

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)



* Survey wait
27/9 @ 10.30am
→ China

GST REG. NO : M2 - 0020081 - X

→ Etiga
23/09/24

E S T I M A T E

Estimate No. : **b1 71267**
Date Estimated : **23/09/2024**
Prepared By : **Yap Mee Key**

Page No. : 1 of 5

- **ESTIMATE REPAIR FOR -**
Ong Han Meng (Wang Hanming)
12 Ang Mo Kio Avenue 2
#04-14. The Panorama

Singapore 567697

- **ACCOUNT - 40000**
Cash Sales - Service
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMM35C	WBA72AG000CG10161	25/05/2021	520i Sedan	46443

DESCRIPTIONVALUE

To replace rear bumper, inner support, make good trunk floor right, end panel, right fender, tailgate and attachments.

3,825.00

To respray rear bumper, rear right fender, tailgate, end panel, right trunk floor and affected areas.

4,235.00

To carry out body cavity preservation.
(For cut panel).

531.00

To replace rear silencer, exhaust pipe, heat shield, front exhaust silencer including to align system.

1,121.00

To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (1x).

531.00

To remove and install rear boot compartment interior carpet and garnish to facilitate repairs.

271.00

To remove and install fuse box at the rear section to facilitate repair.

531.00

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

177.00

Sundries.

150.00

Total Labour 1: **11,372.00**DESCRIPTIONQTYPRICVALUE

C CLIP FOR PLASTIC NUT

2

1.25

2.50

RH TAILPIPE TRIM CHROME

1

206.65

206.65

REAR SILENCER WITH EXHAUST FLAP

1

2,756.40

2,756.40

INTERMEDIATE PIPE

1

682.65

682.65

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SMM35C	WBA72AG000CG10161	25/05/2021	520i Sedan	46443

DESCRIPTION	QTY	PRIC	VALUE
REAR SPRING STRUT	1	574.00	574.00
RH TRUNK FLOOR	1	529.10	529.10
OUTER PANEL TAIL TRIM	1	632.00	632.00
Necessart left foil	1	14.70	14.70
Necessary right foil	1	14.70	14.70
REAR BUMPER CARRIER	1	633.60	633.60
REAR BUMPER TRIM STRIP	1	49.35	49.35
RH ABSORBER FUNNEL (SRR)	1	55.50	55.50
REAR BUMPER BOTTOM TRIM PANEL	1	329.90	329.90
REAR CENTRE GUIDE	1	189.85	189.85
REAR RH GUIDE	1	203.40	203.40
REAR BUMPER BOTTOM REINFORCEMENT	1	177.55	177.55
REAR TOWING EYE COVER PRIMED	1	57.50	57.50
REAR BUMPER TRIM PANEL (PDC/PMA)	1	1,731.95	1,731.95
Necessary set mount	1	75.55	75.55
HEAT INSULATOR FLOOR PANEL TRUNK	1	90.00	90.00
BLIND PLUG	1	5.15	5.15
(DG/SL) BMW AGM BATTERY 105 AH	1	854.95	854.95
EXPANDING NUT	10	0.55	5.50
REAR RH REAR REFLECTOR	1	45.70	45.70
REAR RH LIGHT SIDE PANEL LED	1	606.40	606.40
REAR RH LIGHT TAILGATE LED	1	390.25	390.25
RH GUTTER STRIP	1	54.05	54.05
DECOUPLING RING	2	5.65	11.30
ULTRASONIC SENSOR SOPHISTO GREY	2	404.25	808.50
RADAR SENSOR SHORT RANGE	1	1,365.45	1,365.45
(DG/SL) SEALANT D1 (300ML)	1	53.15	53.15

Total Parts : **13,207.25**



Labour 1	:	11,372.00
Parts	:	13,207.25
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 9%	:	2,212.13
Grand Total	:	26,791.38

**** 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 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 First Submission	23/09/2024 11:48 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	22/09/2024 10:20 (SGT)
Exact Location of Accident	Ang Mo Kio Ave 8, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM35C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONG HAN MENG (WANG HANMING)
NRIC No	S7602761G
Email Address	NELSON.ONG@TI.COM
Mobile Phone No	(Phone) +65-97460703
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	520i
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
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5131913744-01

DRIVER

Name of Driver	ONG HAN MENG (WANG HANMING)
NRIC No	S7602761G
Date Of Birth	05/02/1976
Occupation	Indoor
Driving Pass Date	03/09/2010
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	14 YEARS
Gender	Male
Mobile Number	(Phone) +65-97460703
Alt. Phone Number	-
Email Address	NELSON.ONG@TI.COM
Address	12 ANG MO KIO AVENUE 2
Address complement	#04-14
Postcode	567697
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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	WIFE
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

I WAS STATIONARY ON LANE 2, SUBSEQUENTLY VEHICLE B'S FRONT COLLIDED INTO MY REAR RIGHT. THE COLLISION WAS CAUSED BECAUSE VEHICLE C COLLIDED INTO THER REAR OF VEHICLE B.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	EMAIL TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGL1399Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEE KEH GUAN
NRIC No	S6972242C
Contact Number	(Phone) +65-97516587
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SNN1634A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIOW ZENGQUAN
NRIC No	S9747573C
Contact Number	(Phone) +65-87333433
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:

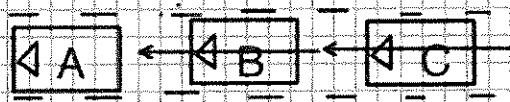
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


 23092024/1100HRS
 Policyholder's Signature / Date & Time

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


 MUHAMMAD ZAKI BIN SUPIAN
 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)

Sketch Plan

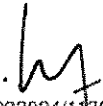
<p>A: SMM35C B: SGL1399Y C: SNN1634A</p>	
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2 of 2


Describe Circumstance of the Accident

Declaration

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


 23092024/1130HRS
 Policyholder's Signature / Date & Time

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


 Muhammad Zaki bin Supian
 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

snn1634a

Date of Accident

22/09/2024 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance Etiqa Insurance Pte Ltd

Period of Insurance 27/11/2023 - 26/11/2024

Requested By Tok Ke Xuan, Winnie (Perform...

Requested Date 23/09/2024 14:53

Payment details

Request Amount: **S\$2**

GST Amount: **S\$0.18**

Total Amount Due (GST Inclusive): **S\$2.18**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**