ASS. REC. BY:	2200344914+
Kenneth CSUCS22003110/Kty3 AS	
	Ven No: SMA SODITY Regn: 11, 10  Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  Truck / Traller or A)
1)	ys Of Repair:  Survey No. of Trip:  Survey Fee:  Transportation  S+RSSI  Interview (\$ ) Firms  Tech Invs (\$ ) Others  Weekend (\$ )
1	TOTAL

## Munich Autocare Pte Ltd (Co.Reg.No:201832250M)

60 Jalan Lam Huat, #07-43 Singapore 737869

Tel: 62552288 Fax: 62655388 Email: dennis.deng@munichautocare.com.sg

INSURER:

ECICS Limited (HQ)

PARTICULARS OF CLAIN
----------------------

Claim Type:

OD (OWN DAMAGE)

MCF22A00000100

Date of Loss:

06/04/2022

Policy No: Vehicle Reg. No.:

SMA8822H

Driveable?

Ref. No:

Driver Age/Info:

Party At Fault:

UNKNOWN

TP Injury Involved?

NO

Third Party Involved? YES

Insured/Claimant:

BIS MOTORING PTE LTD

KIA CARENS, 1.7 D DCT 5DR FWD

06/11/2018

Make/Model:

(A)

Vehicle Reg. Date:

Vehicle Colour:

BLACK

D4FDJD028343

Chassis No:

KNAHU815VJ7212222

Engine No: Odometer:

332783 KM

Not Nothank

Paint Type:

Total Loss?

(day)

Est. Duration of Repair

NO

1.B.1 Ackny B4pains Ex \$ 20001-

Present Location:

MUNICH AUTOCARE PTE LTD (HQ)

COST OF CLAIMS		Amount
Parts		12,221.00
Miscellaneous Items		144.00
Labour		4,690.00
Paintwork Labour		0.00
Towing		0.00
	Calculated Gross Total (S\$)	17,055.00
	- Excess (S\$)	2,000.00
	(S\$)	15,055.00
	+ GST 7.00% (S\$)	1,053.85
	Nett Amount (S\$)	16,108.85

This claim is handled by: LEONG CHEE KWONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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:

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
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  - · Parts prices are subject to confirmation
- Third party survey is on a "Without Prajudice" 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

Date:

### REPAIR DETAILS

## Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 12 Apr 2022)

Parts:

M1-MPV

KIA CARENS 1.7 D DCT 5DR FWD (A) (Catalogue: Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SMA8822H)

Validity:

These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the

END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

## Estimates on Parts

No.	Qty Part No.	Particulars	9,	Disc.	%Depr	Amount
1	1	*front bonnet 420		0.00	0.00 4	✓*420.00 F
2	1	*front bonnet lock 49		0.00	0.00 DM	✓*49.00 F
3	1	*front bonnet insulation		0.00		2 *70.00 F
1	1	*front bonnet hinge LH 25		0.00	0.00 8	25.00 F
5	1	*front bonnet hinge RH 25 >		0.00	0.00 B	→*25.00 F
3	1	*Front bumper 350 ×		0.00	0.00 cm	✓ *350.00 F
7	1	*front radiator grille 252 ×		0.00	0.00 cm	
3	1	*front bumper top cover 55 >>		0.00	0.00 Cm	
)	1	*front headlamp LH	my cas	0.00	0.00	→ *880.00 F
0	1	*front headlamp RH	4 7	0.00	0.00	✓ *880.00 F
1	1	*front headlamp bracket LH		0.00	0.00	1 *12.00 F
2	1	*front headlamp bracket RH		0.00	0.00	Ju *12.00 F
3	1	*front bumper sponge 56	cm		0.00	*56.00 F
4	1	*front bumper Reforcement 224	By	0.00	0.00	<b>→</b> *224.00 F
5	1	*front support panel 350 >>	,	0.00	0.00 %	<b>~</b> *350.00 F
6	1	*front fender LH 220 X		0.00	0.00 3	→ *220.00 F
7	1	*front fender RH 220		0.00	0.00 Rg	✓ *220.00 F
8	1	*front inter cooler		0.00	0.00	200
9	1	*front a/cond condensor		0.00	0.00 Sm	7 *420.00 F
0	1	*front radiator assy		0.00	0.00 In	7 *420.00 F
1	1	*front fan cooling fan cowing		0.00	0.00 Pm	
2	1	*front intake cover	cns	0.00	0.00	✓ *84.00 F
3	1	*front oulet manifold		0.00	0.00	In *500.00 F
4	1	*front dash board assy 400	To	0.00	0.00	✓ *1,190.00 F
5	1	*front steering air bag 940	Bry	0.00	0.00	<b>→</b> *980.00 F
6	1	*front passenger air bag 700 ×	4	0.00	0.00	✓ *700.00 F
7	1	*front seat belt LH 280	Th	0.00	0.00	✓ *280.00 F
8	1	*front seat belt RH 280 20	Zm	0.00	0.00	*280.00 F
9	1	*front seat belt tensioner LH		0.00	0.00	
0	1	*front seat belt tensioner RH 74 X		0.00	0.00	*280.00 F
1	1	*clock spring X	125	0.00	0.00 Ma	✓*126.00 F
2	1	*air bag computer unit	5	0.00	0.00 Ma	→ *560.00 F
Frar	nchise part.					223.301
			b Total (S\$)			11,110.00
		+ Margin on L,N Items	10.00% (S\$)			1,111.00

Report was unsubmitted during this print-out. Generated using Merimen e-Claims IEAS

Total Parts (S\$)

12,221.00

Estimates on	Miscellaneous	Items
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No Qty Particulars

Miscellaneous Items

Amount

1 2	6	FENDER INNEL SHIELD CLIP LH FRONT ENGINE COOLANT		MA	X	42.0
3	6	FRONT RADIATOR TOP GARNISH CLIPS LH/RH		Ma	~	25.0
4	1	FRONT W/SCREEN SEALANT		n	X	42.0 35.0
			Sub Total (\$	S\$)		144.0
Es	tima	ites on Labour				
No	Part	iculars	Lab.Typ	е	Αı	nount
Lab	our Ite	ems				
1	TO I	REMOVE & REFIX, REPAIR, KNOCKING, WELDING FRONT PORTION, BONNET , BUMPE PORT PANEL , FNEDER LH/RH, WHEEL HOUSE LH/RH CHASSIS LH/RH AND DAMAGE :A	R, New	700	1,5	500.00
2	TO	CHECK ALL WIRING FOR OPERATION AND PARKING SENSOR FOR OPERATION	New	20	2/ /1	20.00
3		CHECK AND ADJUST HEADLAMP LH/RH FOCUS	New			20.00
4	INCL	REMOVE/INSTALL RADIATOR COOLING SYSTEM & ALL NECESSARY PARTS, LUDING PRESSURE TEST, BLEED COOLING SYSTEM & CHECK LEAKS FOR REPLACE NT SUPPORT PANEL AND DAMAGE AREA	New	6	al 3	50.00
5	TO C	CONDUCT RE-PROGRAME AIR BAG SYSTEM AND SETTING OF ECU SYSTEM TO CLEA LT CODE	R New	2.	501 3	80.00
6		REFILL A/COND GAS	New		-	80.00
,		CONDUCT 4 WHEEL ALIGNMENT	New	NN		80.00
3	LH 8	DISMANTLE & REFIX FRONT SEAT BELT LH & RH AND TENSIONER LH & RH , BUCKLE RH AND REAR SEAT BELT LH & RH AND BUCKLE LH & RH	New	22	201 3	
)	TO D	DISMANTLE & REFIX DASHBOARD , INCLUDING TO REMOVE & REPLACE PASSENGER IT AIR BAG AND DRIVER SEAT AIRBAG	New	23	5d 4	80.00
0	TO R	ESPRAY FRONT PORTION, BONNET INNER / OUTER , FRONT BUMPER, SUPPORT EL , FRONT FENDER LH/RH WHEEL HOUSE LH/RH AND POLISH DAMAGE AREAS	New	1000	1,2	00.00
		Gross Labor	ur Cost (S\$)		4,6	90.00
		Report was unsubmitted during this print-out. Generated using Merimen e-Claims IEAS				
		< FND OF ESTIMATES >				

< END OF ESTIMATES >

## > Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: Vehicle Details	055D	
Vehicle No.:	SMA8822H	
Vehicle to be Exported:	No	
Intended Deregistration Date:	12 Apr 2022	
Vehicle Make:	KIA	
Vehicle Model:	CARENS 1.7 DCT DIESEL 5DR FWD	
Primary Colour:	Black	
Manufacturing Year:	2018	
Engine No.:	D4FDJD028343	
Chassis No.:	KNAHU815VJ7212222	
Maximum Power Output:	104.0 kW (139 bhp)	
Open Market Value:	\$20,088.00	
Original Registration Date:	07 Nov 2018	
First Registration Date:	07 Nov 2018	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$20,124.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	06 Nov 2028	
PARF Rebate Amount: Intended COE Rebate Details	\$15,093.00	
COE Expiry Date:	06 Nov 2028	
COE Category:	E - Open - all except motorcycle	
COE Period(Years):	10	
QP Paid:	\$32,311.00	
COE Rebate Amount:	\$21,221.00	
Total Rebate Amount:	\$36,314.00	

The information contained herein is correct as at 12 Apr 2022



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

 Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 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.

e 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

08/04/2022 08:57 (SGT) 06/04/2022 08:40 (SGT) Singapore TPE TOWARDS CTE Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMA8822H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No

Yes **BIS MOTORING PTE LTD** 201735055D KEIFTAN@BISMOTORING.COM.SG (Phone) +65-86881311 +65-86881311

VEHICLE PARTICULARS

Manufacturer Model

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?

Vehicle Category Transmission

CC

Kia Carens

Private hire

Yes Private hire Auto 1699

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Policy Number Cover Note Number

**ECICS** Limited Comprehensive

MCF22A00000100

DRIVER

Name of Driver NRIC No

MOHAMMED SAHRIL BIN MASNIN S8016431I



Accident report SM0822460001

Page 1 of 16

Date Of Birth 16/06/1980 Occupation Outdoor Date Of Driving Pass 03/07/2002 Driving experience 19 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-97435724 Alt. Phone Number Email Address SAHRILMASNIN@GMAIL.COM Address 674B JURONG WEST STREET 65 Address complement #02-54 Postcode 642674 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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) 2 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name LESTER 97265259 Gender Male 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 1** Vehicle Registration Number SMX681D Vehicle Manufacturer Toyota

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

SMX061B

Toyota

Toyota

Private car



Name of Driver NRIC No Contact Number	LIN BILAN S7277280F (Phone) +65-90227897
Address complement	_
Address complement Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	

SKETCH PLAN			
	The Wall of the Wa	1114	
			18MX 651D
	a L	The state of the s	
	\$ h		
	3 1 1	1 /A #	- SMA 8822H
DESCRIBE CIRCUMSTANG	CEC OF THE ACCIDENT		
On the	9th of April 202	2 D 0840h.s	I was travelling
(SMA 58 22H) u	the my grap passeng	er. At that	point the road us
dry and clear	Subsequently I	con H.	point the road me making a break on time and my ar (SMX6810). I such a H they had any red that no injuries
es such I br	eak but no all	d la la	making a break
car hit H.	(2-6 h - 1	to break	on time and my
Thoched . H	rear oumper of	the front co	=r(SMX6810). I such
Maria III	My passerger and	1 the drive	o of they had any
TOWNES - HOW	ever both parties	did mentio	red that no injuries
oh them.			U
9.0			
CLARATION			O ALIN:
	ticulars are true in every respect.		* MUNICA
	h		( RE ( RE) E)
	Coffee		Children Co.
licyholder's Signature te & Time:	Driver's Signature	Repo	orting Centre Personnel's Signature
- Similer	(If driver is not the policyholo	der) Nam	

GIARMC SketchPlanForm\_V3

(If driver is not the policyholder) Date & Time: /4/22

Name:

NRIC/FIN No .:

### 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.
- 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 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 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 \$ignature (If driver is not the policyholder) Date & Time:

Reporting Centre Remonnel's Signature Name:

Name: NRIC/FIN No.:

Time: NRIC/FIN