

Steve

CS/AIS 22005692/E923

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.

N/S	O/S
☒	☒

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGB 566R Yr Regn: 3/10/18
 Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
 Truck / Trailer or _____
 Make: BMW X1 c.c. 1499
 Colour: White A/C: ☐ Insured / ☐ Std / ☐ Nil / ☐ NA
 Sp. Reading: 47067 T/Radio: ☐ Insured / ☐ Std / ☐ Nil / ☐ NA
 Eng/No: _____
 C/No: WBAJG120303676704
 Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt
 Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Brake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Modl: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim or
 Tyre Size: F: 225/55R17 R: _____
 SS ☒ DUN / ☐ EXNOVA / ☐ GY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /
 TOYO / YOKO or _____
 Front _____ Rear _____
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 D.O.A. 98/5/22 D.O.I. 28/6/22
 Survey held at Performace
 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-134K
	Steve finalise final fig \$2536.15, 3 days. (Red \$1610.80, 39%)

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

1) 01/09 Typist

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Add Fee:

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

Report Format: MER-TP

Lump Sum / L.B.E. (\$) 2536.15

BMW Dealer

Performance Motors Limited

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



* P. Reserved
- customer overseas
will call back 15/06

✓ Appt 28/06 @ 9am

GST REG. NO : M2 - 0020081 - X

E S T I M A T E

Estimate No. : b1 62033
Date Estimated : 02/06/2022
Prepared By : Inthiran A/L Thurasamy

Page No. : 1 of 4

- ESTIMATE REPAIR FOR -

Tan Kay Yang
20 Newton Road
#11-03

Singapore 307953

- ACCOUNT - 224093

Allianz Insurance Singapore Pte Ltd
79 Robinson Road
#09-01
Singapore 068897

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SGB566R	WBAJG120303G76704	31/10/2018	X1 sDrive18i	44412

DESCRIPTION

To replace rear bumper and attachments.

850 1,275.00

To painting rear bumper.

986 1,038.00

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

Sundries.

80.00

Total Labour 1: 2,747.00

DESCRIPTION

REAR BUMPER TRIM PANEL BOTTOM (BASI) - cut
REAR BUMPER PANEL PRIMED X R
REAR BUMPER MIDDLE TRIM PANEL (PDC) - cut

QTY	PRIC	VALUE
1	208.45	208.45
1	907.80	907.80
1	266.90	266.90

Total Parts : 1,383.15

Stere (LKK) W PL
PIP, 3 dys

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



Labour 1	2,747.00
Parts	1,383.15
Labour 2	0.00
Excess	0.00
Total GST @ 7%	289.11
Grand Total	4,419.26

**** 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	31/05/2022 16:17 (SGT)
Date of Accident	28/05/2022 10:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF KAMPONG BAHRU AND NEIL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGB566R

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN KAY YANG
NRIC No	SXXXX451F
Email Address	KAY_TAN_D@YAHOO.COM
Mobile Phone No	(Phone) +65-96727715
Alternative Phone No	(Home) +--

VEHICLE PARTICULARS

Manufacturer	BMW
Model	X1
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	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	VPA/P2200937
Cover Note Number	-

DRIVER

Name of Driver	TAN KAY YANG
NRIC No	SXXXX451F

Date Of Birth	02/04/1971
Occupation	Indoor
Date Of Driving Pass	04/12/1989
Driving experience	32 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96727715
Alt. Phone Number	(Home) +--
Email Address	KAY_TAN_D@YAHOO.COM
Address	20 NEWTON ROAD
Address complement	#11-03
Postcode	307953
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	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)	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

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	SND7793L
Vehicle Manufacturer	Mazda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SONGTA
Contact Number	(Phone) +65-89014671
Address	-
Address complement	-



Accident report SP01225V0002

Postcode	-
Insurance Company Name	-
Nature Of Damage	FRONT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

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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.



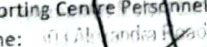
Policyholder's Signature

Date & Time:

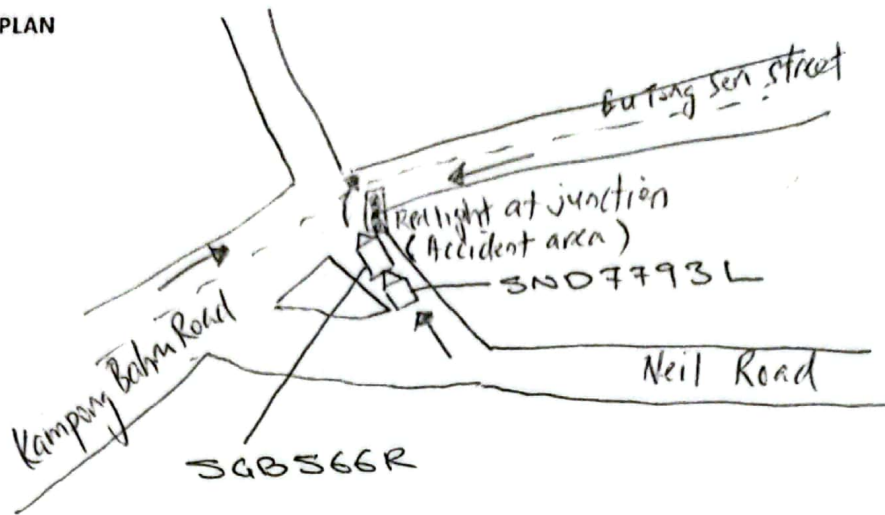
31 May 2022
9:45am

12/14/2022

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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Was at the junction of Neil Road and Kampong Bahru Road heading towards Eu Tong Sen Street and had stopped at junction as the traffic light has turned Red. This was followed by a bang to my car bumper. A mazda silver car has crashed into the rear of my car.

DECLARATION

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

Darrell Tan

Policyholder's Signature

Date & Time:

31 May 2022
9.50am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre

Name:

NRIC/FIN No.:

Thirumala Thirumala
303 Alexandra Road
Singapore 150941