

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

22 DEC 2020

E S T I M A T E

Estimate No. : b1 56987
Date Estimated : 22/12/2020
Prepared By : Joseph Yaguel

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- ESTIMATE REPAIR FOR -

Yeep Foong Kin
80A Lorong 4 Toa Payoh
13-450

Singapore 311080

- ACCOUNT - 135

China Taiping Insurance (S) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

| REGN. NO. | CHASSIS NO. | REGN. DATE | MODEL | MILEAGE |
|-----------|-------------------|------------|--------------|---------|
| SMV8861J | WBAYH120205R51704 | 31/08/2020 | X2 sDrive18i | 0 |

DESCRIPTION

To replace left front door and left rear door

VALUE

2,550.00

To respray left front door and left rear door

2,076.00

To conduct check on all doors central locking system for proper function.

177.00

To carry out body cavity preservation.
(Per panel). X 2 panel

236.00

Sundries

150.00

Total Labour 1: **5,189.00****DESCRIPTION**

FRT LH DOOR

QTY**PRIC****VALUE**

REAR LH DOOR

1

1,203.80

1,203.80

REAR LH DOOR FIXED SIDE WINDOW

1

277.80

277.80

REAR DOOR SEALING TAPE ENTRANCE

1

34.95

34.95

FRT LH DOOR DOOR SILL SEALING

1

34.95

34.95

Total Parts : **2,755.30**Labour 1 : **5,189.00**Parts : **2,755.30**Labour 2 : **0.00**Excess : **0.00**Total GST @ 7% : **556.10**Grand Total : **8,500.40**

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

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

INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

GZ3336S

Date of Accident

19/12/2020 𠄎

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **China Taiping Insurance**Period of Insurance **23/11/2019 - 09/03/2021**Requested By **Caroline Tan Shirui (Performa...**Requested Date **21/12/2020 17:55****Payment details**Request Amount: **\$S\$1.87**GST Amount: **\$S\$0.13**Total Amount Due (GST Inclusive): **\$S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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 Submission | 21/12/2020 18:03 (SGT) |
| Date of Accident | 19/12/2020 18:32 (SGT) |
| Exact Location of Accident | 82 MacPherson Ln, Singapore 360082 |
| Additional Location Information | CARPARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--|
| Vehicle Registration Number | SMV8861J |
| INSURED/POLICYHOLDER |  |
| Is company? | No |
| Name Of Registered Owner | YEEP FOONG KIN |
| NRIC No | SXXXX443C |
| Email Address | ST39006@GMAIL.COM |
| Mobile Phone No | (Phone) +65-83222129 |
| Alternative Phone No | +65-83222129 |

| | |
|--|---|
| VEHICLE PARTICULARS |  |
| Manufacturer | BMW |
| Model | X2 |
| Variant | - |
| Exact purpose for which vehicle was being used at time of accident | Private use |
| Are you claiming under your own insurance policy for repair to your vehicle? | No - Claiming third party |
| Vehicle Category | Private car |

| | |
|---------------------------|---|
| INSURANCE COMPANY |  |
| Name of Insurance Company | Liberty Insurance |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | - |
| Cover Note Number | - |

| | |
|----------------|---|
| DRIVER |  |
| Name of Driver | LEE SIAW TING |
| NRIC No | GXXXX594U |
| Date Of Birth | 31/08/1989 |
| Occupation | Indoor |

| | |
|--|-------------------------------|
| Date Of Driving Pass | 20/06/2019 |
| Driving experience | 1 YEAR AND 6 MONTHS |
| Gender | Female |
| Mobile Number | (Phone) +65-83222129 |
| Alt. Phone Number | - |
| Email Address | ST39006@GMAIL.COM |
| Address | BLK 82 MACPHERSON LANE #11-17 |
| Address complement | - |
| Postcode | 360082 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Relative |
| Does Driver Own Other Vehicles? | No |
| Vehicle Registration Number of Other Vehicle Owned by Driver | - |
| Insurance Company of Other Vehicle Owned by Driver | - |

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 the accident? | No |
| Number of vehicles involved in the accident | 2 |
| Was anybody injured in the Accident? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| Was any other material or property damaged? | Yes |
| Number of Passengers (Including Driver) | 0 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

DETAILS OF POLICE ACTION

| | |
|---|----|
| Was the accident reported to the police? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACH.

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | Yes |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|-------------------------|
| Vehicle Registration Number | GZ3336S |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | UNKNOWN |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | China Taiping Insurance |

| | | |
|---|-------|-------|
| Nature Of Damage | | RIGHT |
| Details of property damaged in accident | | - |
| 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.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 21/12/2020

Reporting Centre Personnel's Signature
Name: Joseph Yaguel
NRIC/FIN NO.:
Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

