ambulance?	-
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	LIM JIA EN, ISABEL
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

#### SEE ATTACHED SKETCH PLAN

#### 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 1

Vehicle Registration Number	SHB1038E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
Name of Driver	WEE SWEE POH
NRIC No	SXXXX660C
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## 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 wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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5. Any false reporting may be referred to the Police for investigation.
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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:

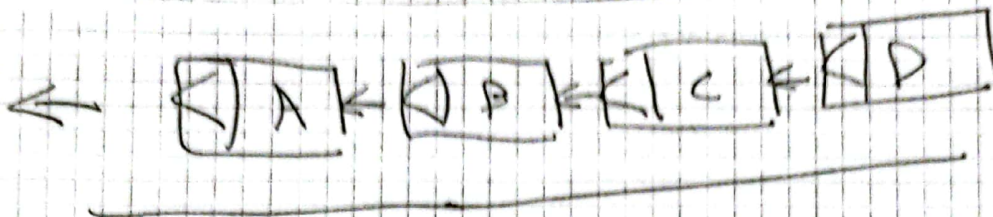
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



016

← TOWARDS CITY



Driving towards City on CTE at lane 1 before Balestier Road Exit.

My car slowed down. (Car A)

The car behind (Car B) number plate SHB1038E could not brake in time or slow down enough and hit the rear of my car.

Then another car also hit SHB1038E from the back.

In total there are two other cars behind SHB1038E in this chain collision. I only took down the number plate of the car that hit me.

I/We declare the foregoing particulars are true in every respect.


Winfried Sauer

Date & Time: 13 Jan 2022  
8:41 AM

GIARMC Sketch/Perform, V3

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

NRIC/FIN No.:


 13/1/2022  
 Reporting Centre Personnel's Signature  
 e 8426