

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

27 FEB 2020

Estimate No. : **b1 54500** Page No. : **1 of 5**
Date Estimated : **17/02/2020**
Prepared By : **Shukhaizi Bin Misbah**

- ESTIMATE REPAIR FOR -

Ponnusamy Soosai
28 Scott Road
#17-01
Singapore
Singapore 228223

- 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
SLZ5235C	WBAJB32090G460050	08/05/2018	540iA	0

DESCRIPTION	VALUE
Replace front bumper including attachment, front right fender and deformation.	3,825.00
Painting front bumper and front right fender.	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.	531.00
To carry out body cavity preservation. (Per panel).	118.00
sundries	150.00
Total Labour 1:	6,724.00

DESCRIPTION	QTY	PRIC	VALUE
FRT RH SIDE PANEL ALUMINIUM	1	933.30	933.30
VERTICAL CONNECTION RH	1	19.90	19.90
FRT BUMPER CARRIER	1	726.70	726.70
FRT BUMPER BOTTOM CARRIER	1	399.70	399.70
DAMPER KERB DESCENT	1	5.45	5.45
FRT BUMPER TOP IMPACT ABSORBER (M)	1	63.00	63.00
RH GRILLE AIR INLET OPEN	1	83.15	83.15
RH FOG LAMP SUPPORT (M)	1	65.00	65.00
RH FINISHER	1	76.25	76.25
FRT BUMPER BOTTOM IMPACT ABSORBER (1	63.00	63.00
FRT BUMPER PANEL PRIMED (M)	1	1,653.55	1,653.55
SET MOUNTING PDC/PMA SENSOR FRT	1	69.35	69.35
TRIM GRILLE FRT (I CAM)	1	29.20	29.20
COVERING CROSS MEMBER (ECE)	1	33.65	33.65
RH HEADLIGHT LED AHL HIGH (ICON LIG	1	4,879.55	4,879.55
RH FOG LIGHT LED	1	471.40	471.40
ULTRASONIC SENSOR BLUESTONE WC2Y	1	381.90	381.90
DECOUPLING RING PDC TORQUE CONVERTER	1	5.10	5.10

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REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLZ5235C	WBAJB32090G460050	08/05/2018	540iA	0

Total Parts : **9,959.15**



Labour 1	:	6,724.00
Parts	:	9,959.15
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	1,167.82
Grand Total	:	17,850.97

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

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



RECORDS MANAGEMENT CENTRE

**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-20-034724

Date of Request: 27/02/2020

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 27/02/2020
 Enquiry By Melanie Setiawati
 TP Vehicle No. SKM5443Z
 Accident Date 16/02/2020

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKM5443Z	AIG Asia Pacific Insurance Pte. Ltd.	13/03/2019-12/03/2020	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.

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Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-20-034724

Date of Request: 27/02/2020

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 27/02/2020
Enquiry By Melanie Setiawati
TP Vehicle No. SKM5443Z
Accident Date 16/02/2020

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

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 Number: 5109776093 **Cover :** drivo PREMIUM

1. Index mark and Registration Number of Vehicle : **SLZ5235C**
Chassis Number : WBAJB32090G460050
2. Name of Policyholder : SOOSAI PONNUSAMY
3. Effective Date of Insurance : 23 May 2019
4. Expiry Date of Insurance : 22 May 2020
5. Persons 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/her 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.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial 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 Vehicle (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.

EXCESS (SECTION 1)	: S\$1,500
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
PRIMARY DRIVER	: PONNUSAMY SOOSAI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : VV INSURANCE AGENCY PTE. LTD. (00000614878)
Date of Issue : 22 May 2019 17:18 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorized Officer



Chief Executive

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	17/02/2020 14:36
Date Of Accident	16/02/2020 12:30
Exact Location Of Accident	28 SCOTTS ROAD, CONDO BASEMENT CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5235C
Insured/Policyholder	
Name Of Registered Owner	PONNUSAMY SOOSAI
Passport No/FIN	GXXXX137W
Email Address	SOOSAY.PONNUSAMY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98377257
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	BMW
Model	540I SR LED NAV HUD RCP MSPORT
Exact Purpose for which vehicle was being used at time of accident	

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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5109776093
Cover Note Number	

Driver

Name of Driver	PONNUSAMY SOOSAI
Passport No/FIN	GXXXX137W
Date Of Birth	02/07/1969
Occupation	INDOOR
Date Of Driving Pass	23/08/2003
Driving Experience	16 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98377257
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	SOOSAY.PONNUSAMY@GMAIL.COM

Address 28 SCOTTS ROAD
 #17-01
 Postcode 228223
 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? YES
 If Yes, Please state which Police Station
 Police Station Name RIVER VALLEY NEIGHBOURHOOD POLICE POST
 Police Station Address ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-2789999 - FAX NO: 62786427
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO THE SKETCH PLAN

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 SKM5443Z
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name

SKETCH PLAN

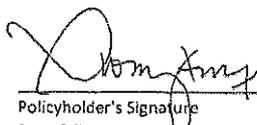
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1. Please report correctly the details of the accident to speed up the claims process.
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General 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.

B. 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.


Policyholder's Signature

Date & Time:

17/02/10, 1435

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


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



**SINGAPORE
POLICE FORCE**



E/20200217/2042

1 of 1

POLICE REPORT (NP299)

Report No. E/20200217/2042

Police Station Of Origin
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

Date/Time Report Made 17/02/2020 14:13		Vide Report No.		Station Diary No. 22	
Name Of Informant PONNUSAMY SOOSAI		Address 28 SCOTTS ROAD #17-01 SCOTTS 28 SINGAPORE 228223			
ID Type / ID No. FIN NO / G5665137W		Contact No. Home/Office		Mobile 98377257	
Nationality MALAYSIAN		Email Address			
Occupation REGIONAL HEAD		Sex Male	Age 50	Date of Birth 02/07/1969	Race Indian
Institution/School Name		Language			
Date/Time Of Incident 15/02/2020 19:00 - 16/02/2020 12:30		Location Of Incident 28 Scotts Road, Condominium Basement Carpark			

Brief details.

On 15/02/2020 at about 1900hrs, I last parked my vehicle (SLZ5235C) at parking lot number 42 at the basement carpark of No.28 Scotts Road, everything was in order and no sign of damages to my vehicle. On 16/02/2020 at about 1230hrs, when I was about to leave for lunch, I discovered damages to the front right side of my vehicle. Scratches and broken parts to the cover for my right front headlight. I wish to state that I did not have any suspect in mind; there are few CCTVs in the vicinity. I will be lodging this report for insurance claim purposes.

Signature Of Officer Recording The Report: E / Sr Staff Sgt MUHAMMAD KHAIRUL ANUAR BIN MOHAMAD SIS	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 17/02/2020 14:13
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Insp LIM PEI XUAN, AMANDA Contact No.: 63910000	Classification Of Case:

Authentication Stamp

	SINGAPORE POLICE FORCE	SN 069
SIGNATURE		

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

