

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/FC122003901/uty3

**ASSIGNMENT**

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

SM741314  
Kim chwee

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

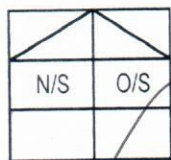
Excess:

950

(Client's Record)

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

\$69k.

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

1982  
ATA 50267Veh No: SM741314 Yr Regn: 24/09/14Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

(A)

Make:

BMW 328iA

c.c

1997

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

102479

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WBA3X32030DZ23232Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

245/45 R18

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

TOYO / YOKO or

hankook

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

23/04/22

D.O.I.

27/4/22

Survey held at

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

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

Date / Time

Action / Instruction

Dep 18k.Not PML cer is from PI4/5/22 4/5 @ 4100 informed Alan.

RED: 12261.35;92%

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

Report Format :

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

# KIM CHWEE AUTO PTE LTD

Pg 1/2

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379-R

Not Authorized

27/4/22  
1/5 \$ 4100  
3 days

Estimate : 22941

Date : 26.04.2022

Vehicle Num : SMT 4131U

Make/Model : BMW 328I A

Chassis/Engine no :

Accident Date : 23.04.2022

Claim No : 0422-22941

Reference :

Policy No :

Qty	Particular	Amount S\$
-----	------------	------------

## List Item :

1 pc	Rear bumper reflector RH	one	\$	47.50	✓
1 pc	Rear bumper	Dis	\$ 1650	1,750.60	✓
1 pc	Rear bumper diffuser	Dis	\$	554.20	✓
1 pc	Rear bumper reversing sensor (outer)	should	\$	225.30	✓
1 pc	Rear bumper reinforcement	Buf	\$ 481	570.20	✓
1 pc	Rear bumper side retainer RH	one	\$	86.00	✓
1 pc	Taillamp LH	1 1	\$	425.00	X
1 pc	Rear bumper top retainer	one	\$	181.10	✓
1 pc	Rear top arm LH	1 1	\$	280.90	X
1 pc	Rear lower arm LH	1 1	\$	841.65	X
1 pc	Rear knuckle arm LH	1 1	\$	1,365.50	X
1 pc	Rear wheel hub bearing LH	1 1	\$	541.55	X
1 pc	Rear lower link arm LH	1 1	\$	225.00	X
1 pc	Rear control arm LH	1 1	\$	334.50	X
1 pc	Rear stay arm LH	1 1	\$	272.50	X
List Item Total :			\$	7,701.50	
Discount 10 % :			\$	770.15	
			\$	6,931.35	

## Special Nett Item :

1 pc	Rear sport rim RH	cur/Buy	\$	1,800.00	800
1 pc	Rear tyre RH	1 1	\$	550.00	X
Special Nett Item :			\$	2,350.00	

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Pg 2/2

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Chassis/Engine no :

Accident Date : 23.04.2022

Claim No : 0422-22941

Reference :

Policy No :

Qty	Particular	Amount S\$
-----	------------	------------

## Labour Charge :

To check wiring	\$	80.00	20
Remove and refix front & rear undercarriage	\$	550.00	X
Check wheel alignment	\$	120.00	60
Remove and refix rear interior trims to assist repair	\$	180.00	80
Panel beating , cut, weld, remove and replacing above parts	\$	1,600.00	520
To spray paint effected portion	\$	1,400.00	600
Labour Charge Total :	\$	3,930.00	

\$ 13,211.35

KIM CHWEE AUTO PTE LTD

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:

2-3225-1  
57  
3063.84  
800  
1340  
5203.84  
202  
4163



## &gt; Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	198Z
Vehicle Details	
Vehicle No.:	SMT4131U
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Apr 2022
Vehicle Make:	B.M.W.
Vehicle Model:	328I A
Primary Colour:	Black
Manufacturing Year:	2013
Engine No.:	A5020546N20B20A
Chassis No.:	WBA3X32030DZ23232
Maximum Power Output:	180.0 kW (241 bhp)
Open Market Value:	\$48,491.00
Original Registration Date:	24 Sep 2014
First Registration Date:	24 Sep 2014
Transfer Count:	1
Actual ARF Paid:	\$54,888.00 27444
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Sep 2024
PARF Rebate Amount:	\$32,932.00
Intended COE Rebate Details	
COE Expiry Date:	23 Sep 2024
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$71,990.00
COE Rebate Amount:	\$17,335.00
<b>Total Rebate Amount:</b>	<b>\$50,267.00</b>

The information contained herein is correct as at 27 Apr 2022

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\$141888, Very Low Maintenance  
Cost.

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bmw 328

Any Category

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Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
<b>Search Selection</b>	<b>bmw 328</b>		Any	Any	<b>2014</b>	Any	Any	Any	<b>Available</b>
	<b>BMW 3 Series 328i</b>		<b>\$61,000</b>	\$18,770 /yr	23-May-2014	1,997 cc	109,000 km	Luxury	<b>Available</b>
Unit Maintained In Excellent Condition! Nardo Grey Paintwork Paired With Black Leather Interior! Brand New Suspension, Air Intake, Tyr...									
Posted: 21-Mar-2022									

Save this search criteria, to get email alerts whenever a match is found.

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
------	-------	-------	--------------	----------	---------	---------	----------	--------

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## 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	26/04/2022 11:51 (SGT)
Date of Accident	23/04/2022 14:30 (SGT)
Exact Location of Accident	Braddell Rd, Singapore
Additional Location Information	TOWARDS CTE (AFTER BISHAN FLYOVER)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT4131U
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN TZE MOI
NRIC No	SXXXX198Z
Email Address	dscy1993@gmail.com
Mobile Phone No	(Phone) +65-96826427
Alternative Phone No	+65-92396360

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	328i
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1997

#### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D-21098183MVPC
Cover Note Number	-

#### DRIVER

Name of Driver	DENNIS SEAH CHONG YONG
NRIC No	SXXXX118H

Date Of Birth .....	28/05/1993
Occupation .....	Indoor
Date Of Driving Pass .....	23/04/2014
Driving experience .....	8 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-92396360
Alt. Phone Number .....	-
Email Address .....	dscy1993@gmail.com
Address .....	BLK 138 BISHAN STREET 12 #08-448
Address complement .....	-
Postcode .....	570138
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 - Major/Minor Rd
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) .....	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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

#### 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 .....	WITH OWNER
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJL3542B
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	CHUA WEI SIANG, BENJAMIN
NRIC No .....	SXXXX483H
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.
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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)**  
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.

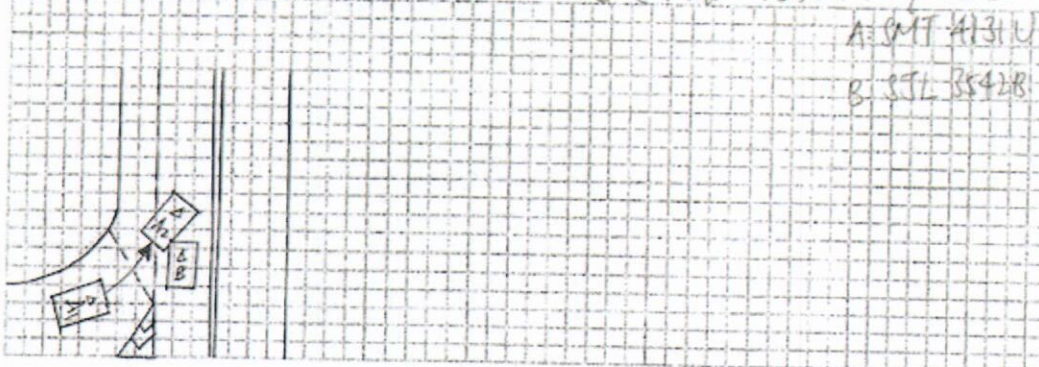
Policyholder's Signature / Date &amp; Time

Driver's Signature (If driver is not the policyholder) / Date &amp; Time

Witnessed by Reporting Centre Personnel

Sketch Plan

BRADDELL ROAD TOWARDS CTE (AFTER BUSHAW FLYOVER)



## Describe Circumstances of the Accident

On 23/09/2022 at about 14:30 PM. I was travelling along Braddell Road towards CTE (After Bisham Flyover). As I drove out from the slip road towards the 1st lane of Braddell Road, Vehicle B could not stop in time and hit the rear portion of my vehicle.

## Declaration

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

Witnessed by Reporting Centre Personnel