

ASS. REC. BY: Steve

CS/SMR 22003230/y3

ASSIGNMENT

Front: _____ 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

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SKA 8T Yr Regn: 23/12/21

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

Truck / Trailer or

Make: BMW 1X3 c.c. N/AColour: White A/C: Insured / Std / Nil / NASp. Reading: 4868 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: WBYK2DV 0505260197

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 245/45R20R: 11

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 4 mm R/Bal. 4 mmL/Bal. 4 mm L/Bal. 4 mmD.O.A. 5/4/22 D.O.I. 9/5/22Survey held at Performance

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

Fnt RH

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

Date / Time Action / Instruction

MK 280K

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Report Format: _____

Lump Sum / L.B. (\$) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

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 438160
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 61401
Date Estimated : 06/04/2022
Prepared By : Jack Ng Guo Ming

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -
TOH TING FENG (ZHUO TINGFENG)
99 CLUNY PARK ROAD
#01-03

SINGAPORE 257496

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

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKA8T	WBY42DU050S260197	23/12/2021	ix3	23

DESCRIPTION	VALUE
To replace right front door, right front wheel arch cover and to make good right front fender	1700 2,550.00
To respray right front door, right front fender and right front wheel arch cover	2538 2,666.00
To carry out body cavitypreservation. (Per panel).	112 118.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (1x).	459 531.00
To replace tyre and wheel rim including balancing. (1x).	89 94.00
To conduct check on all doors and bootlid central locking system for proper function.	168 177.00
To check electrical wiring system and lighting including reset and check air bag for proper function.	8280 295.00
To install 'M' performance decal	428 450.00
Sundries	150.00

Total Labour 1: **7,031.00**

DESCRIPTION	QTY	PRIC	VALUE
# ALLOY RIM 8JX20 STY SPK 890M	1	1,568.95	1,568.95
# HUB CAP WITH BLUE RING (BMW)	1	37.30	37.30
FRT RH DOOR	1	1,545.85	1,545.85
# PROTECTIVE STRIP PRIMED RH	1	151.95	151.95
FRT RH SIDE PANEL FINISHER (M)	1	83.25	83.25
M PERFORMANCE SIDE DECALS IN FROZEN	1	296.50	296.50
EMBLEM (M)	1	83.80	83.80
(S/L) DOOR WEATHERSTRIP	1	167.50	167.50
# FRT RH WHEEL ARCH TRIM PRIME	1	318.75	318.75

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GST REG. NO : M2 - 0020081 - X

ESTIMATE

Page No. : 2 of 5

Estimate No. : b1 61401
Date Estimated : 06/04/2022
Prepared By : Jack Ng Guo Ming

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKA8T	WBY42DU050S260197	23/12/2021	1X3	23

DESCRIPTION	QTY	PRIC	VALUE
EXPANDING RIVET BLACK <i>ARC</i>	18	1.40	25.20
Total Parts :			4,279.05

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- 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:
Date:

Steve (LKK)
9/5/22, 10:30am

ML PL
PIP
My BL for
S dys



Labour 1	:	7,031.00
Parts	:	4,279.05
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	791.70
Grand Total	:	12,101.75

** 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 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 06/04/2022 16:45 (SGT)
Date of Accident 05/04/2022 16:05 (SGT)
Exact Location of Accident Clemenceau Ave, Singapore
Additional Location Information BETWEEN UNITY AND RIVER VALLEY ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKA8T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TOH TING FENG
NRIC No SXXXX133B
Email Address TINGFENG.TOH@GMAIL.COM
Mobile Phone No (Phone) +65-92988888
Alternative Phone No (Home) +65-90128410

VEHICLE PARTICULARS

Manufacturer BMW
Model IX3
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 0

INSURANCE COMPANY

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

DRIVER

Name of Driver CHOO TSE YUN
NRIC No SXXXX506H

Date Of Birth	14/02/1985
Occupation	Indoor
Date Of Driving Pass	10/11/2005
Driving experience	16 YEARS AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90128410
Alt. Phone Number	(Home) +65-92988888
Email Address	CHOOTSEYUN@GMAIL.COM
Address	99 CLUNY PARK ROAD
Address complement	#01-03
Postcode	257496
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 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	SHC4753Z
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	Brown
Vehicle Category	Taxi
Name of Driver	RAMU S/O KRISHNAN
NRIC No	SXXXX663J
Contact Number	(Phone) +65-85402424
Address	-

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	LEFT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

WITNESS DETAILS

WITNESS 1

Name	TAXI PASSENGER (X2)
Phone	-
Email	-

SKETCH PLAN

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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: 6 April 2022
11.35 AM

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

SKETCH PLAN

MYCAR TAXI

Diagram illustrating a car accident scenario. A vertical line represents a road. A car labeled 'MYCAR' is positioned vertically on the road. A car labeled 'TAXI' is positioned diagonally, having crossed the road line. Arrows indicate the direction of travel for both vehicles. The 'MYCAR' has an arrow pointing upwards. The 'TAXI' has an arrow pointing upwards and to the right, indicating it was moving across the path of the 'MYCAR'.

- Taxi changed lanes ; drove into my lane ; ~~Rts~~
- Taxi changed lane from my Rts.
- No Human or other Property damage
- Damage to my car: Rts ~~in~~ wheel rims + door panels.
- Taxi did not signal Left changing intention Before driving into my lane
- I was going straight.

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

Reporting Centre Personnel's Signature
Name: Singapore 159941
NRIC/FIN No.: 6114

Scanned with CamScanner