

**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  
Tel. 63190528 (AfterSales)  
63190533/530 (Motorrad)  
Fax. 64796601 (AfterSales)  
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

25 JAN 2019

**E S T I M A T E**

Estimate No. : b1 49889 Page No. : 1 of 4  
Date Estimated : 24/01/2019  
Prepared By : Inthiran A/L Thurasamy

- ESTIMATE REPAIR FOR -  
Neo Tjin Wha, Alvin (Liang ZhenHua)  
5A Holland Hill  
#08-00

Singapore 278730

- ACCOUNT - 40000  
Cash Sales - Service  
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFQ8787A	V926370	10/04/2018	216d CAT	0

DESCRIPTION

To replace front bumper, attachments and repair front right fender.

VALUE

2,550.00

Painting front bumper and fender right.

1,923.00

To check electrical wiring systems at the front section for proper function including adjustments of headlights.

177.00

To replace right headlight.

481.00

Sundries.

80.00

Total Labour 1: 5,211.00

DESCRIPTION

RH SUPPORT FOG LAMP (GESCHLOSSEN)

QTYPRICVALUE

1 77.60

77.60

FRT BUMPER PANEL PRIMED (PMA)

1 880.15

880.15

GRILLE SIDE OPEN RH (PDC)

1 95.65

95.65

PLAQUE 82MM

1 71.25

71.25

RH HEADLIGHT LED TECHNOLOGY

1 2,348.00

2,348.00

Total Parts : 3,472.65

Labour 1 : 5,211.00

Parts : 3,472.65

Labour 2 : 0.00

Excess : 0.00


Total GST @ 7% : 607.86

Grand Total : 9,291.51

\*\* THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY\*\*

\*\* PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE \*\*

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7905140C




Name  
NEO TJIN WHA, ALVIN  
(LIANG ZHENHUA)  
梁 振 华

Race  
CHINESE

Date of birth  
16-02-1979

Sex  
M

Country of birth  
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: S7905140C

Name:  
NEO TJIN WHA, ALVIN  
(LIANG ZHENHUA, ALVIN)


Birth Date: 16 Feb 1979  
Issue Date: 18 Jul 2003




000665080H



4448183



NRIC No. S7905140C



Date of issue  
19-08-2009

5A HOLLAND HILL #08-00  
SINGAPORE 278730

NRIC No. S7905140C  
Date: 14/01/2016 (R)

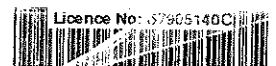
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

	PASS DATE
Class 2B	15 Aug 2002
Class 2A	04 Nov 2003
Class 3	09 Sep 2004
Motorcycles not exceeding 200 cc Motorcycles between 201 cc and 400 cc Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	

S7905140C

S/No. 9000018047

NP 478A





Aviva Ltd., 4 Shenton Way, #01-01 SGX Centre 2, Singapore 068807. Tel: (65) 6827 9966 www.aviva.com.sg

## CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION  
(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

CERTIFICATE NUMBER. 10824901

**1) VEHICLE REGISTRATION NO.**

SFQ8787A

**2) NAME OF INSURED**

FAMILY NAME  
GIVEN NAME

NEO  
TJIN WHA ALVIN

**3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE  
PURPOSE OF THE ACT**

10-Apr-2018 12:15hours

**4) DATE OF EXPIRY OF INSURANCE**

09-Apr-2019 23:59hours

**5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE**

Any driver aged 30 or over

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

**6) LIMITATIONS AS TO USE\***

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**NAMED DRIVER**

**7) FINANCE COMPANY**

DBS BANK LTD

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 10-Apr-2018 at 12:15hours

Aviva Ltd.

**IMPORTANT NOTE:**

- If you want to cancel your policy at any time, you will need to return the certificate to us.
- You MUST report all accidents to Us within 24 hours of the occurrence regardless of whether You intend to claim on Your own policy or not, or whether Your car is damaged or not. Should You fail to do so, Your No Claims Discount could be affected and Your claim may be prejudiced.

Nishit Majmudar  
Chief Executive Officer

**In case of vehicle breakdown, accident or windscreen damage, please call 6333 2222 (24 hours) immediately.**

ORIGINAL

## 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 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. 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 Report	24/01/2019 00:30
Date Of Accident	22/01/2019 21:40
Exact Location Of Accident	NEWTON CIRCUS ROUND ABOUT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFQ8787A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEO TJIN WHA ALVIN
NRIC No	S7905140C
Email Address	ALVINNEOTW@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96815717
Alternative Phone No	OFFICE-96815717

### Vehicle Particulars

Manufacturer	BMW
Model	216D ACTIVE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10824901
Cover Note Number	N.A.

### Driver

Name of Driver	NEO TJIN WHA , ALVIN
NRIC No	S7905140C
Date Of Birth	16/02/1979
Occupation	INDOOR
Date Of Driving Pass	09/09/2004
Driving Experience	14 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96815717
Fax Number	
Contact Number	OFFICE-96815717
Email Address	ALVINNEOTW@YAHOO.COM.SG

Address	5A HOLLAND HILL #08-00
Postcode	278730
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

#### 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 this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : XAVIER NEO GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

I was on Newton circus and driving on the leftmost lane, the blue taxi cut across 2 lanes to exit and collided into my vehicles right front bumper. No injuries involved at that point in time.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	UPLOADED INTO AVIVA FILE ZILLA
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD3103B
Vehicle Make/Model/Colour	HYUNDAI/I40/BLU
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	JUAN CHIN LOON
NRIC/Passport Number	S0038366Z
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

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 Authorized 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 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 Reports 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 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 insurers) 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 envelope/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/are 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.

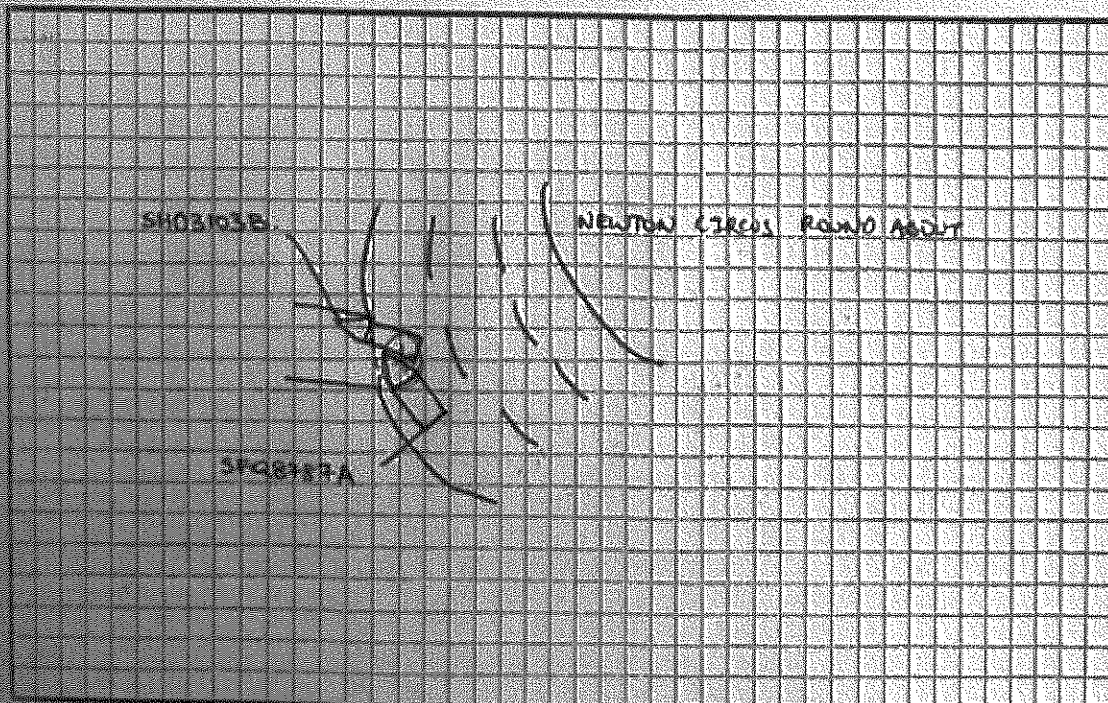
**VERIFIED BY AJAX MARS  
REPORTING OFFICER**

Mohamed Saifulah S/O Syed  
Masood

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel

**Sketch Plan**

## Common Statement

### ACCIDENT STATEMENT (2000 characters)

I was on Newton circus and driving on the leftmost lane, the blue taxi cut across 2 lanes to exit and collided into my vehicles right front bumper.

No injuries involved at that point in time.

Taxi Voucher No :

### DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MOHAMED SAIFULLAH S/O SYED MASOOD

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

23 January 2019 at 4:50 PM

Date/Time

23 January 2019 at 4:50 PM