S. REC. BY: CASUL T REF. CS CTI 2-OC	IGNMENT
	CCM 7164K Yr Regn: 2018 13712
on: Date:	Typey M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
slimated Cost:	
DITPIWS ITP RESIOD RESIEVA / INV I MV	e M IN FRAT ISA WAY CC 1998
Inspect Vehicle No:	COMA AG: Instreament
Workshop m/s	Sp.Reading 378-47 T/Radio: Insured / Std / NI / NA
sured:	C/No: WB9 JA 1266 0 B J 18849
olicy No.	Gen Cond: Good   Fair   Poor   Burnt
Jaims No.	Steering: prorder/ Jammed / Leaked / Burnt or
ourn Insured: Excess:	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	A STD AIRING OF
Make of Veh:	- 248/48/60
(Policy Condition)	- INVESTIGATION OF THE PROPERTY OF THE PROPERT
Remark: The veh had commenced its	DIS   BS / DUN / EXNOVA / GY / FS / ELECT
repair at the time of inspection.	TOYO / YOKO or . Rear
Bal, or Market Value: (57)k	Front R/Bal. 6 mm
IDAC Accident Roort: Consistent? : Yes or No	R/Bal. Dem
CIA / DR Seen: Consistent? : Yes or No	DOA 10/01/2020 D.O.I. 06/07/2020
Fet Renairs: days Res.: Yes or No	DICOM MANY
Lum Sum: % 3 Val.: Yes or No	Survey held at
And the state of t	Des. of Damages: Frt   Rear   Ols   N/S   U/C   Rooftop or O/S REAR
CA / REV / REP. / 24 HRS Vehicle: IN	The U/C / Chassis frame / Body Structure affected due to collision.
Date:Person Contacted:	The U/C I Chassis Italia (
Date / Time   Action / Instruction	
	Days Of Repair:
Date/Time, File Pass to? Preli. Report	Resurvey No. of Trip: Survey Fee:
: Final Report	Resurvey No. Of 1719.
Date/Time, File Return to?	Add Fee: Site Insp (\$) _s+Rs_si
2)	Interview (\$ ) Photos
2	:Tech. Invs (\$ ) Offices
Representati:	:Weelend (\$
Lump Sum / LB J: (%)	A MARSHURING NO.

## **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 (AfterSal 64796624 (Motorrad (AfterSales) (Motorrad)

Grand Total

6,07



2,707.10

GST REG. NO : M2 - 0020081 - X

ESTIMATE

16 JUN 2020

Estimate No. : b1 55263  Date Estimated : 16/06/2020  Prepared By : Inthiran A/L Thurasamy	Page No. : 1 of 4
- ESTIMATE REPAIR FOR - Lim Thiam Lee 26 Toh Yi Road Singapore 596506	- ACCOUNT - 135 China Taiping Insurance (S) Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909
REGN. NO. CHASSIS NO. REGN. DAT SCM7164K WBAJA12060BJ18849 31/01/20	The state of the s
DESCRIPTION To repair rear right fender.  Painting rear right fender.  To check electrical wiring systems and lightings at rear section for proper function.  Sundries.  Claims OD / Grd Party) Universited losses / Direct Settleme Regn No.  Claim No.  Late8 Time 06/07/2020 C RSU Excess S\$  Surveyor's Name RASML Sign  Surveyor's Tel 900000 Authorised Yes / No  Authorised Date Time  PEST OF THE PHOTO B SURVEYOR Yes / No PML Yes Surveyor's E-mail  No. of Working Days Recommend 3 Alaxy	Total Labour 1: 2,530.00  LKK Auto Consultants hence notify the Repairer of the following:  • To resurvey before/after spray painting  • To display damaged part(s) during resurvey  • Parts prices are subject to confirmation  • Third party survey is on a "Without Prejudice" basis  • No illegal modification(s) is allowed
	Labour 1 : 2,530. Parts : 0. Labour 2 : 0. Excess : 0. Total GST @ 7% : 177.

<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 \*\*

#### SINGAPORE ACCIDENT STATEMENT

### MPORTANT NOTICE

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 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.

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 STATEMENTS

Date Of Report

11/06/2020 14:41

**Date Of Accident** 

10/06/2020 17:15

**Exact Location Of Accident** 

TOH GUAN EAST ROAD

Country/State of Loss

SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SCM7164K

Insured/Policyholder

Name Of Registered Owner

MR LIM THIAM LEE

NRIC No

SXXXX977D

**Email Address** 

FINANCE@HENGLEE.COM.SG

Mobile Phone No

(LOCAL) +65-96645632

Alternative Phone No

OTHERS-96645632

Vehicle Particulars

Manufacturer

**BMW** 

Model

5201

Exact Purpose for which vehicle was being used at

time of accident

NORMAL USAGE

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

AXA INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

**UNAVAILABLE** 

Cover Note Number

Driver

Name of Driver

MR LIM THIAM LEE

NRIC No

SXXXX977D

Date Of Birth

27/08/1949

Occupation

Date Of Driving Pass

**INDOOR** 

**Driving Experience** 

21/08/2009

10 YEARS AND 9 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-96645632

Fax Number

Contact Number

OTHERS-96645632

**EMail Address** 

FINANCE@HENGLEE.COM.SG

26 TOH YI ROAD stcode 596506 was driver an employee of the Insured's Company NO 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

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

: SUSIE LIM NAME:

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

2

NO

YES

NO

2

Circumstances of Accident

REFER TO ATTACH.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera?

Remarks/ Reasons:

YES

FILE TOO BIG-BURN CD

Was there any audio recorded?

NO

**YM36H** 

I DETAILS OF OTHER VEHICLE PROPERTY 11

Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

COMMERCIAL VEHICLE

POH BAN KOON

NRIC/Passport Number

SXXXX446A

Contact Number

Address

Postcode

Insurance Company Name

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Nature Of Damage

LEFT

### 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:

- 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)
  - (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
- 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.

Poticyholder's Signature

Date & Time:

11-06-20

**Driver's Signature** 

(If driver is not the policyholder)

Date & Time:

Reporting Centre

Name:

NRIC/FIN No Sime d

3 Alexand a Roso prby Performance Centre

ingapore 159941

# Sketch Plan Pg. 2 SKETCH PLAN **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT** wag 10+4 40 2020 Easy Cuan Jah travellin 1M36HU vehicle collided MY Bortion. vi deo Attached BCRNR evidence. DECLARATION I/We declare the foregoing particulars are true in every respect. Ha

Driver's Signature

Date & Time:

(If driver is not the policyholder)

Policybelder's Signature

Date & Time: 11-06-20

to be the character of the

Page 5 of 13

Jamiran MI

Reporting Centre Rersonnel s Signature

Name: 203 Alexantisa Road NRIC/FIN Notice Traiby Performance Cent Stockhore (15994)

## > Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type: Owner ID:	Singapore NRIC 977D
Vehicle No.	SCM7164K
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Jul 2020
Vehicle Make:	B.M.W.
Vehicle Model:	520I LED NAV
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No:	19415109B48B20A
Chassis No.:	WBAJA12060BJ18849
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$47.763.00
Original Registration Date:	31 Jan 2018
First Registration Date:	31 Jan 2018
Transfer Count:	0
Actual ARF Paid:	\$58.869.00
enament yaki kuman menje e e e e e e e	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Jan 2028
PARF Rebate Amount:	\$44,151.00
COE Expiry Date:	30 Jan 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years): OP Paid:	10
COE Rebate Amount:	\$42.661.00
Total Rebate Amount:	\$32,259.00
The information contained herein is correct as at 07 Jul 2020	\$76,410.00

OK

