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 East Coast Centre

Singapore 438180 Fax. 63449773

315, Alexandra Road Sime Darby Business Centre Singapore 159944 Fax. 64796601 (AfterSa: 64796624 (Motorra

(AfterSales) (Motorrad)

GST REG. NO : M2 - 0020081 - X

0.5 AUG 2019

Page No. : 1 of 4

ESTIMATE

Estimate No.

: b1

52232

Date Estimated Prepared By

: 05/08/2019

: Inthiran A/L Thurasamy

ESTIMATE REPAIR FOR -

Toh Zhi Hao Jerry

22 Raglan Grove

Sembawang Springs Estate

ACCOUNT -40000

Cash Sales - Service

Singapore

Singapore 556271

REGN. NO.

CHASSIS NO.

REGN. DATE

MODEL

MILEAGE 0

SKP8990A

P578388

28/08/2014

116iA/5

3,400.00

VALUE

2,596,00

177.00

To repair rear right door, rear right fender and side sill right.

DESCRIPTION

Painting rear right door, rear right fender and side sill

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

Sundries.

80.00

Total Labour 1:

6,253.00

6.253.00

Parts 0.00 Labour 2 0.00 Excess 0.00 Total GST @ 7% 437.71

Grand Total

Labour 1

6,690.71



<sup>\*\*</sup> THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY\*\*

<sup>\*\*</sup> PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE \*\*



Land Transport Authority to Sirriving Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

05 Aug 2019 / 18:25:14

Receipt Date/Time:

05 Aug 2019 / 18:25:13

### Tax Invoice/Receipt

Receipt No.: ITNET-00000-190805-002719

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBF5600E As at 12 Jul 2019/18:15:00 Insurance Co: AIG ASIA PACIFIC INSURANC	E PTE. LTD.			
<ol> <li>Insurance Enquiry - GBF5600E</li> <li>Enquiry Fee</li> <li>20190805182326244367</li> </ol>		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SGM5241L As at 04 Aug 2019/14:35:00 Insurance Co: LIBERTY INS P L 2 Insurance Enquiry - SGM5241L				
Enquiry Fee 20190805182326300708		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	14.00	0.98	14.98
	Rounding Difference			0.03
	Total Amount Payable			14.95
	Paid By			
	xxxxxxxxxxxx9609	Credit Card /Master(		14.95
	Total			14.95
	Cash Change			0.00
	Tendered Amount			14.95
	Excess Refundable Amount			0.00

# THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles =< 200 CC

Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg

FASSIDATE

27 Aug 2009

18 Feb 2014

S9048287D

S/No. 9000189921

Licence No: S9048287D

NP 428A





24-Hour Motor Accident Reporting

and Assistance Helpline

6333 2222

www.ergo.com.sg

#### Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate/Policy Number DMPG19001604

Vehicle Registration Number SKP8990A

Cover Type Superior Comprehensive

**Policy Type** Private Car

Name of Policyholder/Insured TOH ZHI HAO JERRY

**Commencement Date of Insurance** 28/02/2019

27/02/2020 **Expiry Date of Insurance** 

Excess EXCESS: (SECTION I)..... 500.00

S\$ S\$ S\$ **S\$** ADD'L EXCESS: UNNAMED DRIVERS (SECTION I). 500.00 ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I) 300.00 **EXCESS: WINDSCREEN** 100.00 YOUNG & INEXP DRIVERS (SECTION I) 3.000.00

#### Finance Company/Hire Purchase Owner:

\*Persons or Classes of Persons entitled to drive:

- 1. The Policyholder
- 2. Any Person who is driving on the Policyholder's order or permission

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 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 cancelled at the time of the accident loss or damage.

- \* Limitations as to Use:
  - 1) Use only for social domestic and pleasure purposes
  - 2) Use for Policyholder's business

This Policy does not cover

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) 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 (\*).

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)

For and on behalf of ERGO Insurance Pte. Ltd.

Warl-heint Jung

Approved Insurer

**Authorized Signature** 

Z000004	INSTRADE AGENCY & SERVICES	Contact Number: 62551404
Vehicle Chassis Number : WBA1A12010P578388, Vehicle Engine Number : A274J773N13B16A		PC1, 13/02/2019 10:53

#### 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 <u>truthful and accurate</u> 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.

DEVIT	$\circ \tau \wedge \tau$	EMENT
DENI	OLAII	

 Date Of Report
 13/07/2019 13:43

 Date Of Accident
 12/07/2019 18:15

Exact Location Of Accident CTE EXIT BALESTIER RD MERGING LANE

Country/State of Loss SINGAPORE

**DETAILS OF OWN VEHICLE** 

Vehicle Registration Number SKP8990A

Insured/Policyholder

Name Of Registered Owner TOH ZHI HAO JERRY

NRIC No S8934420D Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-90237846
Alternative Phone No OFFICE-90237846

**Vehicle Particulars** 

Manufacturer BMW

Model 116I A/T ABS D/AIRBAG 2WD 5DR HID DSC

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 ERGO INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPG19001604

Cover Note Number

Driver

Name of Driver STACY TOH LI TING

 NRIC No
 S9048287D

 Date Of Birth
 28/11/1990

 Occupation
 INDOOR

 Date Of Driving Pass
 01/01/2019

Driving Experience 0 YEAR AND 6 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-90237846

Fax Number

Contact Number

EMail Address STACY.TLT@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

SIBLING If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

NIL

**General Information of the Accident** 

Type Of Accident SIDE SWIPE 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

NO YES

NO

2

2

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: CHRISTINA LIM

GENDER: : FEMALE

**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 TRAVELLING ALONG CTE EXIT BALESTIER RD. IT WAS THE MERGING LANE WHERE THE ACCIDENT HAPPEN. THE TRAFFIC WAS HEAVY. THE TIME WAS AROUND 6:15PM. I WAS AT THE MERGING LANE WAITING FOR THE TRAFFIC TO MOVE WHEN VEHICLE GBF5600E FROM MY RIGHT REAR COULDN'T WAIT FOR THE TRAFFIC AND HIT ONTO MY RIGHT SIDE OF MY VEHICLE. SCRATCHES ON MY VEHICLE IS ON THE RIGHT REAR PORTION AND MY RIGHT PASSENGER DOOR. NO INJURIES WERE INVOLVED.

# Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number **GBF5600E** AIG

MERCEDES BENZ / VITO 109 CDI MT LONG / RED Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE Vehicle Category

SADHANANDHAM S/O SURIAMOORTHY Name of Driver

NRIC/Passport Number S1736878H

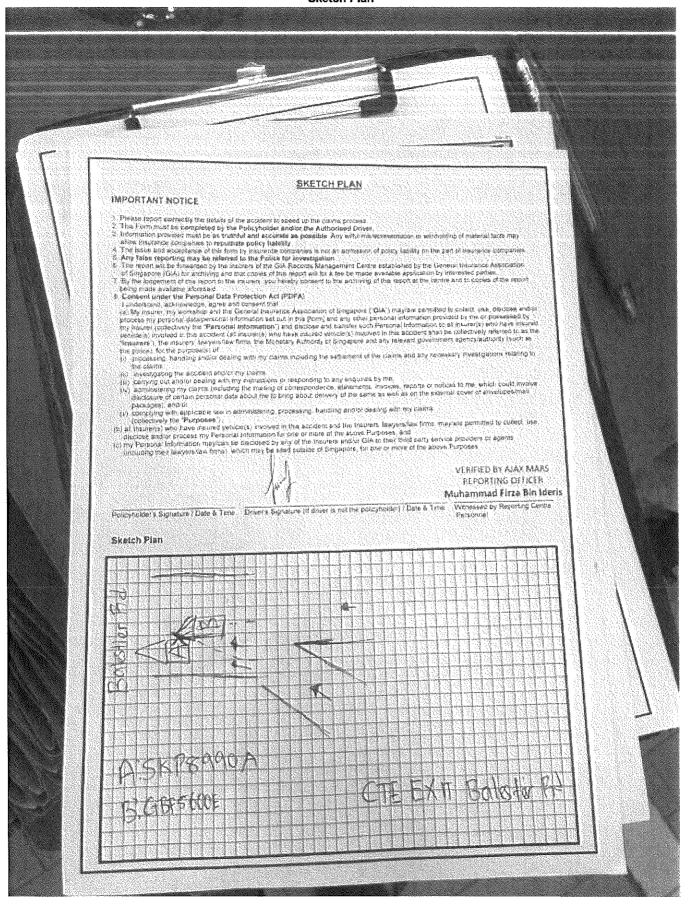
Contact Number

Address Postcode

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Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

#### Sketch Plan



#### **Common Statement**

