ASS. REC. BY: Tauffin - NEW: CS SPF24120258 T973 ASSIGNMENT Veh No: SNA6585T Yr Regn: From: Date: **Estimated Cost:** Typs: M. Oar / M. Cycle / Bus / Van / Lorry / Taxl / Prime Mover / OD 1 1 WS 1 TP RES / OD RES / EVA / INV / MY Truck / Trailer or Make: BMW 2161 To Inspect Vehicle No: at Workshop m/s A/C: Insured / Std / NI / NA T/Radio: Insured / Std / NI / NA insured: Eng/No: Policy No. C/No: Gen. Cond: Good / Fair / Poor / Burnt Claims No. Sleering: Inoider / Jammed / Leaked / Burnt or Sum Insured: Excess: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Modl: NII / \$/R)m / STD A/Rim or Make of Veh; Tyre Size: (Policy Condition) OIS Remark: The veh had commenced its BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. TOYO / YOKO or Rear Ball or Market Value: Front R/Bal. R/Bal. IDAC Accident Roort mm L/Bal, UBal. Consistent?: Yes or No mm GIA / PR Seen: D.O.I. D.O.A. Res.: Yes or No days Est. Repairs: 3 Val.: Yes or No Survey held at Lum Sum: DIS) I NIS I UIG I ROOftop or Des. of Damages : Frt / Rear / CA / REV / REP. / 24 HRS Vehicle: IN / OUT Dale: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time | Action / Instruction

<u>47.55, 8 days (Red \$3721.5</u>	50, 25%)	
5)		
		
	,,,,,,	
Days Of Repair:8	Survey Fee:	
	Days Of Repair:8	Days Of Repair:8

Dale/Time, File Return to?

Porter : Add Fee: Site Insp (\$

: Interview (\$ Tech. Invs (\$ Westished (\$

TOTAL

Suy & Puri relizion

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 Bast 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

→QX5274

ESTIMATE

17 Dec 2024

Estimate No. : b1 72115 Page No. : 1 of Date Estimated : 13/12/2024 Prepared By : Chua Kee Sin	5
- ESTIMATE REPAIR FOR ACCOUNT - 40000 Hong Ching Chung Cash Sales - Service 37 CHEMPAKA AVENUE Singapore	
SINGAPORE 349650	
REGN. NO. CHASSIS NO. REGN. DATE MODEL MILI SNA6585T WBA2X920407H97821 01/07/2021 2161 Active Tourer 349	EAGE 92
DESCRIPTION Replace right rear door ,right lower sid e skirting include remove attachment etc and carryout necessary repairing work on right rear side fender and	VALUE 3,825.00
rear bumper	17
Painting rear bumper,right rear side fender,right rear side door ,right lower / side skirting and right roof frame	4,294.00
To carry out body cavity preservation. (Per panel).	118.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (1x).	/531.00
To check electrical wiring system and lighting at the rear section for proper function.	177.00
To transfer lock mechanism from old to new door including conduct check on new door power window system for proper function. (1 door).	531.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (1x).	531.00
To replace tyre and wheel rim including balancing. (1x). right rear	94.00
Sundries.	150.00
Total Labour 1:	10,251.00
DESCRIPTION QTY PRIC	VALUE
PLUG IN RETAINER 10 2.45 ALLOY RIM 7.5X17 DOUBLE SPK 549 1 946.50 168.50 168.50 168.50 168.50	24.50 d - 946.50

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 (AfterSales) (Motorrad) Fax. 64796601 64796624



GST REG. NO: M2 - 0020081 - X

ESTIMATE

Estimate No.

72115 : b1

Date Estimated Prepared By

: 13/12/2024

: Chua Kee Sin

Page No. : 2 of 5

REGN. NO.

CHASSIS NO.

REGN. DATE

MODEL

MILEAGE

SNA6585T

WBA2X920407H97821

01/07/2021

216i Active Tourer

34992

DESCRIPTION	QTY	PRIC	VALUE
RR RH DOOR	1	1,356.25	6/1,356.25
RH LOWER REAR DOOR HINGE	1	67.45	× 67.45
RH UPPER REAR DOOR HINGE	1	67.45	✓ 67.45
RH SUPPORT SILL	1	16.80	16.80
REAR RH DOOR BRAKE	1	84.35	v / ′ % 84.35
FOAM SEAL	2	24.00	48.00
REAR RH DOOR INNER WEATHERSTRIP	1	60.90	N" 7 8 60.90
REAR RH DOOR CORNER TRIM	1	64.05	₹ 64.05
Seal, trim,	1	18.15	18.15
Seal, corner	1	27.20	27.20
RH SEALING COLUMN B BOTTOM	1	62.70	₩ × 62.70
REAR RH DOOR OUTER CHANNEL COVER (A	1	104.90	\ \ \ X 104.90
REAR RH DOOR WINDOW FRAME COVER (AL	1	56.75	1 X 56.75
RR RH DOOR SOUND INSULATING	1	86.30	µ^ ገ ፟፠ 86.30
REAR DOOR JOINT SEAL	1	36.90) × 36.90
REAR DOOR EDGE PROTECTION	1	181.30	Van L X 181.30
CLIP	10	0.90	Xnn 🚣 9.00
RH SILL TRIM PRIMED	1	204.00	Rr 204.00
FRT RH RETAINING STRIP SILL	1	113.15) (113.15
RR RH RETAINING STRIP SIDE SILL MID	1	113.15	MM 4 7 113.15
RR RH RETAINING STRIP SILL	1	94.30	94.30
FRT RH APERTURE COVER	1	44.80	L X 44.80
GROMMET	2	5.70	nu met 11.40
	Tot	tal Parts	: 3,900.25

Taufhin 97495749

WP/ 16 le [250 1130

P/P Rosmy before paint taufhin c'hhandoun.

Ofdays

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



10,251.00 Labour 1 -- 3,900.25 Parts 0.00 Labour 2 0.00 Excess 1,273.61 Total GST @ 9%

:

Grand Total

15,424.86

^{**} THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**

[&]quot;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 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 13/12/2024 10:20 (SGT)

Reported by Actual Driver

Date of Accident 12/12/2024 08:00 (SGT)

Exact Location of Accident Singapore

Additional Location Information CTE (AYE) SLIP ROAD INTO PIE (TUAS) LP 359526F

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SNA6585T

Venicle Registration Number	SINAUSOST
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No	SXXXX598C CC9HONG@GMAIL.COM (Phone) +65-92379913
Alternative Phone No	•

VEHICLE PARTICULARS

Valida Decimentian Number

Manufacturer Model	B.M.W. 216I ACTIVE TOURER
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? Vehicle Category	No - Claiming third party Private car
Transmission	Auto
CC	1499
Vehicle Fuel	Petrol
Chassis no Effective Date/Time of Ownership	01/07/2021 WBA2X920407H97821 01/07/2021 03:07 (SGT)

INSURANCE COMPANY

Name of Insurance Company		 EQ Insurance Company	Ltd
Policy Number / Cover Note Number	 -) n	 DMPPHQ24-006574	

DRIVER

Name of Driver	TAN CHAI HAR
NRIC No	SXXXX014A
Date Of Birth	07/01/1963
Occupation	Indoor
Driving Pass Date	29/12/1984
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	40 YEARS
Gender	Female
Mobile Number	(Phone) +65-97803781
Alt. Phone Number	(Filone) +05-97603761
Email Address	CC9HONG@GMAIL.COM
Address	37 CHEMPAKA AVENUE
Address complement	37 CHEMPAKA AVENUE
Postcode	349650
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	
	Spouse
Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	No
Insurance Company of Other Vehicle Owned by Driver	·•
ilisurance Company of Other Vehicle Owned by Driver	; = .
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Callinian Change large large
Weather Conditions	Collision - Change/cross lane Clear
Road Surface	Dry
	*
OTHER INFORMATION	, <u>j</u>
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)	1
Has the driver been approached by unknown person(s)	NI-
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	
and the second of the second o	Ver
Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	
,	
CIRCUMSTANCES OF ACCIDENT	
	+
REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.	
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	OVEDZU
Vehicle Manufacturer	QX52/U
Vehicle Model	•
	-
Vehicle Colour	_
Vehicle Category	Government
Name of Driver	Government
Contact Number	
Address	
Address complement	-
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	•
Details of assent descend to the state of th	*
Details of property damaged in accident	•
No. Of Passenger (Including Driver)	_

Describe Circumstance of the Accident	25863
	35950
My Vehicle A: SWA 6585T Vehicle B: QX 507U Vehicle C:	LIEGINA!
73,000	
I was driving my car SNAGSEST along CTE (AYZ) above	
road into PAT (TURI) 5000 (1E (MYZ) alique	2
road into PUT (TUA)). Specifically along John Toalayth, was	behild
	win ldr 6
	D7 1
The Street Follow Con Street and Con	ar on
the constraint side.	
Nu - a l'ale	
My car back side sout dow B damaged and back light Rabo	scrotched.
hight back wheel is also scratched.	
Attached Police Report No. 7/20241212/7126	
7/2024/212/2126	
	∤
Claim OD TD - LALLY W.	
Claim OD/TP at Ah Lim Motor CO Claim OD/TP at other workshop Reporting Only	
marks : Please forward a copy of my efile accident Report to	
My Workshop :	
Workshap Email Address	
Note: Please take note that your insurer have a 14 days timeframe for you to submit own damage claim under you policy. Kindly check with your own insurer for more information	r own
Deplaration	
We declare the foregoing particulars are true in every respect	
\mathcal{M}	
Discyholder's Signature (Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Apporting Centre Pens	onnel
/ Date & Time (Name as in NRICAD card)	

vJun2022

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 willul 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 lonvarded by the lesurers to the GLA 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 todgement of this report to the incurers, 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' taxyers/taw.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) administrating 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): ans/or
- (v) complying with applicable law in administering, processing, handling ancier dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' buryars/law limis, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes, and
- (c) iffy Personal information may/can be disclosed by any of the Insurers after GIA to their third-party service providers or agents (awyers have firms), which may be saled outside of Singap one or more of the above Purposes

Policyholder's Signature / Date & Time

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

Winessed by Res (Name as in NRICAD C

Sketch Plan

Jalan Ton Payon or Tea Rayon.

Accident report SA2924CCM003

Page 5 of 27



T/20241212/7126

Police Station Of Origin; Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20241212/7126

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/12/2024 22:53		ade:	Vide Report No.: E/20241212/0048	Station Diary No.:
Informan	rs Particular	Bry July 100	PARTITION TO THE PARTY.	Caracherona danim - 12
Manue of	Informant ing Chung		Address: 37 Chempaka Avenue SINGAPO	
ID Type	/ ID No.;) / S1611598	BC	Contact No.: Home/Office:	Mobile: 92379913
Nationali SINGAP	ty: ORE CITIZE	N	Email: con	
Sex: Male	Age: 61	Date of Birth: 03/10/1963	Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	* ·
Occupati Manufaci	on; luring manag	ger	Oriving Licence Information: Class:	Date of Expiry:

General Information	of the Accident			Anna I e a cara a a a a a a a a a a a a a a a a	
Type of Accident:	Non-Injury Police Vehicle		Orink Drive: No	Date/Time of Accident 12/12/2024 08:00	
Location:					
JALAN TENTERAN	٨				•
Weather: Clear		Road S Dry	iurlace:		
Traffic Flow: One Way		Traffic (Control: ntrolled		affic Volume: oderate
Type of Collision: Between Moving Vo	ehicles - Side Swipe - S	Same Dire	ection		nyone conveyed by nbulance:

Details of ve	hicle Involved		. "	그 그 전 역 보고	XY.Valland	A. 18 6 2 18 8
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
QX527U	Police Vehicle			White	Slightly Damaged	0
SNA6585T	Motor car	BMW	216	Beige	Slightly Damaged	0

Details of Vehicle Insurance		CHARTET STATE				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date		
SNA6585T	EQ INSURANCE COMPANY LTD.	DMPPHQ24-006574	01/07/2024	30/06/2025		



T/20241212/7126

2 of 3

Report No. T/20241212/7126

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Detaits of Person I	nvolved	**					
Any Pedestrian Inv	volved: No						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA				
Driver	3 (1)		· ,				
Name	TAN CHAI HAR			ID No.		\$1624014A	
Related Vehicle	SNA6585T (Motor car)			Contact No.		97803781	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date Di			charge NIL			
No. of Days granted Medical Leave (MC) NIL		NIL	Degree of Injury ML		NIL		
Vehicle Owner	. 6.	D XD					
Name	HONG CHING CHUNG			ID No.		S1611598C	
Related Vehicle	NIL			Contact No.		92379913	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disch	Date Discharge NIL		Lucia de la composición dela composición de la composición dela composición de la co	
No. of Days granted Medical Leave (MC) NIL			Degree of Injury NIL		NIL		

Brief Details.

My wife (I/C# \$1624014A - Tan Chai Har) was driving my car \$NA6585T along CTE/AYE \$1624014A - Tan Chai Har) was driving my car \$NA6585T along CTE/AYE \$1624014A - Tan Chai Har) was driving along Jalan Toa Payoh towards Tuas. She was behind a police car QX527U on the right lane. Police car turned right towards Toa Payoh Lor 6. She continue on the same tane towards PIE Tuas. The Police car suddenly changed tane from Toa Payoh \$160 proad back and knocked my car at the right side back door.

My car right back passenger door is damaged. Right back light is scratched, Right back wheel is also scratched. The driver and passenger in the Police car both admitted that this is their fault. However, this involved Police car, so we waited until Traffic police arrived and recorded this case.

Case # is E/20241212/0048.

Investigation Officer is Mr. Fadil, contact number is: 65476845



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



3 of 3

Report No. T/20241212/7126

CONTINUATION OF REPORT

Signature Of Officer Recording The Report Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2024 22:53
Officer in Charge Of Case: TP / DDGVT / JOFILIANO BIN MOHAMED ALI Contact No.: 65476960	Classification Of Case:

NP168