



## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park,  
Singapore 408933  
TEL: 6256 3561 FAX: 6256 4315  
Reg. No: 199607198R GST Reg. No.  
19-9607198-R

### Tax Invoice

STRIDES PREMIER AUTOMOTIVE SERVICES PL.  
60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705

INV No. : SAC2400633

INV Date : 13-09-2024

Reference CS/SMR24070112/Rqp3m4

Code SMR

#### PROFESSIONAL SERVICE FEE

Vehicle No. SBJ 5225J  
Insured Veh. SMB 1509D  
Claim No. BUS/04/24/5024  
Policy No.  
Accident Date 18/04/2024  
Inspection Date 26/07/2024

Description	Amount
Survey Inspection	128.00
Resurvey Inspection	0.00
Digital Photographs	0.00
Transportation	0.00
Sub-Total	128.00
GST (9%)	11.52
Grand Total	139.52

We shall be glad if you could forward the payment at your earliest convenience.

Cheque should be crossed and made payable to **'LKK Auto Consultants Pte Ltd'**

**LKK Auto Consultants Pte Ltd**

**SML**

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## Affiliated to Federation Internationale Des Experts En Automobile

MS STRIDES PREMIER AUTOMOTIVE SERVICES PL.	Ref:	CS/SMR24070112/Rqp3m4
60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705	Date:	13/09/2024
	Code:	SMR

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMB 1509D	Veh. Inspected	SBJ 5225J
Policy No.	-	Coverage	0
Claim No.	BUS/04/24/5024	Excess	\$0.00
Assign From	HUA YEN	Assign Date	04/07/2024

### 2. Vehicle Details

Make & Model	B.M.W. X4 XDRIVE28I M SPORT	C.C	1997
Engine No.	B3871486N20B20A	Year of Reg.	06/10/2016
Chassis No.	WBAXW320000S47382	Colour	BLACK
Odometer	71263 KM	Steering	IN ORDER
Brakes	IN ORDER	General	FAIR
Modification(s)	RIMS: SPORTS RIM		

### 3. Conditions of Tyres

	Size	Make	Balance (mm)
R/H Front Tyre	245/45R19	MICHELIN	6
L/H Front Tyre	245/45R19	MICHELIN	6
R/H Rear Tyre	245/45R19	MICHELIN	6
L/H Rear Tyre	245/45R19	MICHELIN	6

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION.

DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	18/04/2024	Inspection Date	26/07/2024
Survey held at	PERFORMANCE MOTORS LTD - 303 ALEXANDRA ROAD SINGAPORE 159941		

### 5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.  
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: 1 Working Days



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SBJ 5225J

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	SUNDRIES (SN)	NECESSARY	\$80.00	\$40.00
1	RH MIRROR GLASS HEATED WIDE ANGLE (SN)	NOT NECESSARY	\$232.65	\$0.00
1	RH OUTSIDE MIRROR COVER CAP PRIMED (SN)	TO REPAIR SEE LABOUR	\$167.20	\$0.00
1	RH OUTSIDE MIRROR W/O GLASS HEATED (SN)	CRACKED	\$1,127.80	\$1,150.45
1	REPAIR KIT CABLE EXTERIOR MIRROR (SN)	NOT NECESSARY	\$76.60	\$0.00
			\$1,684.25	\$1,190.45
Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	REPLACE RIGHT SIDE VIEW MIRROR ASSEMBLY INCLUDE REMOVE ATTACHMENT ETC. INCLUSIVE OF THE REPAIR OF RH OUTSIDE MIRROR COVER CAP PRIMED		\$850.00	\$425.00
	PAINTING RIGHT MIRROR COVER ASSEMBLY		\$74.00	\$74.00
	TO CHECK ELECTRICAL WIRING SYSTEM AND LIGHTINGS AT THE RH SECTION FOR PROPER FUNCTION. (ADDITIONAL)		\$177.00	\$177.00
			\$1,101.00	\$676.00
<b>GRAND TOTAL</b>			<b>\$2,785.25</b>	<b>\$1,866.45</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>\$1,866.45</b>
Report Ref No: CS/SMR24070112/Rqp3m4				

**MRB**

MOHAMMED RASUL BIN MOHD YUNUS

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of repositibility whatsoever, in contact or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

# Performance Motors

BMW Dealer



## Supplementary

Estimate No. : **b1 70398**  
Date Estimated : **04/07/2024**  
Prepared By : **Chua Kee Sin**

Page No. :

- ESTIMATE REPAIR FOR -

Lim Oon Cheng

Bukit Tunggal Road

Singapore 309715

- ACCOUNT - **49635**

Smrt Buses Ltd

30.00 60 Woodlands Industrial Park E4

Singapore 757705

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	M LEAGE
SBJ5225J	WBAXW320000S47382	06/10/2016	X4 xDrive 28i	64934

DESCRIPTION	ORIGINAL PRICE	DISC. %	NETT
* To check electrical wiring system and lightings at the RH section for proper function	177.00		177.00

DESCRIPTION	UNIT PRICE	QTY	DISC. %	NETT
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# SUPPLEMENTARY ITEMS

Total Labour :	177.00
Total Parts :	

Performance Motors Limited.

Sime Darby Performance Centre, 303 Alexandra Road

Tel: 1800-2255-269

Co Reg No. 197401559W



## 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	19/04/2024 11:33 (SGT)
Reported by	Actual Driver
Date of Accident	18/04/2024 10:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	RIVER VALLEY ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBJ5225J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM OON CHENG
NRIC No	066B
Email Address	
Mobile Phone No	
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	X4
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

#### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5130295318-01

#### DRIVER

Name of Driver	KAM SAU LAI IRENE
NRIC No	
Date Of Birth	
Occupation	Indoor

Driving Pass Date	17/12/1982
Driving experience	41 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	
Alt. Phone Number	-
Email Address	
Address	
Address complement	-
Postcode	
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

#### 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)	1
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

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

ON THE ABOVE MENTIONED DATE AND TIME MY CAR WAS STATIONARY ON THE LEFT LANE AS THERE WAS ROAD WORKS ON THE LEFT. SUDDENLY THERE WAS A BUS FROM THE RIGHT LANE SWIPE INTO MY RIGHT SIDE MIRROR. I WISH TO STATE THAT MY CAR WAS ALL ALONG STATIONARY ON THE LEFT LANE.

#### 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	SMB1509D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus

Name of Driver	NOORZAIFALIZZA BINTI NOR KAMARUDIN
Passport No/FIN	
Contact Number	
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

**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 willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy benefits.
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 insurer 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 judgement 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 stored.


**Consent under the Personal Data Protection Act (PDPA):**

I understand, acknowledge, agree and consent that:

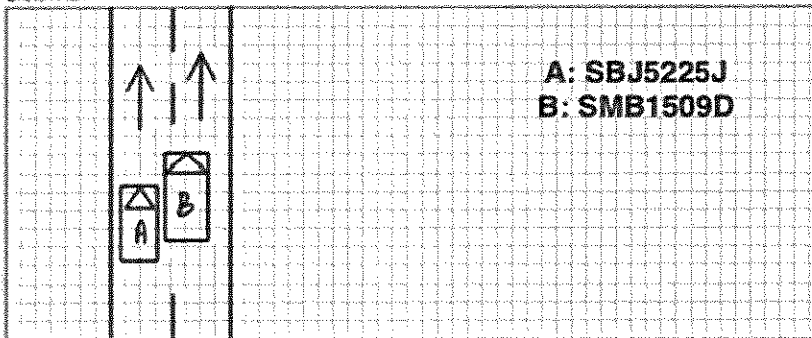
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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 purposes 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 issuing 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/postal 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 based outside of Singapore, for one or more of the above Purposes.

 19/04/2024 1130HRS  
 Policyholder's Signature / Date & Time

 19/04/2024 1130HRS  
 Driver's Signature (if driver is not the policyholder) (Date & Time)




 AHMAD SUFIYAN  
 S982991  
 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

**Sketch Plan**





**Declaration**  
I/We declare that foregoing participants are true in every respect.

  19/04/2024 1130HRS 

Participant's Signature - Date & Time  
Ghassan's Signature if Ghassan is not the participant's Date  
Ahmad Sufiyan  
5992991  
Witnessed by: Ahmad Sufiyan President  
Chairman of the HRCRC Legal

## PHOTOGRAPHS FOR VEHICLE NO. : SBJ 5225J



**PHOTOGRAPHS FOR VEHICLE NO. : SBJ 5225J**

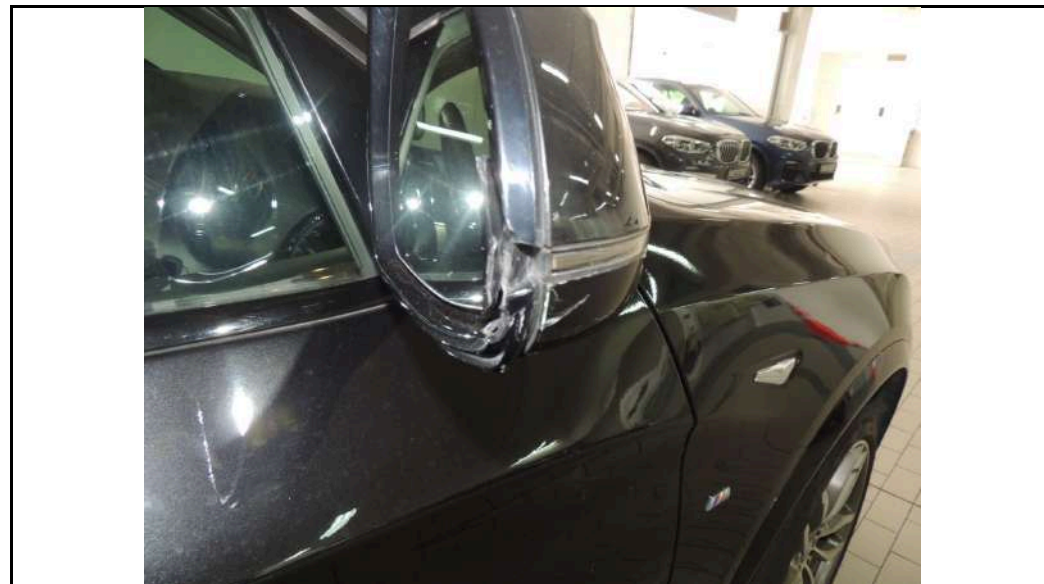
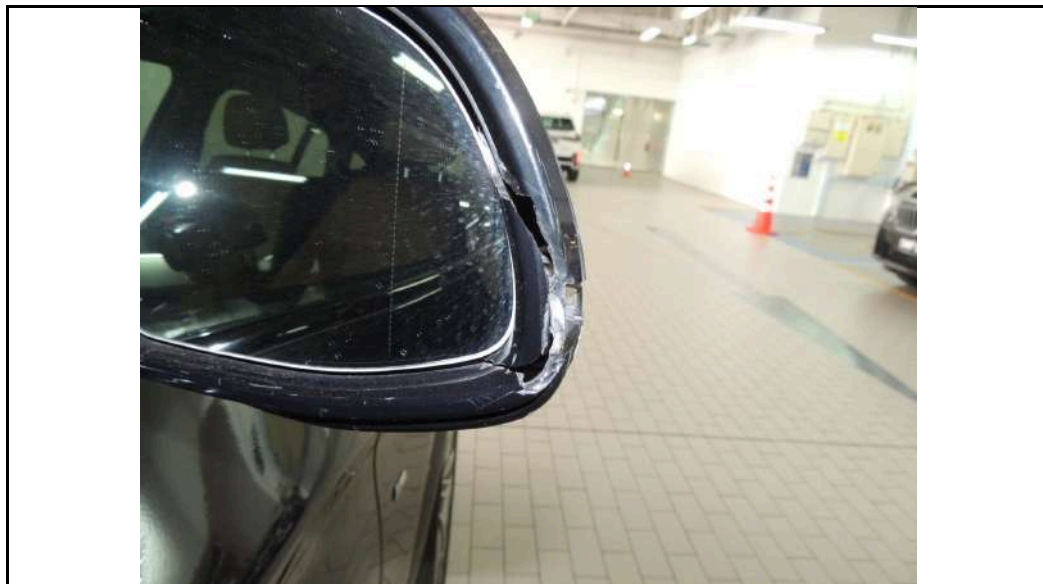




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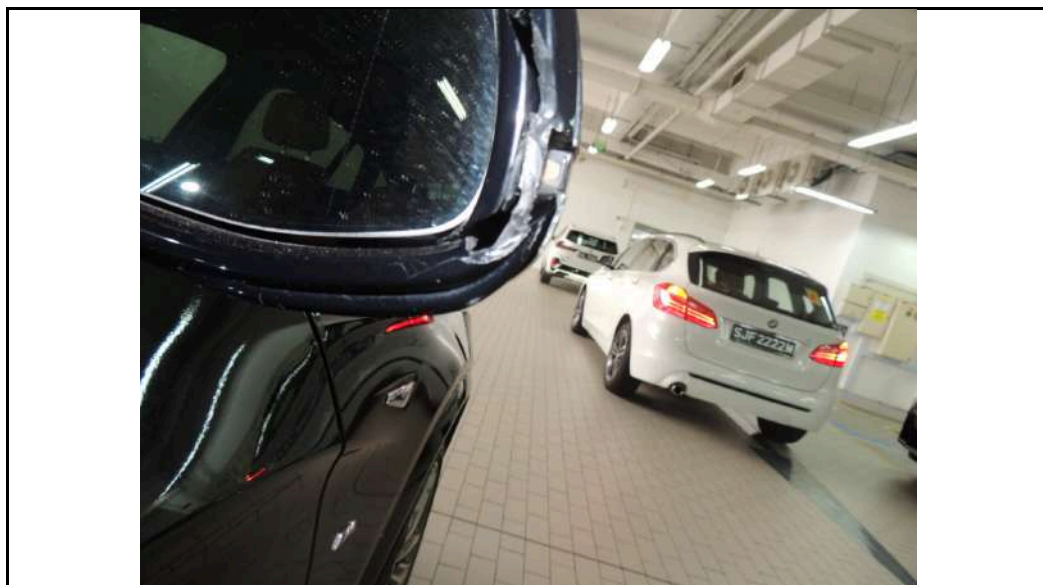
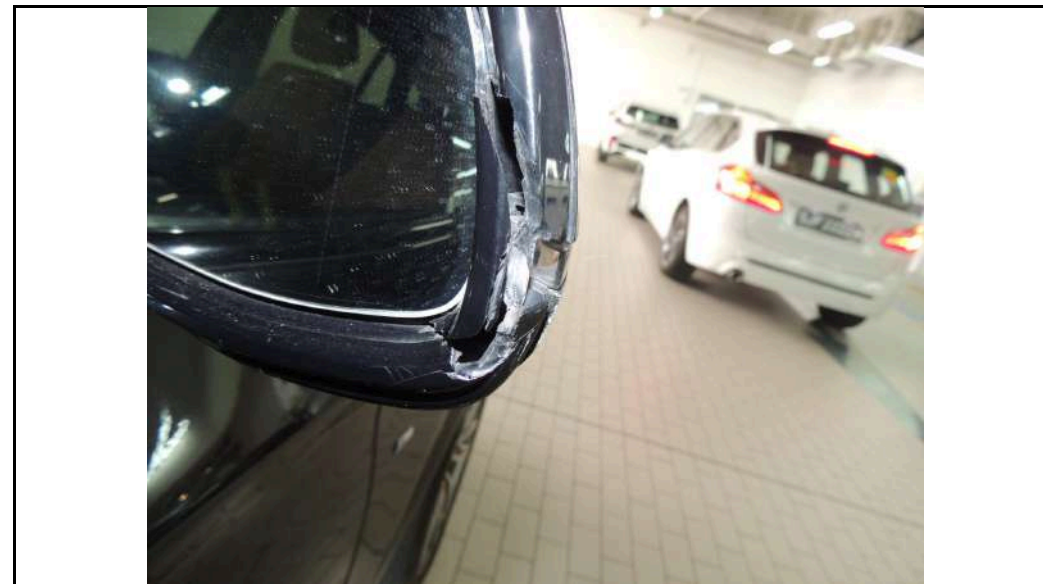
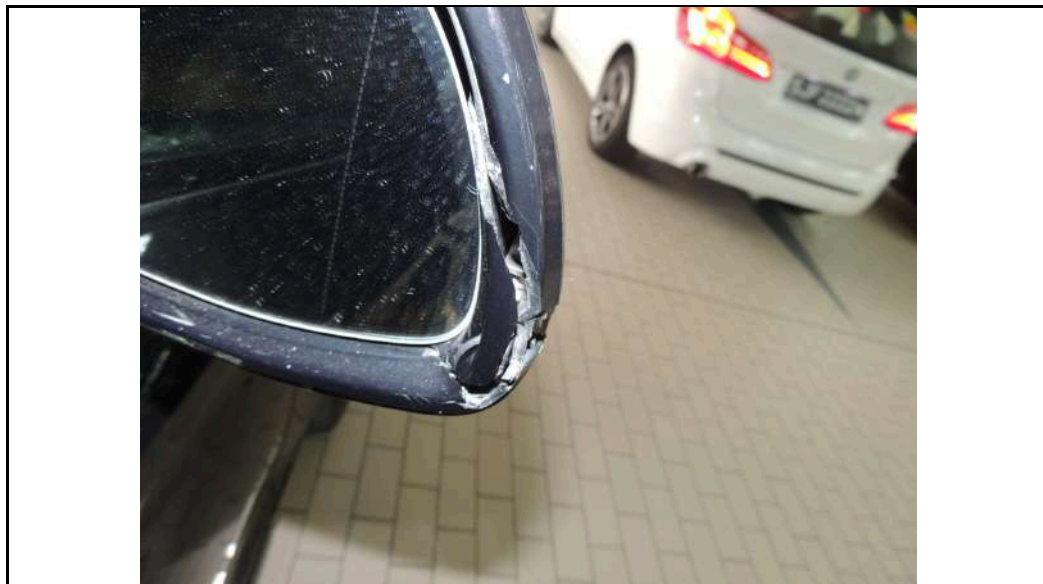


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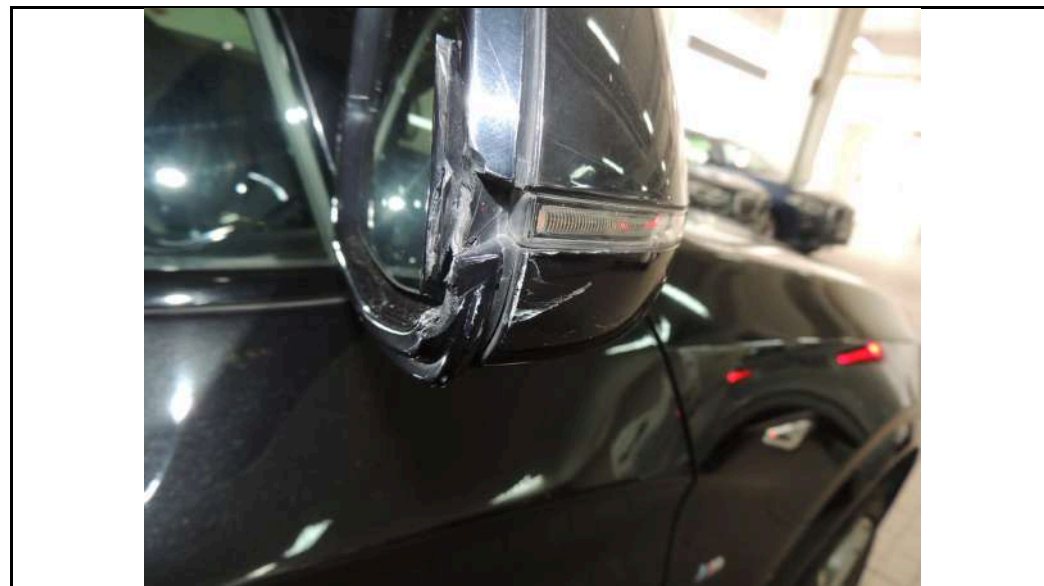
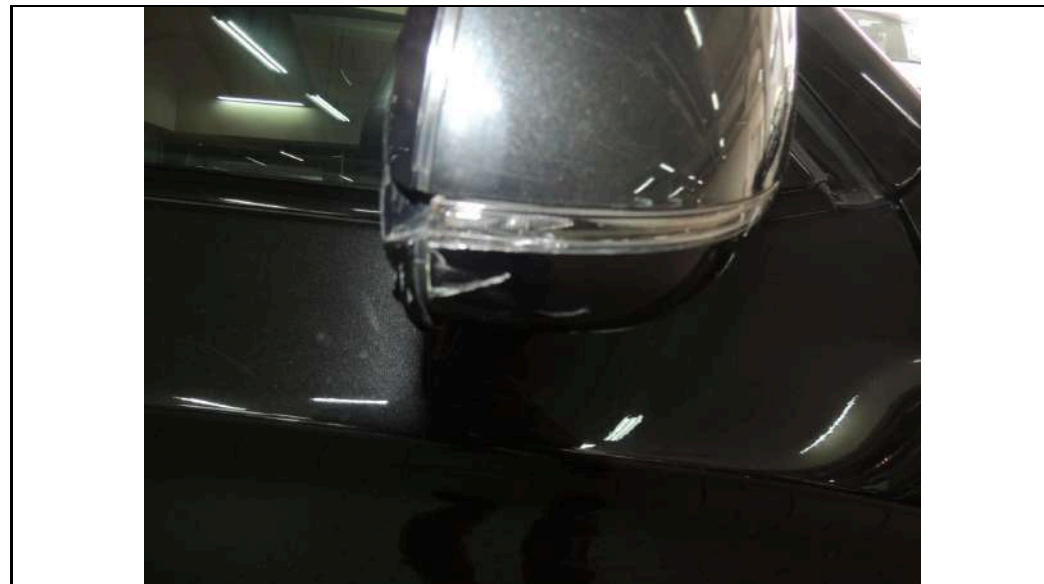
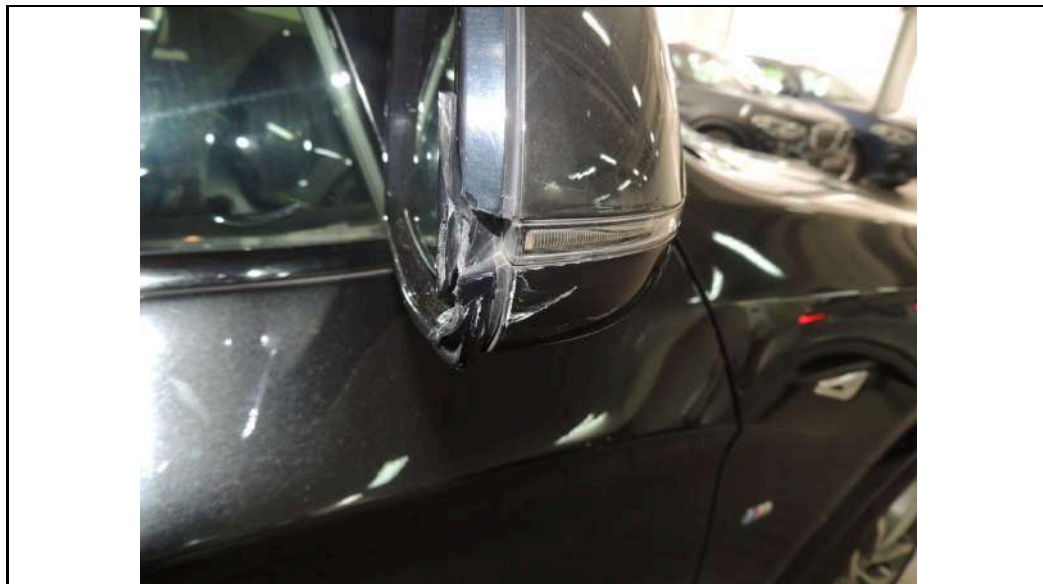




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REINSPECTION PHOTOS (Page 1 of 1)

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