

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
26 Dec 2024

Estimate No. : b1 72203
Date Estimated : 23/12/2024
Prepared By : Chua Kee Sin

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -
Sharmila Sripathy Mrs Sharmila Srip
22 CROWHURST DRIVE
SERANGOON GARDEN ESTATE

SINGAPORE 557901

- ACCOUNT - 40000
Cash Sales - Service
Singapore

MBLG

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLS5775Y	WBY42AW050FT45643	01/08/2024	I4 EDRIIVE35 GRAN COUPE	18

DESCRIPTION

VALUE

Replace rear bumper and attachment etc and carryout necessary
repairing work
on accident damage area

850 1,275.00

Painting rear bumper

✓ 1,038.00

To remove and install rear boot compartment interior
carpet and garnish to facilitate the repair job
on rear section.

x 271.00

To check electrical wiring system and lighting at the
rear section for proper function.

✓ 177.00

Sundries

? 150.00

Total Labour 1: 2,911.00

DESCRIPTION

QTY

PRIC

VALUE

EXPANDING RIVET	10	2.70	new ✓ 27.00
REAR BUMPER PANEL PRIMED (PDC/PMA)	1	1,332.30	del ✓ 1,332.30
REAR TOWING EYE COVER PRIMED	1	52.30	x 52.30
SET MOUNTING PDC/PMA SENSOR REAR	1	75.55	del ✓ 75.55
REAR BUMPER BOTTOM TRIM PANEL	1	253.80	cut ✓ 253.80
REAR BUMPER MOUNTING	1	86.70	? 86.70
REAR BUMPER CARRIER	1	537.05	? 537.05
REAR BUMPER LH CORNER MOUNTING (M)	1	86.70	x 86.70
REAR BUMPER RH CORNER MOUNTING (M)	1	86.70	x 86.70
ADAPTER FOR SUPPORT REAR	1	218.85	? 218.85
REAR BUMPER LH MOUNT	1	177.55	x 177.55
REAR BUMPER RH MOUNT	1	177.55	x 177.55
REAR LH ACCENT STRIP (I BLUE)	1	184.35	x 184.35
REAR RH ACCENT STRIP (I BLUE)	1	184.35	x 184.35
Absorber fun	1	52.05	? 52.05
Absorber fun	1	52.05	? 52.05
Protective f	1	6.15	? 6.15
Protective foil	1	6.15	? 6.15

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E S T I M A T E

Estimate No. : **b1 72203**
Date Estimated : **23/12/2024**
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Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLS5775Y	WBY42AW050FT45643	01/08/2024	I4 EDRI35 GRAN COUPE	18

DESCRIPTION	QTY	PRIC	VALUE
REAR LH REAR REFLECTOR	1	43.50	X 43.50
REAR RH REAR REFLECTOR	1	43.50	X 43.50
DECOUPLING RING	6	5.65	nu 33.90
ULTRASONIC SENSOR BLACK	2	264.35	7 528.70
ULTRASONIC SENSOR BLACK	2	269.65	X 539.30
ULTRASONIC SENSOR BLACK SIDE	2	269.65	X 539.30
Total Parts :			5,325.35

Tanjim 97495749/62565561
WP' 14/1/250 1115
P/P Resurvey before paint
~3 days
Tanjim @hhando.com

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:



Labour 1	:	2,911.00
Parts	:	5,325.35
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 9%	:	741.27
Grand Total	:	8,977.62

** 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	23/12/2024 20:50 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/12/2024 21:57 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE towards SLE before exit 8B
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLS5775Y

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Sharmila Sripathy
NRIC No	SXXXX749I
Email Address	sharmila.sripathy@gmail.com
Mobile Phone No	(Phone) +65-81268030
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	i4
Variant	-
Exact purpose for which vehicle was being used at time of 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	0
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	Sharmila Sripathy
NRIC No	SXXXX749I
Date Of Birth	19/11/1984
Occupation	Indoor
Driving Pass Date	23/08/2004
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	20 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-81268030
Alt. Phone Number	-
Email Address	sharmila.sripathy@gmail.com
Address	22 Crowhurst Drive
Address complement	-
Postcode	557901
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)	3
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	Anika Zoe Shanaz
Gender	Female

PASSENGER 2

Name	Leah Mariado
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

See Attachments

ATTACHMENT(S)

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

Yes
Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SND53K
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	Derrick Ng Chow Long
NRIC No	TXXXX909D
Contact Number	(Phone) +65-91704964
Address	804 Yishun Ring Road
Address complement	#04-4299
Postcode	760804
Insurance Company Name	-
Nature Of Damage	front and rear
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJJ1086A
Vehicle Manufacturer	Toyota
Vehicle Model	Camry
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Ng Wei Qi (Huang Weiqi)
NRIC No	SXXXX824H
Contact Number	(Phone) +65-92370205
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	front
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-


SKETCH PLAN

IMPORTANT NOTICE

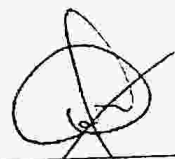
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

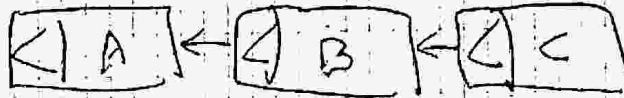
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 23 DEC 2024

 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

I was travelling along Lane 1 of the CTE towards the SLE. Somewhere before Exit 8B (Upper Serangoon Road), the cars in front of me came to a full stop.

I braked and came to a full stop behind the vehicle in front of me (a white Tesla). Soon after I had come to a stop, the car behind me knocked/collided into the rear of my car - I believe this was because the car behind him ("the third car"), a Toyota, had collided into him ("the second car").

My car moved forward upon collision, but I managed to apply my brakes again, as such, I did not collide into the Tesla in front of me.

DECLARATION

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

Policyholder's Signature

Date & Time: 23 Dec 2024

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

23/12/24

C 8426