



Sin Ming Autocare BFG Pte Ltd

176 Sin Ming Drive
 #02-05 Sin Ming Autocare
 Singapore 575721
 Tel : 6455 0600 | Fax : 6455 6192
 Website: www.autocare.com.sg
 GST Reg. No: 20-0210033-N

SCDF - Accident Claims Officer
 Transport Services Branch, Logistics Department
 91, Ubi Ave 4, Singapore 408827

Attn: Accident Claims Dept

*NOT Authorized
 L1 Pm @ 5650/hr
 Re-hung After Paint
 4 days*

ESTIMATE
 VEHICLE NO: **SLW6283Y**
 MAKE/MODEL: **BMW 420i sport**

DATE: **28.02.2023**

No.	Descriptions	Qty	Unit Price	Amount S\$
LIST ITEM:				
1	BOOT LOCK		582.15	R 582.15 X
2	RH TAILAMP	<i>urgent</i>	738.40	R 738.40 ✓
3	REAR BODY PANEL		780.50	R 780.50 X
4	REAR BODY PANEL TOP GARNISH		298.15	R 298.15 X
5	REAR BUMPER <i>1635.80</i>		1,744.60	<i>Bu</i> 1,744.60 ✓
6	REAR BUMPER REINFORCEMENT		880.10	R 880.10 X
7	REAR BUMPER BRACKET		285.15	<i>CM</i> 285.15 ✓
8	REAR BUMPER CENTRE PAD		198.35	<i>RD</i> 198.35 ✓
9	REAR BUMPER CENTRE INNER GARNISH		331.50	<i>PR</i> 331.50 X
10	REAR BUMPER REFLECTOR LH		70.35	<i>SR</i> 70.35 X
11	REAR BUMPER REFLECTOR RH		70.35	<i>SR</i> 70.35 X
12	REAR BUMPER TOW HOOK COVER		85.60	<i>SR</i> 85.60 X
13	REAR BUMPER SIDE RETAINER LH		295.80	<i>SR</i> 295.80 X
14	REAR BUMPER SIDE RETAINER RH		295.80	<i>SR</i> 295.80 X
15	REVERSE SENSOR LH		405.60	<i>SR</i> 405.60 X
16	REVERSE SENSOR RH <i>265</i>		405.60	<i>SR</i> 405.60 ✓
17	REAR BOOTLID REFLECTOR RH		580.35	<i>SR</i> 580.35 X
	<i>Rear tailgate RT ✓ 3150</i>			
	<i>Rear tailgate Reflector RH X 5% ✓ 2M ✓ 89.00</i>			
	<i>Bumper</i>			
				8,048.35

LABOUR

1	TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY		1,000.00	<i>5001</i>
2	TO PUTTY, APPLY PRIMER & SPRAY PAINT ON EFFECTED AREAS		1,000.00	<i>4001</i>
3	TO APPLY RUST-PROOFING ON REPAIRED AND REPLACED		180.00	<i>301</i>
4	TO OBN DIAGNOSTIC		<i>NN</i> 380.00	<i>X</i>

2,560.00



for Sin Ming Autocare BFG 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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	958B
Vehicle Details	
Vehicle No.:	SLW6283Y
Vehicle to be Exported:	Yes
Intended Deregistration Date:	02 Mar 2023
Vehicle Make:	B.M.W.
Vehicle Model:	420I COUPE AT D/AB SR HID NAV
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	A2520697N20B20B
Chassis No.:	WBA3N12070F994917
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$44,112.00
Original Registration Date:	28 Feb 2014
First Registration Date:	28 Feb 2014
Transfer Count:	2
Actual ARF Paid:	\$48,757.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Feb 2024
PARF Rebate Amount:	\$24,378.00
Intended COE Rebate Details	
COE Expiry Date:	27 Feb 2024
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$79,000.00
COE Rebate Amount:	\$7,809.00
Total Rebate Amount:	\$32,187.00

The information contained herein is correct as at 02 Mar 2023

OK

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 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 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	30/01/2023 11:20 (SGT)
Reported by	Driver
Date of Accident	28/01/2023 20:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LOWER DELTA ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW6283Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHENG OON TECK
NRIC No	S1569958B
Email Address	ANDREWCHENG@KINGSMEN-INT.COM
Mobile Phone No	(Phone) +65-96337377
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	420i SPORT
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	2000

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5119406357-02

DRIVER

Name of Driver	CHENG WEI MING, MATTHEW
NRIC No	S9405981Z
Date Of Birth	16/02/1994
Occupation	Indoor

Date Of Driving Pass	05/10/2013
Driving experience	9 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96698875
Alt. Phone Number	-
Email Address	MATTHEWWMCHENG@GMAIL.COM
Address	24 BEGONIA WALK
Address complement	-
Postcode	805810
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 - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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	JOSIAH JORDAN CHOO
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Timah Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004629999
Alt. Police Station Phone No	(Fax) +65-64628933
Police Station Address	1 Duke Road Singapore 268914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT FOR ACCIDENT STATEMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBF4954R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	MUHD WIRA
NRIC No	S9132555A
Contact Number	(Phone) +65-83189536
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 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 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.

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)

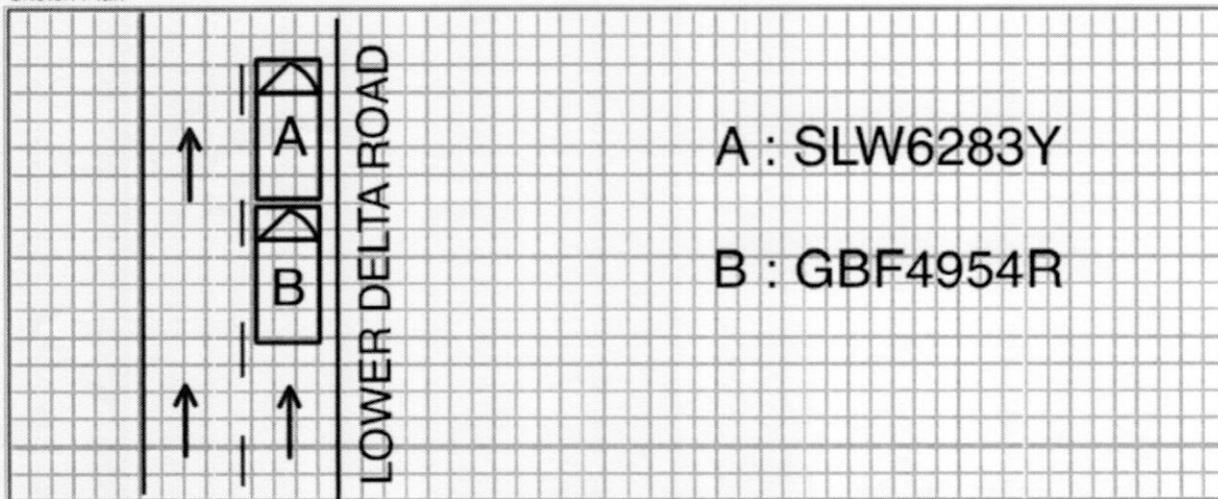


30/01/2023
1100HRS



SUMAN SUKUMAR
S990968

Sketch Plan



Describe Circumstance of the Accident

REFER TO POLICE REPORT FOR ACCIDENT STATEMENT

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
30/01/2023
1100HRS



Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)
SUMAN SUKUMAR
S990968


**SINGAPORE
POLICE FORCE**


T/20230128/2064

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

1 of 4

Report No. T/20230128/2064

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/01/2023 21:09	Vide Report No.:	Station Diary No.: 46
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Informant's Particulars

Name of Informant: CHENG WEI MING, MATTHEW		Address: 24 BEGONIA WALK SINGAPORE 805810	
ID Type / ID No.: NRIC NO / S9405981Z		Contact No.: Home/Office: Mobile: 96698875	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 28	Date of Birth: 16/02/1994	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: CONSULTANT		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 28/01/2023 20:00	Type of Location: Straight Road
Location: LOWER DELTA ROAD			
Weather: Drizzling	Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF4954R	SCDF Vehicle				Slightly Damaged	2
SLW6283Y	Car				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230128/2064

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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Report No. T/20230128/2064

CONTINUATION OF REPORT

Driver			
Name	Muhd Wira	ID No.	S9132555A
Related Vehicle	GBF4954R (SCDF Vehicle)	Contact No.	83189536
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHENG WEI MING, MATTHEW	ID No.	S9405981Z
Related Vehicle	SLW6283Y (Car)	Contact No.	96698875
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 28/01/2023 at about 2000hrs, I stopped my vehicle (SLW6283Y) along Lower Delta Road in front of the red light. Suddenly, one SCDF vehicle (GBF4954R) collided head on with my vehicle from the rear. I went down to make check. The other driver did not appear to be injured and we both exchanged particulars. I had 1 passenger in my vehicle and there were 2 passengers in the SCDF vehicle. No one was injured.

The following are the particulars of the other driver:

Name: Muhd Wira
NRIC: S9132555A
HP: +65 8318 9536

Due to the accident, the rear lower bumper was scratched, cracked, and dented while the boot was dented. The front bumper of the SCDF vehicle was dented and cracked. Their license plate was crooked. No other properties were damaged. Since I had to drop off my passenger, I left before traffic police arrived.

My in-car camera was not recording. The SCDF vehicle has in car camera. I have pictures of the accident. I am lodging this report for record and insurance purposes.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999



T/20230128/2064

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Report No. T/20230128/2064

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20230128/2064

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

4 of 4
Report No. T/20230128/2064

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

E /
SCCPL AHMAD SYAFIQ BIN
ABD RAZAK

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
28/01/2023 21:09

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

Classification Of Case:

NP168