

**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

02 APR 2020

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

Estimate No. : b1 54938  
Date Estimated : 26/03/2020  
Prepared By : Foong Shiuh Jye

Page No. : 1 of 4

**- ESTIMATE REPAIR FOR -**

Tan Chee Kiang  
17 Evelyn Road  
#25-06

Singapore 309306

**- ACCOUNT - 40000**

Cash Sales - Service  
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SBL2323T	WBAZV42020L493382	29/09/2012	X5 xDRIVE35i	0

DESCRIPTION

To replace bumper front cover

VALUE

1,275.00

To spray paint bumper front cover

1,038.00

To supply front emboss number plate.

83.00

To remove old PDC assembly, replace damaged parts and  
reconnect to new bumper including conduct checks for  
proper function.

177.00

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

177.00

Sundries.

80.00

Total Labour 1: **2,830.00**DESCRIPTION

FRT BUMPER SET MOUNTING PARTS (VALU

QTYPRICVALUE

1

31.40

31.40

CASING LOWER PART SCHWARZ (PDC)

1

392.40

392.40

FRT BUMPER PRIMED

1

991.45

991.45

LICENSE PLATE HOLDER (ECE)

1

66.15

66.15

Total Parts : **1,481.40**Labour 1 : **2,830.00**Parts : **1,481.40**Labour 2 : **0.00**Excess : **0.00**Total GST @ 7% : **301.80**Grand Total : **4,613.20**

\*\* 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-20-053413

Date of Request: 02/04/2020

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 02/04/2020  
Enquiry By Melanie Setiawati  
TP Vehicle No. SLX2162J  
Accident Date 29/01/2020

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLX2162J	AIG Asia Pacific Insurance Pte. Ltd.	21/03/2019-20/03/2020	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-20-053413

Date of Request: 02/04/2020

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 02/04/2020  
Enquiry By Melanie Setiawati  
TP Vehicle No. SLX2162J  
Accident Date 29/01/2020

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.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

## 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	30/01/2020 20:09
Date Of Accident	29/01/2020 16:45
Exact Location Of Accident	WOODLANDS CHECKPOINT TOWARDS SINGAPORE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBL2323T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN CHEE KIANG
NRIC No	SXXXX381J
Email Address	SCOTTSTRIDENT@YAHOO.COM
Mobile Phone No	(LOCAL) +65-93397232
Alternative Phone No	OTHERS-93397232

### Vehicle Particulars

Manufacturer	BMW
Model	X5 XDRIVE 35i
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	10777219
Cover Note Number	

### Driver

Name of Driver	TAN CHEE KIANG
NRIC No	SXXXX381J
Date Of Birth	21/02/1969
Occupation	INDOOR
Date Of Driving Pass	25/09/1995
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93397232
Fax Number	
Contact Number	OTHERS-93397232
Email Address	SCOTTSTRIDENT@YAHOO.COM

Address	NA
	NA
Postcode	
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 - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

#### 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)	2
Passenger 1	NAME: : SARA
	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

At the causeway bridge & about 59 meters from immigration entry clearance into singapore as i was queing in my car and approaching the immigration & custom clearance, my wife remarked that the car in front has rolled or reversed back & nudged the front of my car. Upon getting down to investigate i realised the front vehicle had already moved back ahead leaving a 25-30cm gap between my front bumper & his rear bumper. Upon inspecting & discussion , i noticed a slight nick or scratch on my bumper. The condition was wet due to drizzle & rain & i believe the car in front had rolled back onto my front bumper.

#### 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	SLX2162J
Vehicle Make/Model/Colour	MITSUBISHI / OUTLANDER 2.0 CVT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HAI DILL YUSOF (DRIVER'S SON)
NRIC/Passport Number	
Contact Number	98254311
Address	

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

## Sketch Plan Pg. 1


### 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.



Policyholder's Signature  
Date & Time:

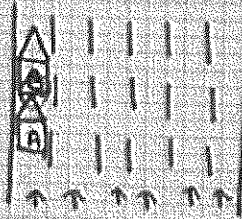
30 Jan 2020

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

**VERIFY BY AJAX MARS (ARC)**  
**REPORTING OFFICER**  
MOHAMED SAIFULLAH S/O SYED MASOOD  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Sketch Plan #2

### ETCH PLAN



Vehicle A: SN. 23297  
Vehicle B: SN. 21623

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

## APPENDIX

**SECRET**

1998

姓名: 王德山  
 性别: 男  
 年龄: 45

VERIFY BY AJAY MARS (ARC)  
REPORTING OFFICER  
MOHAMED SAIFULLAH S/O SYED MASOOD  
Reporting Center Personnel's Signature  
Name:  
NHU/TH No.:

**prince@ajaxmars.com**

---

**To:** mazlan@ajaxmars.com; group@ajaxmars.com  
**Cc:** 'Meilin '; victor@ajaxmars.com  
**Subject:** RE: GIA Report - SBL2323T

**From:** [scottstrident@yahoo.com](mailto:scottstrident@yahoo.com) <[scottstrident@yahoo.com](mailto:scottstrident@yahoo.com)>  
**Sent:** Tuesday, 25 February, 2020 1:43 PM  
**To:** [mazlan@ajaxmars.com](mailto:mazlan@ajaxmars.com)  
**Subject:** Re: GIA Report - SBL2323T

Attn : Meil Ling

It has come to my notice that my accident report has not been detailed in describing the accident. At the causeway bridge & about 59 meters from immigration entry clearance into singapore as i was queing in my car and approaching the immigration & custom clearance, my wife remarked that the car in front has rolled or reversed back & nudged the front of my car. Upon getting down to investigate i realised the front vehicle had already moved back ahead leaving a 25-30cm gap between my front bumper & his rear bumper. Upon inspecting & discussion , i noticed a slight nick or scratch on my bumper. The condition was wet due to drizzle & rain & i believe the car in front had rolled back onto my front bumper. I would now urgently like to make a 3rd party claim against the other vehicle. I also noticed in the GIA accident report Aviva-Mars00031641-Gia , the description of tge accidnt "Head To Rear". collision is wrong & should read "Rear to Head" since it was a roll back of the said vehicle impacting my front my car . Please kindly rectify my report & accident details. Also please put into place my need for a 3rd party claim against the other vehicle. Than You.

Warm Regards  
Mr Tan Chee Kiang

Sent from Yahoo Mail for iPhone

On Thursday, January 30, 2020, 8:25 PM, [mazlan@ajaxmars.com](mailto:mazlan@ajaxmars.com) wrote:

Dear Sir/Madam,

Please find attached the GIA Report for your perusal.

To reply, please email to [group@ajaxmars.com](mailto:group@ajaxmars.com)

**Accident Sketch Plan Pg. 2**

Thank you.

Best Regards,

*Mazlan B A Rahman*

email: [mazlan@ajaxmars.com](mailto:mazlan@ajaxmars.com)

**AJAX MARS Pte Ltd**

120 Lower Delta Road

#08-08 Cendex Centre

Singapore 169208

Tel: (65) 6333 2222 DID: (65) 6311 3741

<http://www.ajaxadjusters.com>



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6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S665S0020G / GST Reg. No.: M400017735

## ADDENDUM

Original Report No : MBHH20013772 Vehicle Registration No: SBL2323T

Name(as shown in NRIC) : TAN CHEE KIANG NRIC/FIN/Passport No : \_\_\_\_\_

(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate

Address : \_\_\_\_\_ Singapore(

Contact (Tel) : \_\_\_\_\_ Mobile No. : 93397232

Email Address : \_\_\_\_\_

Date of Accident : 29/01/2020 Time of Accident : 1645HRS

Place of Accident : WOODLANDS CHECKPOINT TOWARDS SINGAPORE

Insurance Company: AVIVA LTD

## AMEND ACCIDENT STATEMENT

Reporting Centre Personnel's Signature  
Name: THRUGA  
NRIC/FIN No.:  
Date: 25022020