

ASS. REC. BY:

REF:

AIS/220087791K943

C

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s _____ MBM

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: 6002

(Client's Record)

Make of Veh: _____

Han

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: 188K

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 1.3.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: PMV 23856 Yr Regn: 09, 20

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

Truck / Trailer or Wagon

Make: Mercedes GIB200 c.c. 1332

Colour: M. Red A/C: Insured / Std / NI / NA

Sp. Reading: 39677 T/Radio: Insured / Std / NI / NA

Eng/No: _____
C/No: WIN 247 6872 W039346

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: 235/50R19

R: _____

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

TOYO / YOKO or

Front R/Bal. 8 mm Rear R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. 14/7/22 D.O.I. 19/7/2022

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	Action / Instruction
<u>12/11</u>	<u>5503-16 Cash</u>
<u>17/1/23</u>	<u>refinalised final Ag 5992.40 (Prod 16831.40, 742)</u>

Date/Time, File Pass to?

: Prell. Report

: Final Report

1) 17/1/23 Final Ag
Date/Time, File Return to?

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation: _____

S - RS. _____ \$

Fin. Ins _____

Others _____

TOTAL

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

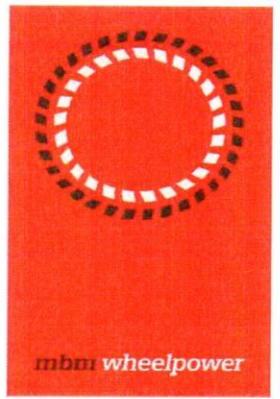
: Tech Invs (\$ _____)

: Weekend (\$ _____)

Report Format: NER-00

Lump Sum / I.B.I.: (\$ 5992-40)

MBM WHEELPOWER PTE. LTD.



YOUR REF.: SMV2385G

OUR REF.:

*Not Notified
Penny Bepam
Ex @ 600h
4 days*

TO: ALLIANZ SINGAPORE

CC: MOTOR CLAIMS DEPARTMENT

FAX:

DATE: 15/7/2022

FROM: Lee Shirley

FAX: 64525333

CONTACT: 86865188

MAKE & MODEL: MERCEDES GLB200 7-SEATER AMG

CHASSIS NO.: W1N2476872W039346

ENGINE NO.: 28291480302829

YEAR MADE: 2020

ACCIDENT DATE: 14 July 2022

ESTIMATE FOR VEHICLE NO.: SMV2385G

NO.	DESCRIPTION	PART NO.	QTY.	LIST PRICE
1	BONNET <i>2150</i>		1	\$ <i>B</i> ✓ 2,900.00
2	BONNET WEATHERSTRIP		1	\$ <i>ln</i> X 350.00
3	BONNET HINGE LH		1	\$ <i>R</i> X 118.00
4	BONNET HINGE RH		1	\$ <i>R</i> X 118.00
5	BONNET STAY LH		1	\$ <i>ln</i> X 125.00
6	BONNET STAY LH		1	\$ <i>ln</i> X 125.00
7	BONNET LOCK		1	\$ <i>R</i> X 142.00
8	BONNET LOCK CABLE		1	\$ <i>ln</i> X 77.00
9	BONNET LOCK STRIKER		1	\$ <i>R</i> X 60.00
10	BONNET LOGO		1	\$ <i>ln</i> ✓ 56.00
11	HEADLAMP LH		1	\$ <i>ln</i> X 3,700.00
12	HEADLAMP RH <i>1960</i>		1	\$ <i>mb cm</i> X 3,600.00
13	FRONT BUMPER		1	\$ <i>R</i> 2,450.00 X
14	FRONT BUMPER SPONGE		1	\$ <i>ln</i> X 160.00
15	FRONT BUMPER REINFORCEMENT		1	\$ <i>R</i> X 650.00
16	FRONT BUMPER RETAINER LH		1	\$ <i>ln</i> X 75.00
17	FRONT BUMPER RETAINER RH		1	\$ <i>ln</i> X 75.00
18	FRONT BUMPER TOWING COVER		1	\$ <i>ln</i> X 130.00
19	FRONT BUMPER CLIP		10	\$ <i>ln</i> X 80.00 X
20	FRONT BUMPER LOWER CENTER GRILLE		1	\$ <i>ln</i> X 480.00
21	FRONT RADIATOR GRILLE		1	\$ <i>ln</i> X 1,120.00 X
22	FRONT PROTECTIVE GRILLE		1	\$ <i>ln</i> X 500.00 X
23	FRONT RADIATOR GRILLE MERCEDES LOGO		1	\$ <i>ln</i> X 185.00
24	FRONT RADIATOR GRILLE EMBLEM		1	\$ <i>ln</i> X 90.00
25	FRONT PROTECTIVE GRILLE TRIM		1	\$ <i>ln</i> X 110.00
26	FRONT PROTECTIVE GRILLE TRIM		1	\$ <i>ln</i> X 1,400.00
27	FRONT RADAR SENSOR		1	\$ <i>ln</i> X 1,400.00

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:

MBM WHEELPOWER PTE. LTD.
160 SIN MING DRIVE, #06-02
SIN MING AUTOCITY
t 6262 8888 f 6452 5333
COMPANY REG. NO.: 200204110W

28	FRONT CAR PLATE GARNISH	1	\$	<i>Del</i>	<i>✓</i>	140.00
29	SUPPORT PANEL	1	\$		<i>CPS</i>	730.00 <i>✓</i>
30	FRONT AIRDUCT SEGMENT	1	\$	<i>rn</i>	<i>x</i>	340.00
31	CONDENSER	1	\$	<i>rn</i>	<i>x</i>	26.00
32	RADIATOR	1	\$	<i>rn</i>	<i>x</i>	70.00
		TOTAL:		\$		20,182.00
		LESS 10%:		\$		(2,018.20)
		PARTS TOTAL:		\$		18,163.80

SPECIAL NETT

BODY SEALANT	1	\$	<i>na x</i>	50.00
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LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS, INCLUDING TO KNOCK-OUT, WELD & STRAIGHTEN ON THE AFFECTED PARTS	\$	<i>600</i>	1,600.00
TO REMOVE, REFIT & UPHOLSTERY TO FACILITATE REPAIRS	\$	<i>na x</i>	200.00
TO CALIBRATE RADAR SENSOR	\$	<i>na x</i>	350.00
TO CHECK & RECONNECT ALL NECESSARY WIRING	\$	<i>200</i>	200.00
TO REMOVE & REFIT ALL SENSOR	\$	<i>na x</i>	250.00
TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC)	\$	<i>na x</i>	250.00
TO SPRAY PAINT ON THE AFFECTED AREAS	\$	<i>400</i>	1,400.00
TOTAL:		\$	22,463.80
7% GST:		\$	1,572.47
GRAND TOTAL:		\$	24,036.27

MBM WHEELPOWER PTE. LTD.

YOUR REF.: SMV2385G

OUR REF.:

TO: ALLIANZ SINGAPORE
 CC: MOTOR CLAIMS DEPARTMENT

FAX:

FINALISE FOR VEHICLE NO.: SMV2385G



DATE: 11/1/2023
 FROM: Lee Shirley
 FAX: 64525333
 CONTACT: 86865188
 MAKE & MODEL: MERCEDES GLB200 7-SEATER AMG
 CHASSIS NO.: W1N2476872W039346
 ENGINE NO.: 28291480302829
 YEAR MADE: 2020
 ACCIDENT DATE: 14 July 2022

NO.	DESCRIPTION	PART NO.	QTY.	LIST PRICE
1	BONNET <i>2150</i>		1	\$ 2,900.00
2	BONNET LOGO		1	\$ 56.00
3	HEADLAMP RH <i>1960</i>		1	\$ 3,600.00
4	FRONT CAR PLATE GARNISH		1	\$ 140.00
5	SUPPORT PANEL		1	\$ 730.00
SUPP	SUPPPORT PANEL TOP GARNISH		1	\$ 250.00
SUPP	FRONT SHUTTER GRILLE		1	\$ 150.00
TOTAL:				\$ 7,426.00
LESS 10%:				\$ (742.60)
PARTS TOTAL:				\$ 6,683.40

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS, INCLUDING TO KNOCK-OUT, WELD & STRAIGHTEN ON THE AFFECTED PARTS	\$ 600.00
TO CHECK & RECONNECT ALL NECESSARY WIRING	\$ 20.00
TO SPRAY PAINT ON THE AFFECTED AREAS	\$ 480.00
TOTAL:	\$ 7,783.40
7% GST:	\$ 544.84
GRAND TOTAL:	\$ 8,328.24

5503-16
B4 excess

MBM WHEELPOWER PTE. LTD.
 160 SIN MING DRIVE, #06-02
 SIN MING AUTOCITY
 t 6262 8888 f 6452 5333
 COMPANY REG. NO.: 200204110W

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	14/07/2022 13:18 (SGT)
Reported by	Both
Date of Accident	14/07/2022 07:33 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	along bukit batok road beside bus stop & overhead bridge
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV2385G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WANG DAJIE CHRISTOPHER
NRIC No	SXXXX729F
Email Address	WANGDAJIE88@GMAIL.COM
Mobile Phone No	(Phone) +65-87775586
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLB200
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	1337

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2000525565-01

DRIVER

Name of Driver	WANG DAJIE CHRISTOPHER
NRIC No	SXXXX729F
Date Of Birth	19/10/1988
Occupation	Indoor

Date Of Driving Pass	01/08/2013
Driving experience	8 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87775586
Alt. Phone Number	-
Email Address	WANGDAJIE88@GMAIL.COM
Address	BLK 807B CHOA CHU KANG AVE 1
Address complement	#15-526
Postcode	S682807
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	CHONG PEIYI MABEL
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

refer to sketch plan

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBK4837U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NAQIB
NRIC No	SXXXX445F
Contact Number	(Phone) +65-89235245
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 Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the Insurers to 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.

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.

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62, Sin Ming Ind Est
Singapore 575643
Tel: 6453 4255 Fax: 6453 7844
(Claims Section)

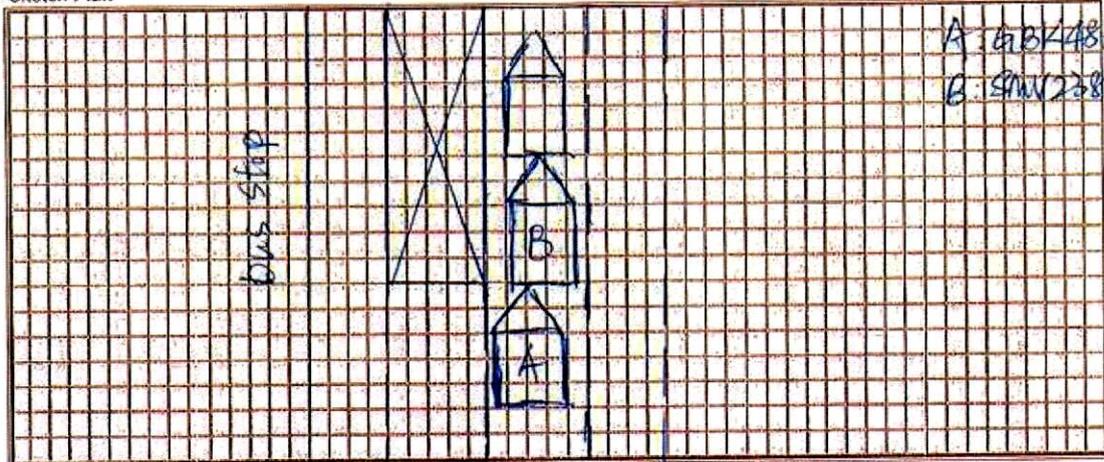
[Signature] 14/7/22

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

I was driving along Bukit Batok Road, there is this van that filters in. My speed was around 43km/h, however the van suddenbraked ~~and~~ ~~due~~ due to the vehicles at the front were stopping. ~~Thus~~ Thus not having enough reaction time and I collided into the van. Details were exchanged and there is video from my car cam.

Declaration

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


14/7/22

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 675643
Tel: 6453 4234 Fax: 6453 7944
(Claims Section)

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	729F
Vehicle Details	
Vehicle No.:	SMV2385G
Vehicle to be Exported:	Yes
Intended Deregistration Date:	14 Jul 2022
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	GLB200 7-SEATER AMG LINE AUTO
Primary Colour:	Red
Manufacturing Year:	2020
Engine No.:	28291480302829
Chassis No.:	W1N2476872W039346
Maximum Power Output:	120.0 kW (160 bhp)
Open Market Value:	\$36,572.00
Original Registration Date:	22 Sep 2020
First Registration Date:	22 Sep 2020
Transfer Count:	0
Actual ARF Paid:	\$43,201.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Sep 2030
PARF Rebate Amount:	\$32,400.00
Intended COE Rebate Details	
COE Expiry Date:	21 Sep 2030
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$38,802.00
COE Rebate Amount:	\$31,041.00
Total Rebate Amount:	\$63,441.00

The information contained herein is correct as at 14 Jul 2022

OK

Alan - Min Ghee
Headlamp LH - \$1,830 Germany
" RH - \$1,670 1-2wks
Bonnet - \$1,150 1-2week