

**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 60656  
Date Estimated : 18/01/2022  
Prepared By : Chua Kee Sin

Page No. : 1 of 5

**- ESTIMATE REPAIR FOR -**

Daryl Teo Jian Rong  
225C Compassvale Walk  
#04-347

Singapore 543225

**- ACCOUNT - 40000**

Cash Sales - Service  
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SMZ8376Y	WBA70DY0X08B80289	21/05/2021	318i Sedan	8282

DESCRIPTION	VALUE
Replace righth rear side fender include remove attachment etc and carryout repairs on rear bumper and right door	7,225.00
Painting right rear bumper, right door and right rear side fender	2,808.00
To remove and install rear hat-tray, rear seat, carpet and roof top lining to facilitate repair.	873.00
To carry out body cavity preservation. (Per panel).	118.00
To carry out body cavity preservation. (For cut panel).	531.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (1x).	531.00
To replace tyre and wheel rim including balancing. (1x). right rear	94.00
To replace rear windscreen glass.	574.00
To supply and install rear windscreen solar film.	531.00
To conduct water leak tests.	75.00
Sundries.	150.00

Total Labour 1: **13,510.00**

DESCRIPTION	QTY	PRIC	VALUE
ALLOY RIM 7.5X17 V SPK 775	1	999.40	999.40
REAR RH SIDE PANEL	1	1,734.10	1,734.10
RH C PILLAR REINFORCEMENT PLATE	1	70.15	70.15

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<b>SMZ8376Y</b>	<b>WBA70DY0X08B80289</b>	<b>21/05/2021</b>	<b>318i Sedan</b>	<b>8282</b>

DESCRIPTION	QTY	PRIC	VALUE
RH REINFORCEMENT PLATE SILL	1	64.35	64.35
REAR WINDOW GREEN	1	730.45	730.45
TRUNK LID SEALING	1	129.35	129.35
TRUNK LID SEALING	1	129.35	129.35
(DG) CLEANER R1 (100ML)	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR)	2	131.55	263.10
(DG/SL)ADHESIVE PRIMER VP 206 (30ML)	1	27.85	27.85
Total Parts :			<b>4,174.25</b>



Labour 1	:	<b>13,510.00</b>
Parts	:	<b>4,174.25</b>
Labour 2	:	<b>0.00</b>
Excess	:	<b>0.00</b>
Total GST @ 7%	:	<b>1,237.90</b>
Grand Total	:	<b>18,922.15</b>

**\*\* 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 : 19 Jan 2022 / 09:43:12

Receipt Date/Time : 19 Jan 2022 / 09:43:12

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220119-000603

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBG9627Y As at 18 Jan 2022/15:56:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - GBG9627Y Enquiry Fee 20220119094201221886	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
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	19/01/2022 09:37 (SGT)
Date of Accident	18/01/2022 15:56 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 177 ANG MO KIO AVE 4 CAR PARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ8376Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	DARYL TEO JIAN RONG
NRIC No	SXXXX232B
Email Address	JRTEO.DARYL@GMAIL.COM
Mobile Phone No	(Phone) +65-94785148
Alternative Phone No	(Home) +--

## VEHICLE PARTICULARS

Manufacturer	BMW
Model	318i
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	1998

## INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD21V07780/VPC/R00
Cover Note Number	-

## DRIVER

Name of Driver	DARYL TEO JIAN RONG
NRIC No	SXXXX232B

Date Of Birth	15/11/1991
Occupation	Indoor
Date Of Driving Pass	25/08/2010
Driving experience	11 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94785148
Alt. Phone Number	(Home) +--
Email Address	JRTEO.DARYL@GMAIL.COM
Address	APT BLK 225C COMPASSVALE WALK
Address complement	#04-347
Postcode	543225
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	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 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 PLAN

#### 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	GBG9627Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	CHONG CHEE HIONG
NRIC No	SXXXX685D
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:

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

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

Right

I was going straight, the Van filter ~~left~~ and I continue to go straight. ~~In the end~~ He did not saw my car passing him and he turn left : and knock my car's back without him realising my vehicle was going straight

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

CHURCH STREET, 1872

(If driver is not the policyholder)

Reporting Centre Personnel's Signature \_\_\_\_\_

Name:

NRIC/FIN No.: