

ASS. REC. BY:

REF: MSG / 22002222 / Kt

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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

03

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

SEN 2364X

Yr Regn: 04, 17

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

Truck / Trailer or

Make:

BMW

216d

c.c

1496

Colour

M. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

98102

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WBA2E320X05H46077

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

205/55R17

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

8

mm

L/Bal.

6

mm

L/Bal.

8

mm

D.O.A.

7/13/22

D.O.I.

10/3/2022

Survey held at

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, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

) S + RS. \$

) Fuel

) Others

TOTAL

Report Format :

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

RIVERVIEW AUTO SERVICES PTE LTD

10 ANG MO KIO INDUSTRIAL PARK 2A

#04-07/#04-16 AMK AUTOPOINT

SINGAPORE 568047

Tel : 6481 2025 / 6481 5797 Fax : 6481 8715

Email : service@riverviewauto.com.sg

Website : www.riverviewauto.com.sg

Co.Reg No: 200800062E GST.Reg No: 200800062E

Lump Sum
less 20%

Not Authorized
61 Pw &
Paying After Paint
3 days

SLN 2364X

BMW 216D

List Price

Parts

BMW less 5%

frt Bumper	Tr	980	✓
frt Bumper BMW Badge	me	68	✓
frt Bumper Radiator chrome grille @ \$165 X 2pcs	net/cm	330	✓
frt Bumper Radiator chrome grille holder @ \$120 X 2pcs	MS mgmt	240	✓
frt Bumper Lower centre grille	net/cm	185	✓
frt Bumper PDC sensor @ \$328 X 1/4 pcs		1312	✓
frt Bumper fog lamp LHS	h	303	X
frt Bumper fog lamp chrome LHS	net	125	✓
frt Bumper fog lamp chrome holder LHS	mgmt	118	✓
frt Bumper no plate garnish	cm	89	✓
frt Bumper side holder LHS	net	88	✓
frt Bumper sponge	Bro	018	✓
frt Bumper reinforcement	R	720	X
frt Bumper PDC sensor wire harness			?
frt Headlamp LHS	108	net 2364	✓

Special nett items	nett price	
front license plate with holder	net	\$50 45 net
front Bumper clips (1 set)	me	\$40 ✓
Labour charges		
1) To Renew & repair front portion of vehicle	\$800	3001
2) To spray paint Accident area	\$500	2801
3) To check with BMW computer. scan & clear all fault code	\$300	1001

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 or misuse
- Supplement to the net price is subject to final approval from the 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	08/03/2022 17:06 (SGT)
Date of Accident	07/03/2022 12:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	150 BUKIT BATOK ST 11 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN2364X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YIN SHIHUI REENA
NRIC No	S8413133D
Email Address	reena_yin@hotmail.com
Mobile Phone No	(Phone) +65-91198984
Alternative Phone No	+65-81885577

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

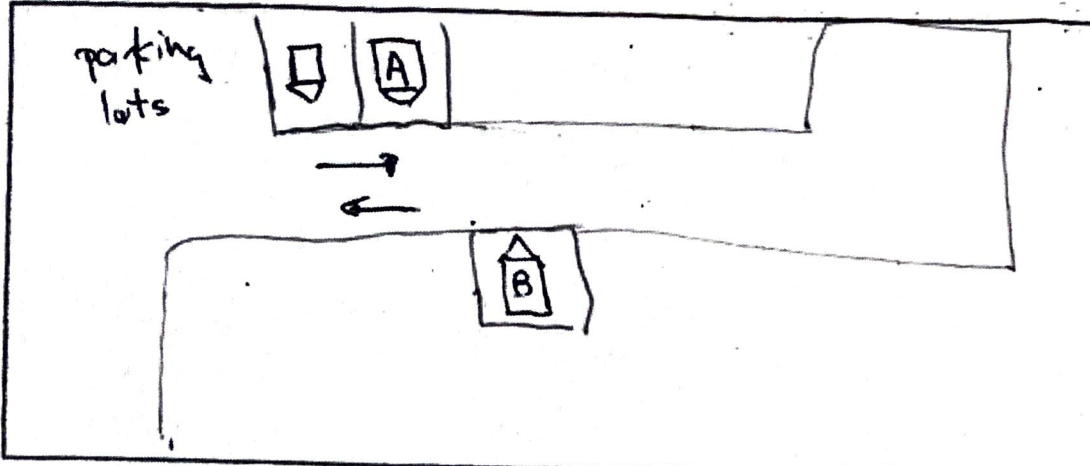
Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNA00077892101
Cover Note Number	27/04/2021 - 26/04/2022

DRIVER

Name of Driver	JEREMY KOH SHUXIU (JEREMY GAO SHUXIU)
NRIC No	S8339964C

Date of accident: 07.03.22 Time: 12:45 Location: 150 Bukit Batok St 11 Carpark
 My Vehicle A: SLN 2364X Vehicle B: YN2983E Vehicle C: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 07 March 2022 at about 12:45 pm. I parked my car at 150 Bukit Batok St 11 Carpark. I went off to run errands, and when I came back to my car, I saw the front portion damaged.

TAN LYE SENG of Vehicle YN2983E Admitted to me that he had hit my vehicle causing damages to my car.

He gave me his driving licence and contact number and told me to claim his vehicle insurance.

There was no one in the car at the time of accident and no one was injured. I will repair my car at riverview auto services Pte Ltd.

Remarks: Please forward a copy of my efile accident report to:

My workshop: Riverview auto Services Pte Ltd

Email address:

& myself:

Email address: Email: service@riverviewauto.com.sg

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 08/03/22

Reporting Centre Personnel's Signature

Name:

NRIF/IRIM No.: