

ASS. REC. BY:

Steve

REF:

CS/CTI/21903831/EF3

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_

Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S
X	X

Val. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Turn Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No SL235080

Yr Regn 30/4/18

Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: BMW 216i

c.c. 1499

Colour: Grey A/C: Insured / Std / Nil / N

Sp Reading: 42386 T/Ratio: Insured / Std / Nil / N

Eng/No: \_\_\_\_\_

C/No: WBA209294 JS-K81293

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 205/55R17

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. 5 mm

L/Bal. 5 mm

D.O.A. 23/3/21

D.O.A. 25/3/21

Survey held at

Performance Motors

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction

MV - 99K

Date/Time, File Pass to?

☐ : Prel. Report

☐ : Final Report

Date/Time, File Return to?

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech Invs (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

Rep. Form:

Emp. Sign / L.E. /

SLZ3508D

BMW Dealer

## 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

## ESTIMATE

# car in #

Estimate No. : B1 57923  
Date Estimated : 24/03/2021  
Prepared By : Han Kwan Yong

Page No. : 1 of 6

## - ESTIMATE REPAIR FOR -

Foo Chit Leong  
776 Bedok Reservoir Road  
#10-20

Singapore 479253

- ACCOUNT - 40000

Cash Sales - Service  
Singapore

China Taipei

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLZ3508D	WBA2D920405K81203	30/04/2018	216i GT	0

## DESCRIPTION

To replace rear bumper, tail panel and boot lid including to pull & straighten tail panel before cutting and to knock out dented area caused by the accident

850 X 2

1700

VALUE  
5,100.00

To respray rear bumper, tail panel, boot lid, rear left fender, rear right fender and boot compartment

885 + 885 + 855 + 1038 - 10%

3324

4,937.00

To tow accident vehicle to PML workshop.

150.00

To replace engine mounting including re-alignment of engine block to body frame.

?

679.00

To replace gearbox mounting including re-alignment of gearbox to cross member and propeller shaft system.

?

679.00

To mount accident vehicle on speed bench to facilitate pulling and re-alignment of body/chassis accordance with BMW specification.

?

664.00

To replace rear windscreen glass.

676.00

To conduct water leak tests.

75.00

To supply and install rear windscreen solar film.

531.00

To remove and install boot compartment carpet and garnish to facilitate repair.

231

?

271.00

To replace bootlid smart opener top and bottom sensor line including program and conduct check for proper function.

561

?

661.00

To transfer lock mechanism from old to new bootlid including conduct check on new bootlid central locking system for proper function.

451

531.00

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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

## ESTIMATE

Estimate No. : B1 57923  
Date Estimated : 24/03/2021  
Prepared By : Han Kwan Yong

Page No. : 2 of 6

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLZ3508D	WBA2D920405K81203	30/04/2018	2161 GT	0

### DESCRIPTION

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

150 177.00

To check electrical wiring system and lighting at the rear section for proper function.

150 177.00

To supply rear emboss number plate.

83.00

Sundries

150.00

Total Labour 1: 15,541.00

DESCRIPTION	QTY	PRIC	VALUE
STABILIZER LINK	1	92.50	92.50
ENGINE MOUNT	1	242.15	242.15
GEARBOX MOUNT	1	210.60	210.60
BOOTLID	1	1,216.40	1,216.40
@ INTERIOR TAIL TRIM	1	281.90	281.90
TAIL PANEL	1	358.80	358.80
RR BUMPER LH SIDE GUIDE	1	61.65	61.65
RR BUMPER RH SIDE GUIDE	1	61.65	61.65
REAR BUMPER CARRIER	1	460.40	460.40
SUPPORT	1	45.75	45.75
RR BUMPER LH INNER SIDE GUIDE	1	61.65	61.65
RR BUMPER RH INNER SIDE GUIDE	1	61.65	61.65
REAR BUMPER TRIM STRIP (CHROM)	1	110.55	110.55
# REAR BUMPER PANEL PRIMED (LI	1	1,050.65	1,050.65
REAR BUMPER TOWING FLAP EYE PRIMED	1	43.25	43.25
GROMMET	2	0.80	1.60
PLAQUE 74MM	1	71.95	71.95
STRIKER BOOT LID	1	60.10	60.10
LOCK TRUNK LID	1	195.75	195.75
# ACTUATION UNIT	1	615.15	615.15
BOOT LID/TAILGATE PUSH BOTTON ICAM	1	41.70	41.70
REAR VIEW CAMERA COVER (ICAM)	1	12.35	12.35
BUMP STOP	10	3.20	32.00
# REAR WINDOW (ESG)	1	657.60	657.60
# REAR BUMPER HEAT INSULATION	1	77.30	77.30
# TRIM PANEL TAILGATE BOTTOM I	1	284.05	284.05
# RH TAILGATE LAMP	1	20.50	20.50
# LH TRIM TAILGATE	1	89.45	89.45
# BOOTLID SEALING	1	144.55	144.55
# Headrest leather	2	522.70	1,045.40
SENSOR WIRE FOR SMART OPENER TOP	1	46.55	46.55
SENSOR WIRE FOR SMART OPENER BOTTOM	1	51.20	51.20
# LH GUTTER STRIP	1	25.95	25.95

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Fax: 63449773

115, Alexandra Road  
Sime Darby Business Centre  
Singapore 159944  
Fax: 64796501 (AfterSales)  
64796624 (Motorsiad)



GST REG. NO : M2 - 0020081 - X

## ESTIMATE

Page No. : 3 of 6

Estimate No. : B1 57923  
Date Estimated : 24/03/2021  
Prepared By : Han Kwan Yong

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLZ3508D	WBA2D920405K81203	30/04/2018	2161 GT	0

DESCRIPTION	QTY	PRIC	VALUE
# RH GUTTER STRIP	1	25.95	25.95
# REAR LH LIGHT IN THE TRUNK L	1	263.40	263.40
# REAR RH LIGHT IN THE TRUNK L	1	263.40	263.40
REAR LH LIGHT IN THE SIDE PANEL	1	376.30	376.30
# REAR RH LIGHT IN THE SIDE PA	1	376.30	376.30
# NUMBER-PLATE LIGHT LED	2	24.05	48.10
DECOUPLING RING PDC TORQUE CONVERTER	4	5.15	20.60
ULTRASONIC SENSOR ATLANTIKGRAU(WC09	4	383.15	1,532.60
FRT LOWER STRAP (Self belt buckling)	2	218.40	436.80
# (DG) FRT LH UPPER BELT (SCHW	1	336.40	336.40
# (DG) FRT RH UPPER BELT (SCHW	1	336.40	336.40
BLIND RIVET AVIBVLB	30	0.55	16.50
SCREW (SF PLUS M5X15)	10	0.55	5.50
(DG/SL) BODY ADHESIVE K5B (195ML)	1	336.75	336.75
(DG) CLEANER R1 (100ML)	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR)	2	131.55	263.10
PUNCH RIVET N4	25	0.55	13.75
(DG/SL)ADHESIVE PRIMER VP 206 (30ML	1	27.85	27.85
(S/L) SEAM SEAL 300ML	3	33.80	101.40
Total Parts :			12,639.95

## Claims OD / 3rd Party / Uninsured losses / Direct Settlement

Regn No.	Claim No.
Date & Time 25/3/21, 12:00pm	Excess S\$
Surveyor's Name STEVE (LKK)	Sign
Surveyor's Tel 83228813	Authorised Yes / No
Authorised Date	Time
RESURVEY PARTS PHOTO BY SURVEYOR Yes / No	PML Yes / No
Surveyor's E-mail	
No. of Working Days Recommend	

WZ ALZ  
6 days  
P/P  
My Bel sy

LKK Auto Consultants hence notify the Repairer of the following:

- 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
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature:

Labour 1	:	15,541.00
Parts	:	12,639.95
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	1,972.67
Grand Total	:	30,153.62



\*\* THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY \*\*  
\*\* PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE \*\*

## 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 willful 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	24/03/2021 17:45 (SGT)
Date of Accident	23/03/2021 22:50 (SGT)
Exact Location of Accident	Bedok Reservoir Rd, Singapore
Additional Location Information	OUTSIDE DAMAI SEC SCH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ3508D
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FOO CHIT LEONG
NRIC No	SXXXX457C
Email Address	CHITLEONG@GMAIL.COM
Mobile Phone No	(Phone) +65-97654818
Alternative Phone No	(Home) +65-0

#### 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
Transmission	Auto
CC	1499

#### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

#### DRIVER

Name of Driver	FOO CHIT LEONG
NRIC No	SXXXX457C



Date Of Birth	30/04/1974
Occupation	Indoor
Date Of Driving Pass	02/04/2003
Driving experience	17 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97654818
Alt. Phone Number	(Home) +65-0
Email Address	CHITLÉONG@GMAIL.COM
Address	776 BEDOK RESERVIOR RD
Address complement	#10-20
Postcode	479253
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	TAN SWEE HOON SALLY
Gender	Female

#### PASSENGER 2

Name	ALEXIS FOO XUAN NI
Gender	Female

#### PASSENGER 3

Name	BERNICE FOO XUAN XIN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### SEE ATTACHED SKETCH PLAN

#### ATTACHMENT(S)

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

Yes  
No  
No

### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	GBF8051U
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Commercial vehicle
Name of Driver	NATARAJAN NAGARAJAN
Work Permit No	GXXXX963U
Contact Number	(Phone) +65-90227023
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	FRONT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person	FOO CHIT LEONG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLZ3508D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

#### INJURED 2

Name of injured person	TAN SWEE HOON SALLY
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLZ3508D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

#### INJURED 3

Name of injured person	ALEXIS FOO XUAN NI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLZ3508D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

#### INJURED 4

Name of injured person	BERNICE FOO XUAN XIN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

SLIGHT INJURY

SLZ3508D

Yes

Yes



## 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:

24/3/21  
3:30pm

Driver's Signature

(If driver is not the policyholder)

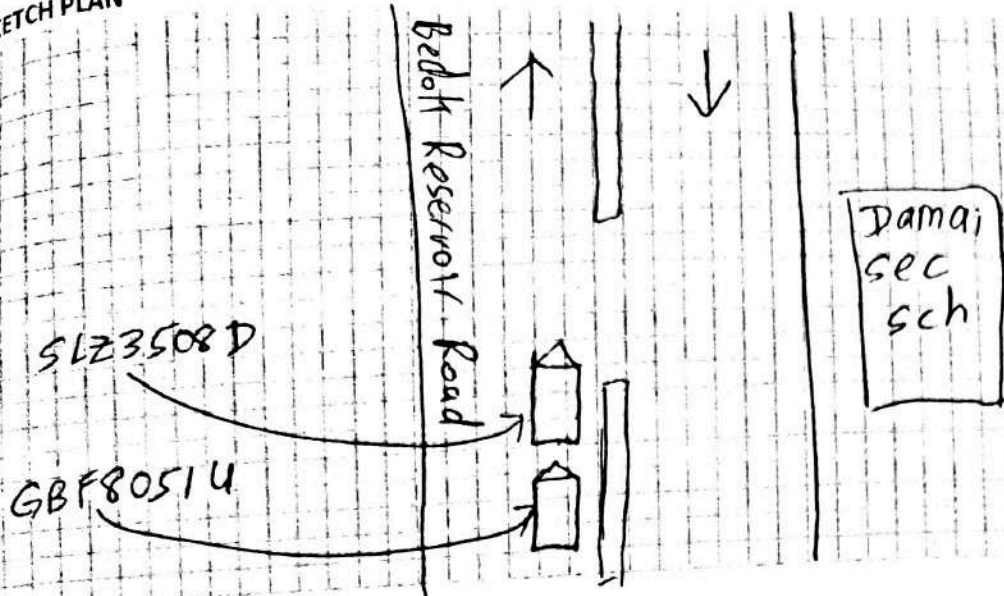
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report no. T/20210324/2054

DECLARATION

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

Policyholder's Signature

Date & Time:

24/3/21  
3:10pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# SINGAPORE POLICE FORCE



T/20210324/2054

1 of 4

Report No. T/20210324/2054

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:  
24/03/2021 13:01

Vide Report No.:  
G/20210323/0207

Station Diary No.:  
45

### Informant's Particulars

Name of Informant:  
FOO CHIT LEONG

Address:  
776 BEDOK RESERVOIR ROAD #10-20 SINGAPORE 479253

ID Type / ID No.:  
NRIC NO / S7415457C

Contact No.:  
Home/Office: Mobile: 97654818

Nationality:  
SINGAPORE CITIZEN

Email:

Sex: Male Age: 46 Date of Birth: 30/04/1974

Type of Informant:  
Driver

Race:  
Chinese

Language:

Institution / School Name:

Occupation:  
PRODUCT MANAGER

Driving Licence Information:  
Class: Date of Expiry:

### General Information of the Accident

Type of  
Accident:

Injury  
Conveyed By Ambulance

Drink  
Drive:  
No

Date/Time of  
Accident:  
23/03/2021 22:50

Type of Location:  
Straight Road

Location:

BEDOK RESERVOIR ROAD

Weather:  
Clear

Road Surface:  
Dry

Road Speed Limit:

Traffic Flow:

Traffic Control:

Traffic Volume:

Type of Collision:  
Between Moving Vehicles - Head To Rear

Anyone conveyed by  
ambulance:  
No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF8051U	Lorry					0
SLZ3508D	Car				Slightly Damaged	3

### Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



# SINGAPORE POLICE FORCE



T/20210324/2054

2 of 4

Report No T/20210324/2054

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

## CONTINUATION OF REPORT

Driver Name		NATARAJAN NAGARAJAN		ID No.	G2651963U
Related Vehicle		GBF8051U (Lorry)		Contact No.	NIL
Hospital/Clinic		NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment		NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL		Degree of Injury	NIL
Driver Name		FOO CHIT LEONG /		ID No.	S7415457C
Related Vehicle		SLZ3508D (Car)		Contact No.	97654818
Hospital/Clinic		CHANGI GENERAL HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment		24/03/2021		Date Discharge	24/03/2021
No. of Days granted Medical Leave		02		Degree of Injury	Slight
Passenger Name		TAN SWEE HOON SALLY /		ID No.	S7926316H
Related Vehicle		SLZ3508D (Car)		Contact No.	NIL
Hospital/Clinic		CHANGI GENERAL HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment		24/03/2021		Date Discharge	24/03/2021
No. of Days granted Medical Leave		03		Degree of Injury	Slight
Passenger Name		ALEXIS FOO XUAN NI /		ID No.	T1100619H
Related Vehicle		SLZ3508D (Car)		Contact No.	NIL
Hospital/Clinic		KK WOMEN'S AND CHILDREN'S HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment		23/03/2021		Date Discharge	23/03/2021
No. of Days granted Medical Leave		04		Degree of Injury	Slight





Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

Report No. T/20210324/2054

**CONTINUATION OF REPORT**

Passenger Name	BERNICE FOO XUAN XIN	ID No.	T1428251Z
Related Vehicle	SLZ3508D (Car)	Contact No.	NIL
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	23/03/2021	Date Discharge	23/03/2021
No. of Days granted Medical Leave	04	Degree of Injury	Slight

**Brief Details.**

On the 23/3/2021 at about 2250hrs, I was driving my vehicle (vehicle A, SLZ3508D) along Bedok Reservoir Rd towards Tampines. There was a taxi in front of me that was signaling right and was driving very slowly. As such, I drove slowly behind the taxi as well. As the taxi approached Damai Secondary School, the taxi made an illegal u turn and I stopped behind the taxi and waited for the taxi to complete the u turn. About 5 seconds later, the taxi completed the u turn and before I could start driving, I felt an impact from the rear portion of my vehicle. I was in shock and after awhile, I saw the rear view mirror and saw that a lorry (vehicle B, GBF8051U) had collided onto the rear portion of my vehicle. As we were still in shock and my children were crying, we stayed in the vehicle for some time. Suddenly, my vehicle's car assistance program kicked in and the BMW call centre contacted me and I informed them of the situation. The call centre then assisted to call for the police.

Some time later, the ambulance arrived first and my children boarded the ambulance and my wife followed my children in the ambulance. The ambulance waited for the traffic police to arrived first before leaving to KK Hospital. The traffic police then took our statements and asked vehicle B's driver and myself to exchange particulars and I called for the tow truck.

I wished to state that my children got a 4 days MC, my wife got a 3 days MC and I got a 2 days MC. My vehicle's rear bumper was also dislodged.



**SINGAPORE  
POLICE FORCE**



T/20210324/2054

4 of 4

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

Report No. T/20210324/2054

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 ONG YU XIANG

*ONG YU XIANG*

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD ZICKIE BIN AHMAD

SUYUTI

Contact No.: 65476904

Authentication Stamp

NP168

Signature Of Informant:

*[Signature]*

Date/Time:  
24/03/2021 13:01

Classification Of Case:

*ONG YU XIANG*