

**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 60067 Page No. : 1 of 5  
Date Estimated : 19/11/2021  
Prepared By : Foong Shiuh Jye

- ESTIMATE REPAIR FOR -  
Ong Wei-Wei

- ACCOUNT - 303  
MS First Capital Insurance Limited  
6 Raffles Quay  
#21-00  
Singapore 048580

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFE23L	WBA3B16060NP55139	05/06/2013	320iA/4	65837

DESCRIPTION	VALUE
To replace rear bumper including to knock out dented area caused by the accident	1,275.00
To respray rear bumper	1,038.00
To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.	177.00
To check electrical wiring system and lighting at the rear section for proper function.	177.00
To replace rear exhaust silencer including alignment system and conduct check for leak.	531.00
Sundries.	80.00

Total Labour 1: **3,278.00**

DESCRIPTION	QTY	PRIC	VALUE
RR SILENCER CLAMPING BUSH	1	60.90	60.90
TAILPIPE TRIM CHROME	1	125.25	125.25
REAR MUFFLER	1	1,025.30	1,025.30
RR BUMPER BOTTOM REINFORCEMENT	1	62.60	62.60
REAR BUMPER CENTRE GUIDE	1	153.50	153.50
REAR BUMPER CARRIER (ECE)	1	470.25	470.25
DECORATIVE STRIP (LUXURY LINE)	1	82.85	82.85
# RR BUMPER TRIM PANEL PRIMED	1	1,058.30	1,058.30
RR BUMPER FLAP TOWING EYE PRIMED	1	43.70	43.70
REAR PDC HOLDER SET	1	25.75	25.75
GROMMET	2	0.80	1.60
REAR SILENCER HEAT SHIELD	1	73.60	73.60
PLAQUE 82MM	1	71.95	71.95
PLUG BLACK D=5MM	10	0.95	9.50
(DG/SL) ADHESIVE SET K6	1	53.05	53.05

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Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFE23L	WBA3B16060NP55139	05/06/2013	320iA/4	65837

Total Parts : 3,318.10



Labour 1	:	3,278.00
Parts	:	3,318.10
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	461.73
Grand Total	:	<u>7,057.83</u>

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

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

Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 17 Nov 2021 / 21:07:10

Receipt Date/Time : 17 Nov 2021 / 21:07:05

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-211117-003908

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
Result of Insurance Enquiry - SHD6130C As at 17 Nov 2021/11:20:00 Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHD6130C Enquiry Fee 20211117210541514010	7.00	0.49	7.49
<b>Sub-Total</b>		<b>7.00</b>	<b>0.49</b>	<b>7.49</b>
<b>Total Before Rounding</b>		<b>7.00</b>	<b>0.49</b>	<b>7.49</b>
<b>Rounding Difference</b>				<b>0.04</b>
<b>Total Amount Payable</b>				<b>7.45</b>
Paid By				
	542125XXXXXX4416		eNETS Credit Card	7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

# 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	17/11/2021 18:53 (SGT)
Date of Accident	17/11/2021 11:20 (SGT)
Exact Location of Accident	Stevens Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFE23L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ONG WEI WEI
NRIC No	SXXXX502A
Email Address	
Mobile Phone No	
Alternative Phone No	(Home) +--

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	320i
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1998

### INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

### DRIVER

Name of Driver	ONG WEI WEI
NRIC No	SXXXX502A

Date Of Birth	07/10/1969
Occupation	Indoor
Date Of Driving Pass	05/01/1994
Driving experience	27 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	
Alt. Phone Number	(Home) +--
Email Address	
Address	
Address complement	
Postcode	
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	Raining
Road Surface	Wet

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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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

SEE ATTACHED SKETCH

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	SHD6130C
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	ONG SOON LEE
NRIC No	SXXXX048H
Contact Number	-
Address	

Address complement  
Postcode  
Insurance Company Name  
Nature Of Damage  
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: 17/11/21 2PM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

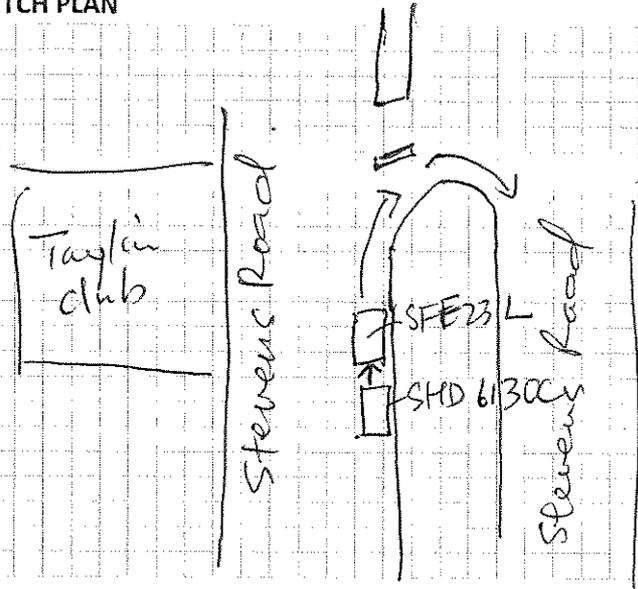


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Incident occurred on 17/11/21 Wed at 11:20AM
- I (SFE 23L) was stationary, queing to U-turn at Stevens Road (outside Taylin Club service entrance) on the Right lane, to U-turn to Scotts Road.
- The taxi SHD 6130C was driving very fast, approaching my car and banged into my stationary vehicle.
- My car was stationary as I was in the queue to U-turn. There was a line of cars ahead of me.
- Taxi collided into my car, damaged my rear bumper. A piece of my bumper detached and dropped on the road.

DECLARATION

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

*[Signature]*  
 Policyholder's Signature  
 Date & Time: 17/11/21  
 2pm

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

*[Signature]*  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.: