

**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 57848**

Page No. : **1 of 5**

Date Estimated : **17/03/2021**

Prepared By : **Inthiran A/L Thurasamy**

**- ESTIMATE REPAIR FOR -**

**Ng Khong Voon**  
**196D West Coast Road**

**Singapore 127379**

**- ACCOUNT - 40000**

**Cash Sales - Service**  
**Singapore**

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLV1325Z	WBA2D920605E91563	22/12/2017	216i G TOURER	0

DESCRIPTION

To replace front right door and wing mirror assembly.

VALUE

1,700.00

To painting front right door and wing mirror cover.

1,113.00

To check electrical wiring system

177.00

To transfer lock mechanism from old to new door including  
conduct check on new door power window system for proper  
function. (1 door).

531.00

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

118.00

Sundries

80.00

Total Labour 1: **3,719.00**

DESCRIPTION

QTY

PRIC

VALUE

FRT RH DOOR

1

1,142.60

1,142.60

RH MIRROR GLASS HEATED WIDE ANGLE

1

687.20

687.20

RH COVER MIRROR BASE

1

28.80

28.80

RH OUTSIDE MIRROR COVER CAP PRIMED

1

115.30

115.30

RH SUPPORTING RING

1

58.95

58.95

RH LOWER HOUSING SECTION

1

46.10

46.10

RH WIRING HARNESS EXT. MIRROR HEATE

1

77.10

77.10

Exterior mir

1

496.10

496.10

RH ADDITIONAL TURN INDICATOR LAMP

1

59.65

59.65

FRT RH DOOR BRAKE

1

74.60

74.60

FRT DOOR EDGE PROTECTION

1

158.65

158.65

RH SEAL A PILLAR

1

48.35

48.35

DRIVE OUTSIDE MEMORY MIRROR

1

441.95

441.95

RH MIRROR ELECTRONICS

1

410.35

410.35

Total Parts : **3,845.70**

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Estimate No.	: b1 57848	Page No. : 2 of 5
Date Estimated	: 17/03/2021	
Prepared By	: Inthiran A/L Thurasamy	

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLV1325Z	WBA2D920605E91563	22/12/2017	216i G TOURER	0



Labour 1	:	3,719.00
Parts	:	3,845.70
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	529.53
Grand Total	:	<u>8,094.23</u>

\*\* 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.

GBG4393D

Date of Accident

13/03/2021 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **China Taiping Insurance**Period of Insurance ..... **08/08/2020 - 07/08/2021**Requested By ..... **Chan Sook Ling (Performance ...**Requested Date ..... **17/03/2021 14:46****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 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 Submission	15/03/2021 11:51 (SGT)
Date of Accident	13/03/2021 15:30 (SGT)
Exact Location of Accident	Pandan Gardens, Singapore
Additional Location Information	406 PANDAN GARDENS CARPARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV1325Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG KHONG VOON
NRIC No	SXXXX677B
Email Address	khong-voon.ng@hotmail.com
Mobile Phone No	(Phone) +65-96602053
Alternative Phone No	+65-96602053

VEHICLE PARTICULARS

Manufacturer	BMW
Model	216i
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	Direct Asia
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00557934/02
Cover Note Number	-

DRIVER

Name of Driver	CHIAM BAO YING, LOUISA
NRIC No	SXXXX153E
Date Of Birth	07/04/1982
Occupation	Indoor

Date Of Driving Pass	20/05/2009
Driving experience	11 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91827754
Alt. Phone Number	-
Email Address	LOUISA_CHIAM@HOTMAIL.COM
Address	196D WEST COAST ROAD
Address complement	-
Postcode	127379
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Side Swipe
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	FRANCIS ZHAN
Gender	Male

#### PASSENGER 2

Name	ISAAC NG
Gender	Male

#### 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 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	GBG4393D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KOH YAM KOON
NRIC No	SXXXX086B
Contact Number	(Phone) +65-83326106
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT NOTICE

VEHICLE NO: 8V1351

ACCIDENT DATE: 13/03/2016 15:30

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, regulates, 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.

**NOTE: DO NOT FORGET THAT YOU MAY HAVE A 14-DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.**

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 13/3/2016

At 13/3/2016

CHARN'S CUSTOMERCARE

Reporting Centre Personnel's Signature  
Name:  
NR C/I/N No:


SKETCH PLAN


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

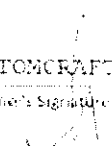
DATE: 13 March 2021
TIME: 3:30pm
ADDRESS: 426 Pandana Gardens, corporate
I was driving into the carpark and slowing the car down to let the passenger alight when a truck (ARB 23930) parked behind me reversed and crashed into my right side mirror
OWN DAMAGE ( )    3RD PARTY CLAIM (✓)    REPORTING ONLY ( )    OWN WORKSHOP (✓)

DECLARATION

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

  
 Policyholder's Signature  
 Date & Time: 13 Mar 2021

  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 13 Mar 2021  
 3:30pm

CHARN'S CUSTOMCRAFT  
  
 Reporting Centre Personnel's Signature  
 Name:  
 NRCL/IN No.: