

**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

15 AUG 2019

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

Estimate No. : b1 52321  
Date Estimated : 14/08/2019  
Prepared By : Inthiran A/L Thurasamy

Page No. : 1 of 5

**- ESTIMATE REPAIR FOR -**

Yong Chin Kuan  
151 Holland Road  
#01-02

Singapore 278580

**- ACCOUNT - 121**

AIG Asia Pacific Insurance Pte. Ltd.  
78 Shenton Way  
#08-16 Chartis Building  
Singapore 079120

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLG3604J	NU32076	28/09/2016	318iA/4Dr	0

DESCRIPTION

To replace front bumper, air duct and attachments.

VALUE

4,250.00

Painting front bumper.

1,038.00

To replace left or right headlight.

481.00

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

177.00

To supply front emboss number plate.

83.00

Sundries.

150.00

Total Labour 1: **6,179.00**DESCRIPTIONQTYPRICVALUE

FRT BUMPER TOP MOUNT

1

378.10

378.10

INSERT AIR INLET MIDDLE

1

120.60

120.60

FINISHER ROD CENTRE (SPORT)

1

54.55

54.55

LH FINISHER ROD (SPORT)

1

56.00

56.00

RH FINISHER ROD (SPORT)

1

56.00

56.00

FRT BUMPER TOWING LUG COVER PRIMED

1

43.25

43.25

RH OPEN GRID (SPORT)

1

88.35

88.35

LH PARTIALLY OPEN GRID (SPORT)

1

91.75

91.75

FRT SHOCK ABSORBER ECE

1

54.50

54.50

FRT BUMPER PANEL PRIMED (SPORT LINE

1

1,037.05

1,037.05

FRT LH GRILLE (SPORT)

1

128.60

128.60

FRT RH GRILLE (SPORT)

1

128.60

128.60

SUPPORT NUMBER PLATE ECE

1

69.25

69.25

AIR DUCT RADIATOR

1

61.50

61.50

PLAQUE 82MM

1

71.25

71.25

RH HEADLIGHT LED TECHNOLOGY

1

3,068.40

3,068.40

Total Parts : **5,507.75**

**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**

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

Estimate No.	: b1 52321	Page No.	: 2 of 5
Date Estimated	: 14/08/2019		
Prepared By	: Inthiran A/L Thurasamy		

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLG3604J	NU32076	28/09/2016	318iA/4Dr	0

Labour 1	:	6,179.00
Parts	:	5,507.75
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	818.07
Grand Total	:	<u>12,504.82</u>

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

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

**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

**Third Party Insurer Enquiry**

Our Ref No: GR-19-131703

Date of Request: 15/08/2019

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 15/08/2019  
Enquiry By Melanie Setiawati  
TP Vehicle No. SFT3233Z  
Accident Date 12/08/2019

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SFT3233Z	AIG Asia Pacific Insurance Pte. Ltd.	24/12/2018-23/12/2019	65-6419-3000

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

**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-19-131703

Date of Request: 15/08/2019

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 15/08/2019  
Enquiry By Melanie Setiawati  
TP Vehicle No. SFT3233Z  
Accident Date 12/08/2019

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

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1368467G



Name



YONG CHIN KUAN

Race

CHINESE

Date of Birth

Sex

02-03-1959

F

Country of Birth

SINGAPORE

S1368467G

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S1368467G  
Name:

YONG CHIN KUAN

Birth Date: 02 Mar 1959

Issue Date: 25 Mar 2014



A00B3053



NRIC No. S1368467G

Blood Group

Date of issue

B+

28-11-2001

151 HOLLAND ROAD #01-02  
SINGAPORE 278580

NRIC No: S1368467G

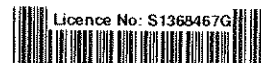
Date: 27/07/2015

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg 05 Nov 1986

NP 428A



**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N

**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 RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**PRIVATE CAR  
Comprehensive**Certificate No.: **DMPPHQ18-006217**

Form: MX2

Excess:

Insured/Named Driver SGD500.00

Unnamed Drivers SGD1,000.00

YEID Additional SGD3,000.00

**1. Index Mark and Registration Number of Vehicles**

SLG3604J

**2. Name of Policyholder**

YONG CHIN KUAN

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

28/09/2018

**4. Date of Expiry of Insurance**

27/09/2019

**5. Person or Classes of Persons entitled to drive\***

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

EQ Insurance-MARS Motor  
Accident Help Center**6311 3211**

\*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 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 has not been cancelled at the time of accident loss or damage.

**6. Limitations as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover :

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) 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.

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 and Amendment, Act or Acts passed in substitution thereof.

Authorised Signatory  
EQ Insurance Company Limited

unwck/HO/A000322/Neo &amp; Company Insura



A Member of Citystate

## 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	13/08/2019 11:11
Date Of Accident	12/08/2019 13:45
Exact Location Of Accident	CLEMENTI MALL BASEMENT CARPARK LOT NO 91
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG3604J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YONG CHIN KUAN
NRIC No	S1368467G
Email Address	LINDASJY1233@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90088033
Alternative Phone No	OFFICE-90088033

### Vehicle Particulars

Manufacturer	BMW
Model	318i
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-006217
Cover Note Number	

### Driver

Name of Driver	YONG CHIN KUAN
NRIC No	S1368467G
Date Of Birth	02/03/1959
Occupation	INDOOR
Date Of Driving Pass	05/11/1986
Driving Experience	32 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90088033
Fax Number	
Contact Number	OFFICE-90088033
Email Address	LINDASJY1233@GMAIL.COM

Address	151 HOLLAND ROAD #01-02 LOFT @ HOLLAND
Postcode	278580
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	NO
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)	0

#### 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

Please refer to the attached Sketch Plan for the accident details.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFT3233Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YANG JIZHENG
NRIC/Passport Number	S8605505H
Contact Number	98789682
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 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.

 13/8 at 10.50 am

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## SKETCH PLAN

Pls see below statement

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/8 I park my car at Clementi Mall at 12pm  
 Shopping at about 1.45pm back saw my car  
 been bang lot No: 91.  
 There was a note left on my car wind screen  
 stating to call him Mr. Yang Jizheng  
 IC NO: S8605505H  
 TP. car No: SFT3233Z phone No: 9878 9682  
 as he was the one who have bang on to my car.

For 3rd party claim

## DECLARATION

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

8/13/8 at 10.50 a.m

Policyholder's Signature

Date &amp; Time:

Driver's Signature

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Signature of Reporting Centre Personnel