



(MS100 Tong)

AXA Insurance Pte Ltd
8 Shenton Way
#27-01
Singapore 068811
Attention: Motor Claims

"Without Prejudice"

Your Ref :

Our Ref :

Date : 10 October 2019

Subject : **ACCIDENT INVOLVING VEHICLES SFW4366B & SJA1893J ON 15.11.2018**

Dear Sirs

We refer to the above matter.

The accident was caused solely by the negligence on the part of your insured. As a result of the said accident, our client has suffered losses which are set out hereunder as follows:-

Cost of repair	: S\$	2139.24
Loss of use	: S\$	300.00 (S\$100.00 x 3 days)
GIA search fee	: S\$	2.00
Total	: S\$	2441.24

A copy of each of the following supporting documents is enclosed:

1. Copy of Accident Report
2. Copy of Final Repair bill & GIA search slip
3. Copy of Certificate of Insurance
4. Copy of Letter of Authorisation & Discharge Voucher

Performance Motors
Limited
1800-Call-BMW
(1800-2255-269)
www.pml.com.sg

303 Alexandra Road
Sime Darby
Performance Centre
Singapore 159941
Tel Sales 6319 0100
Tel Aftersales:
6319 0111
Fax 6474 7770

315 Alexandra Road
#01-01
Sime Darby
Business Centre
Singapore 159944
Tel Sales 6319 0511
Tel Aftersales
6319 0527
Fax 6479 6624

280
Kampong Arang Rd
East Coast Centre
Singapore 438180
Tel Aftersales
6319 0888
Fax 6344 1332

Registered office
305 Alexandra Road
#02-01
Vantage
Automotive Centre
Singapore 159942

Co. Reg. No:
197401559W

Please note that you or your insured should send us an acknowledgement of receipt of this letter within fourteen (14) days from the date of this letter, failing which our client will have no alternative but to commence legal proceedings against you without any further notice to you or your insured.

Should you have a counterclaim against our client arising out of the accident, you are also required to send a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter.

For any correspondence, please contact Ms Caroline Tan at 6319-0174 / Fax. 6479-4601 or email to pml-pbsp@sime-darby.com.sg.

Yours sincerely

Cresendo Lagman
Customer Service Manager, Body & Paint

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)**SERVICE TAX INVOICE**

Repair Order No. : B1 1394974	Page No. : 1 of 2
Date IN : 10/09/2019	Invoice Number : 2159175 / WSB
Motor Claim Advisor: Gary Poh Chai Hoon	Invoice Date : 08/10/2019
	Payment Terms : 30 Days From Invoice
	Invoice By : Sharon Heng

- CUSTOMER INFORMATION -

Ms Lim Wan Pey
1 Shelford Road
#03-02

Singapore 288533

- INVOICE TO - 238

AXA Insurance Pte Ltd
8 Shenton Way
#24-01 AXA Tower
Singapore 068811

REGN. NO. SFW4366B	CHASSIS NO. WBAWY920X0LE00814	REGN. DATE 28/10/2014	MODEL X3 SDRIVE20	MILEAGE 33289
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- - - - L A B O U R 1 - - - -

To make good rear bumper and replace rear bumper cladding.

To remove and install body parts in order to carry out painting job.

To respray rear bumper.

To check electrical wiring systems and lightings at the rear section for proper function.

Sundries.

INS CLAIMS : ACCIDENT REPAIR. DIRECT SETTLEMENT.

DATE OF ACCIDENT : 15.11.2018. 3RD PARTY CAR : SJA1893J.

YOUR REF NO : NIL.

VEHICLE WAS SURVEYED BY MR TAUFIKH FROM LKK AUTO CONSULTANTS PTE LTD ON 10.9.2019 AT 10.30 AM. AUTHORISED REPAIR BY MR VIC ALPEH FROM LKK ON 28.12.2018 VIA E-MAIL.

PROPOSE LOSS OF USE = \$100X3. THE AMOUNT IS SUBJECTED TO INSURANCE COMPANY CONFIRMATION.

GIA SEARCH FEE = \$2.00.

Retail

Price

DISC%

NETT

850.00

10.00

765.00

934.00

10.00

840.60

150.00

10.00

135.00

40.00

0.00

40.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

Total Labour 1: **1,780.60**

- - - - P A R T S - - - -

REAR BUMPER CLADDING (PDC/SCHWARZ)

EXPANDING RIVET BLACK

Retail

Qty

Price

DISC%

NETT

1

211.45

3.00

205.11

10

1.40

3.00

13.58

Total Parts : **218.69**

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
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64796624 (Motorrad)**SERVICE TAX INVOICE**

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Labour Charges : 1,740.60	Total Labour & Parts Charges : S\$ 1,999.29
Parts Charges : 218.69	Less Insurance Excess : S\$ 0.00
Lubricant/Misc : 40.00	Invoice Total Amount Exclude GST : S\$ 1,999.29
	GST @ 7% : S\$ 139.95
	Invoice Total Amount Include GST : S\$ 2,139.24

Computer generated invoice. No signature is required.

Amount Payable Include GST : **S\$ 2,139.24**

All amounts are in Singapore Dollars.

Work was carried out subject to the Company's Terms and Conditions of Service.

No complaints will be entertained unless reported within seven (7) days of the date of this invoice.

For credit purchases, interest @1% per month will be debited on overdue amounts.



Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X

303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
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63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

14 NOV 2018

Page No. : 1 of 5

Estimate No. : b1 49156
Date Estimated : 17/11/2018
Prepared By : Gary Poh Chai Hoon

- ESTIMATE REPAIR FOR -

Lim Wan Pey
119 Jalan Jurong Kechil
#02-19

Singapore 598678

- ACCOUNT - 40000

Cash Sales - Service
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFW4366B	LE00814	28/10/2014	X3 sDrive20	0

DESCRIPTION

To replace rear bumper and attachment include knocking

painting rear bumper

To check electrical wiring systems and lightings at the rear section for proper function.

Sundries.

VALUE

850 1,700.00

934 1,038.00

150 177.00

? 80.00

Total Labour 1: 2,995.00

DESCRIPTION

TAILPIPE TRIM ALU LOOK

RR BUMPER CARRIER ECE

RR LH BUMPER MIDDLE MOUNTING

RR RH BUMPER MIDDLE MOUNTING

RR BUMPER LH MOUNT

RR BUMPER RH MOUNT

COVER MIDDLE BOTTOM

REAR BUMPER CLADDING (PDC/SCHWARZ)

REAR BUMPER PANEL PRIMED (XLINE/PDC)

UNDERRIDE GUARD PRIMED REAR (X LINE)

DECOUPLING RING PDC TORQUE CONVERTE

BUMPER PDC SENSOR (SCHWARZ)

QTY	PRIC	VALUE
1	124.85	X 124.85
1	756.50	? 756.50
1	137.75	? 137.75
1	137.75	? 137.75
1	192.15	? 192.15
1	192.15	? 192.15
1	70.40	inf 70.40
1	202.25	cut 202.25
1	1,444.70	Rx 1,444.70
1	260.00	cut 260.00
4	5.05	rec 20.20
4	236.85	? 947.40

Total Parts : 4,486.10

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-178383
Date of Request: 17/11/2018

Your Ref No: Online Purchase

Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

Dear Sir/Madam,

Enquiry Date 17/11/2018
Enquiry By Caroline Tan Shirui
TP Vehicle No. SJA1893J
Accident Date 15/11/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



LETTER OF AUTHORISATION

ACCIDENT INVOLVING SFW 4366B & SJA 1893J ON 15/11/18.


I, Lim Wan Pey owner of Vehicle Registration No. SFW 4366B hereby authorise **Performance Motors Limited** to submit, correspond, negotiate and settle my claim for cost of repair and/or uninsured losses arising from the above accident.

I further authorise **Performance Motors Limited** to execute, sign, seal and deliver all documents whatsoever in relation to this matter and to accept and receive any payment due to me in respect of my claim above.

I hereby declare that all acts and documents done by virtue of this Letter of Authorisation on my behalf shall be good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by me in person.

I further confirm that the acceptance by **Performance Motors Limited** of the settlement amount in respect of such claim shall constitute the full discharge of my claim in respect of such loss and damage.

Signed by:


Name : _____ (Date) _____
NRIC No.: _____

In the presence of:


GARY POH CHAI HOON
Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159041

Name : _____ (Date) _____
NRIC No.: _____



redefining / insurance

SFW 4366 B

CLAIM REF :
INSURED :

DISCHARGE VOUCHER

We/I [Lim Wan Pey], NRIC NO. _____ hereby agree to accept the sum of dollars [_____] (\$\$
#2441.24) paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. [SJA1893J] as a result of an accident along [Newton Road (Near Newton Circus)] on [_____] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. [SFW 4366 B]

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. [SJA1893J] in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. [SJA1893J].

Dated this _____ day of _____ 2017

Claimant's Signature : _____

NRIC no./ Company Stamp : _____

Occupation/ Business : _____

Address : _____

Telephone No. : _____

Witness's Name : _____

Witness's Signature : _____

Witness's NRIC No. : _____

