

(08/11/9) Wef
ASS. REC. BY:

REF: CS/CTI 24080386/XXh3

156B

106-2025/200

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SDA 868K
at Workshop m/s PERFORMANCE
of REXAMRA
Insured: CTI
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: 266k
IDAC Accident Rpt: Consistent? : Yes or No
GIA / PR Seen: Consistent? : Yes or No
Est. Repairs: days Res.: Yes or No
Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SDA 868K Yr Regn: 2015 / Jan
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or

Make: B.M.W 1840 C.C. 1499
Colour: WHITE A/C: Insured / Std / NI / NA
Sp. Reading: 93250 T/Ratio: Insured / Std / NI / NA

Eng/No: _____
C/No: WB4 22 22040 VX68446
Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or
Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 215/45R20
R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front		Rear	
R/Bal.	<u>7</u> mm	R/Bal.	<u>7</u> mm
L/Bal.	<u>7</u> mm	L/Bal.	<u>7</u> mm
D.O.A.	<u>13/08/24</u>	D.O.I.	<u>10/10/24</u>

Survey held at REXAMRA
Des. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

REPAIR LIMIT - 178K

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

) : S + RS. \$ _____

) : Photos

) : Others

Report Format :

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

TOTAL

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)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

→ China
23 Aug 2024

Estimate No. : b1 70945
Date Estimated : 21/08/2024
Prepared By : Inthiran A/L Thurasamy

Page No. : 1 of 4

- ESTIMATE REPAIR FOR -

Christopher Ng Chee Mun
4 Queen Astrid Garden

SINGAPORE
Singapore 266860

- ACCOUNT - 40000

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

REGN. NO. CHASSIS NO.
SDA868K WBY2Z22040VX65446

REGN. DATE
26/06/2015

MILEAGE
87028

DESCRIPTION

To make good of front bumper.

To painting front bumper. (2 colour)

To check electrical wiring system of the front section
for proper function.

To remove old PDC assembly, replace damaged parts and
reconnect to new bumper including conduct check for
proper function.

Sundries

Acknowledged by Repairer

Signature:

Date:

VALUE

1275 1,700.00

1,557.00

177.00

177.00

80.00

Total Labour 1: 3,691.00

Claims OD / 3rd Party / Uninsured losses / Direct Settlement

Regn No. Claim No.

Date & Time 10/10/24 Excess S\$

Surveyor's Name RASUN Sign

Surveyor's Tel 96014568 Authorised Yes / No

Authorised Date Time

RESURVEY PARTS PHOTO BY SURVEYOR Yes / No PML Yes / No

Surveyor's E-mail

No. of Working Days Recommend 3 days - 4



Labour 1 : 3,691.00
Parts : 0.00
Labour 2 : 0.00
Excess : 0.00
Total GST @ 9% : 332.19
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
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 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?	No
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	I8
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
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

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

DRIVER

Name of Driver
AIC No
Date Of Birth
Occupation
Driving Pass Date
Driving License Pass Class
Driving License Validity
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

CHRISTOPHER NG CHEE MUN
SXXX156B
03/10/1968
Indoor
01/03/1989
3
Valid
35 YEARS AND 5 MONTHS
Male
(Phone) +65-97687168
+65-98336866
drchrisng@hotmail.com
4 QUEEN ASTRID GARDENS
-
S266860
Yes
-
Yes
SLD6299C
Liberty Insurance Pte Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collided into Parked Vehicle
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
Translator's name
Translator's ID
Translator's phone number
Translator's email
Original language used in the statement

No
2
No
-
Yes
0
No
-
-
-
-
-

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Tanglin Division Headquarters
(Phone) +65-18003910000
(Fax) +65-63964900
21 Kampong Java Road Singapore 228892
No
-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND POLICE REPORT.

ATTACHMENT(S)

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

Yes
No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EZ2662E
Vehicle Manufacturer	Honda
Vehicle Model	Shuttle
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

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

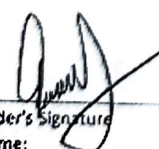
SKETCH PLAN

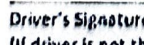
IMPORTANT NOTICE

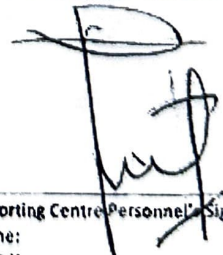
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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:

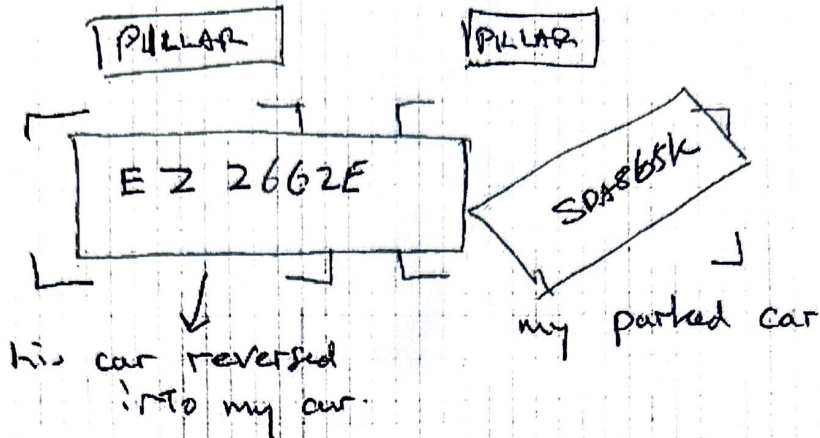
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 "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:


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

On 13/08/2024 between 230pm to 335pm, EZ 2662E (Honda) reversed into the front Right of my parked car (BMW i8) at Camden Medical Centre B1 carpark.

The driver had reversed too far back beyond the designated parking lot markings (as shown in the diagram above) and hit the front Right corner of my bumper.

The driver did not leave his/her contact details and drove off at 335pm.

Ms Pearlina Tan who was parked nearby noticed this and took incriminating photos to pass to me and notified me of the hit and run accident. Thank you..

DECLARATION

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

Policyholder's Signature

Date & Time:

15/8/24
11:00pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[> 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:	I8 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:	\$87,448.00
Message	
You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.	

The information contained herein is correct as at 11 Oct 2024

OK



BMW i8 Coupe (New 10-yr COE)

\$258,888 Instalment \$2,573/mth

💰 Apply for 2.75% loan

♡ Shortlist

✔ Get Warranty



Overview

Financial

Photo

Research

Depreciation

📘 \$25,870 / year

Reg. Date

23-Feb-2015

(10yrs COE left)

Manufactured

📘 2014

Mileage

40,000 km (4.2k / year)

Transmission

Auto

Engine Cap

1,499 cc

Road Tax

📘 \$684 / year

Power

266.0 kW (356 bhp)

View specs of the [BMW i8 Coupe \(2014-2020\)](#)

Curb Weight

📘 1,485 kg

COE

📘 -

OMV

📘 \$127,063

ARF

📘 \$180,714

No. of Owners

📘 2