	ASSIGNMENT 156B
Estimated Cost:	Veh No: SDA 868K Yr Regn: 2015 / Jun
OD LAP I WS I TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
	the standard
To Inspect Vehicle No: SDA P68K at Workshop m/s PERFORMANCE	Make: B.M.W J8 LED c.c (499) Colour WHIE AC: Insured / Std / NI / NA
of Methods to	Sp.Reading 92050 T/Radio: Insured / Std / NI / NA
Insured: EZ 2662E CTI	Eng/No:
Policy No.	CNO: WBY 27 22040 VX68446
Claims No. SNM24D204741	Gen. Cond: Good / Fair/ Poor / Burnt
Sum Insured: Excess:	Steering: (norder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: (Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /SIRIm / STD A/Rim or
	Tyre Size: F: 2(5/45/20
(Policy Condition)	R:
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR SUMI /
repair at the time of inspection.	ТОУО Л УОКО ог
Sal. or Market Value: 130K	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bai. 7 mm R/Bai. 7 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bail. 7 mm L/Bail. 7 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 13 08 24 D.O.I. (0 (6)24
Lum Sum: % 3 Val.: Yes or No	Survey held at MTXANDRA
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle:	The state of the s
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction ,	
PEDDIA LIMIT - 42K	
REPAIR LIMIT- 42K	and the second s
REPAIR LIMIT- 42K	04.65 (425, 7%)
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REPAIL LIMIT— 42K 23/12/24 Rasul confirmed final fig \$530 effine, Fie Pass to? Prell. Report	Days Of Repair: 4
Preli. Report Final Report	Days Of Repair: 4 Resurvey No. of Trip: Survey Fee:
27 Rasul confirmed final fig \$530 effime, File Pass to? Preli. Report : Final Report	Days Of Repair: 4 Resurvey No. of Trip: Survey Fee:
PERAL LIMIT— 42K 23/12/24 Rasul confirmed final fig \$530 effirms, Fie Pass to? Prell. Report Final Report	Days Of Repair: 4 Resurvey No. of Trip: Survey Fee: Transportation: Id Fee: Site Insp (\$)s+Rssi
PERUL LIMIT— 42K 23/12/24 Rasul confirmed final fig \$530 effine, Fie Pass to? Preli. Report Final Report	Days Of Repair: 4 Resurvey No. of Trip: Survey Fee:

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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 64796624 (AfterSales) (Motorrad)

GST REG. NO : M2 - 0020081 - X

ESTIMATE

Hug 2024

10.30

Page No. : 1 of 4 70945 Estimate No. : b1 : 21/08/2024 Date Estimated : Inthiran A/L Thurasamy Prepared By 40000 ACCOUNT -ESTIMATE REPAIR FOR -LKK Au6 3 hsuffants fience notiff vice Christopher Ng Chee Mun 4 Oueen Astrid Garden the Repairer SARP following: To resurvey before/after spray painting SINGAPORE To display damaged part(s) during resurvey Singapore 266860 • Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" bas • Na illegal modification(s) is allowed MILEAGE CHASSIS NO. REG REGN. NO. • Supplementary item(s) must be resurveyed and 26/06/is-subject to final-approval from Insurance Company 87028 WBY2Z22040VX65446 SDA868K Acknowledged by Repairer VALUE DESCRIPTION Signature: 1275 1,700.00 To make good of front bumper. Date: 1,557.00 To painting front bumper. (2 colour) 177.00 To check electrical wiring system of the front section for proper function. 177.00 To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function. 80.00 Sundries // Uninsured losses / Direct Settlement 3,691.00 Total Labour 1: Claims OD / 3rd Pa Claim No. Regn No. Excess S\$ RASur Sign _ Surveyor's Name 9000008 Authorised _ Surveyor's Tel Time Authorised Date RESURVEY PARTS PHOTO BY SURVEYOR Yes / No Surveyor's E-mail No. of Working Days Recommend



3,691.00 Labour 1 0.00 Parts 0.00 Labour 2 0.00 Excess 332.19 Total GST @ 9%

Grand Total

4,023.19

^{**} 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 Actual Driver

- I his Form must be compared by the Policytropia and accurate as possible. Any wilful misrepresentation or witholding 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 First Submission 15/08/2024 19:02 (SGT) Reported by **Both Policyholder and Actual Driver** Date of Accident 13/08/2024 14:30 (SGT) Exact Location of Accident 1 Orchard Blvd, Singapore 248649 Additional Location Information CAMDEN MEDICAL CENTRE B1 CAR PARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDA868K

INSURED/POLICYHOLDER

is company? ... Name Of Registered Owner CHRISTOPHER NG CHEE MUN NRIC No SXXXX156B Email Address drchrisng@hotmail.com Mobile Phone No (Phone) +65-97687168 Alternative Phone No +65-98336866

VEHICLE PARTICULARS

Manufacturer **BMW** Model Variant Exact purpose for which vehicle was being used at time of Private use accident 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 Vehicle Fuel First Regisration Date Chassis no

INSURANCE COMPANY

Effective Date/Time of Ownership

Liberty Insurance Pte Ltd Name of Insurance Company Policy Number / Cover Note Number

DRIVER

of Driver CHRISTOPHER NG CHEE MUN SXXXX156B Of Birth 03/10/1968 upation Indoor ing Pass Date 01/03/1989 ving License Pass Class 3 **Driving License Validity** Valid **Driving** experience 35 YEARS AND 5 MONTHS Gender Male Mobile Number (Phone) +65-97687168 Alt. Phone Number +65-98336866 **Email Address** drchrisng@hotmail.com Address **4 QUEEN ASTRID GARDENS** Address complement Postcode. S266860 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Yes Vehicle Registration Number of Other Vehicle Owned by Driver SLD6299C Insurance Company of Other Vehicle Owned by Driver Liberty Insurance Pte Ltd GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collided into Parked Vehicle Weather Conditions Clear Road Surface Drv 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) 0 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 **DETAILS OF POLICE ACTION** Yes Was the accident reported to the police? **Tanglin Division Headquaters Police Station Name** (Phone) +65-18003910000 Police Station Phone No (Fax) +65-63964900 Alt. Police Station Phone No 21 Kampong Java Road Singapore 228892 Police Station Address Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED SKETCH PLAN AND POLICE REPORT. ATTACHMENT(S) Are accident photos available for attachment? Yes

No

Was there any video captured by Car Camera?

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DETAILS OF OTHER VEHICLE PROPERTY 1

intration Number	EZ2662E
Registration Number	Honda
1- Mallo	Shuttle
	• 1
	Gray
vehicle Colour vehicle Category vehicle of Driver	Private car
Vehicle Octob	•
Vehicle Name of Driver Contact Number	. .
Contact	•
Address complement	
postcode psurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
of Damage	•
etails of property damaged in accident	•
o Of Passenger (Including Driver)	

WITNESS DETAILS

WITNESS 1

Name Phone **Email**

PEARLYN TAN (Phone) +65-98249668 pearlyntanjq@gmail.com

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.
- 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. 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
- (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

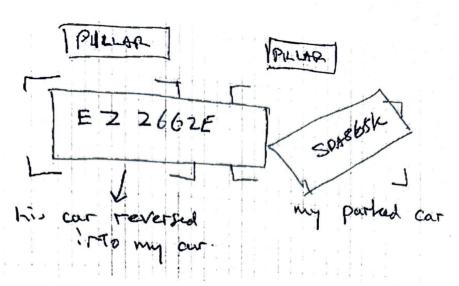
(ii) for complying with requirements under any regulations, laws or court orders

Policyholder's

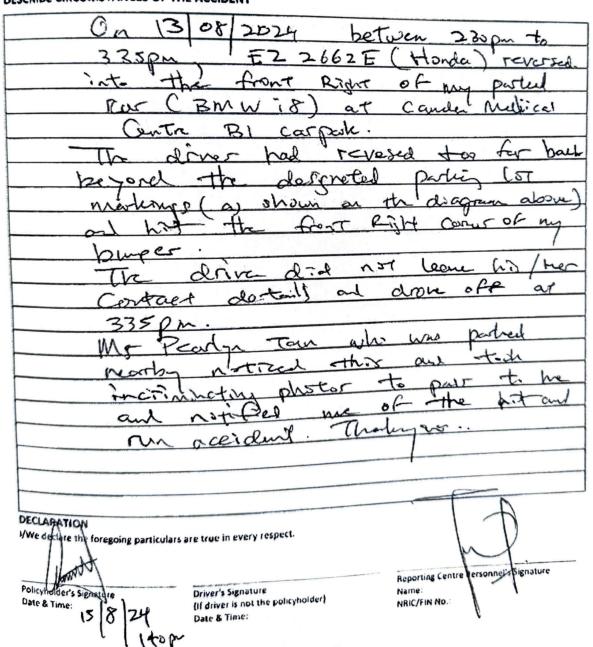
Driver's Signature (If driver is not the policyholder) Date & Time:

Personnel Signature Reporting Centr Name:

NRIC/FIN NO.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	156B
Vehicle Details	
Vehicle No.:	SDA868K
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Oct 2024
Vehicle Make:	B.M.W.
Vehicle Model:	18 LED HUD NAV
Primary Colour:	White
Secondary Colour:	Blue
Manufacturing Year:	2014
Engine No.:	A003O860B38K15A
Chassis No.:	WBY2Z22040VX65446
Maximum Power Output:	266.0 kW (356 bhp)
Open Market Value:	\$118,226.00
Original Registration Date:	26 Jun 2015
First Registration Date:	26 Jun 2015
Transfer Count:	0
Actual ARF Paid:	\$164,807.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Jun 2025
PARF Rebate Amount:	\$82,403.00
Intended COE Rebate Details	
COE Expiry Date:	25 Jun 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$71,509.00
COE Rebate Amount:	\$5,045.00
Total Rebate Amount: Message	\$87,448.00
	current COE (including unused COE from any lay-up period/s), if you renew your CO

The information contained herein is correct as at 11 Oct 2024

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