

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 61456 Page No. : 1 of 5
Date Estimated : 11/04/2022
Prepared By : Jack Ng Guo Ming

- ESTIMATE REPAIR FOR -

Jason Chang Pik Eu
631 Choa Chu Kang North 6
#02-225

Singapore 680631

- ACCOUNT - 40000

Cash Sales - Service
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLM3773Y	WBA1M32050V819741	07/03/2017	218iA-C	70205

DESCRIPTION	VALUE
To make good front bumper	1,275.00
To respray front bumper	1,038.00
To remove and install front suspension for inspection and replace damaged parts.	2,655.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications. (2x).	1,062.00
To replace tyre and wheel rim including balancing. (2x).	188.00
To supply and install both front alloy rims (TBA)	13.00
To replace electromechanical power steering including program, initialize steering column adjustment and conduct check for proper function.	885.00
To check electrical wiring system at the front section for proper function including adjustment of headlights.	177.00
Sundries.	150.00

Total Labour 1: **7,443.00**

DESCRIPTION	QTY	PRIC	VALUE
# Front axle s	1	1,363.10	1,363.10
LH WISHBONE	1	272.50	272.50
RH WISHBONE	1	272.50	272.50
LH TENSION STRUT W/HYDRAULIC MOUNT	1	272.50	272.50
RH TENSION STRUT W/HYDRAULIC MOUNT	1	272.50	272.50
# WHEEL HUB WITH BEARING FRT	2	487.00	974.00
# FRT LH CARRIER	1	484.50	484.50
FRT RH CARRIER	1	484.50	484.50
FRT GUIDE SUPPORT	1	239.00	239.00

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SLM3773Y	WBA1M32050V819741	07/03/2017	218iA-C	70205

DESCRIPTION	QTY	PRIC	VALUE
# FRT SPRING STRUT	2	313.35	626.70
RH TIE ROD	1	298.15	298.15
LH BALL JOINT	1	178.10	178.10
EXCH STEERING BOX ELECTR. (ZF)	1	4,995.00	4,995.00
Total Parts :			10,733.05



Labour 1	:	7,443.00
Parts	:	10,733.05
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	1,272.32
Grand Total	:	19,448.37

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

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

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 12 Apr 2022 / 10:36:51

Receipt Date/Time : 12 Apr 2022 / 10:36:51

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220412-000969

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 - SMV9646H As at 10 Apr 2022/09:00:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SMV9646H Enquiry Fee 20220412103524879384	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				
434922XXXXXX7634		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	11/04/2022 18:49 (SGT)
Date of Accident	10/04/2022 09:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF STAGMONT RING & WOODLANDS ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM3773Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	JASON CHANG PIK EU
NRIC No	SXXXX374G
Email Address	JASONCHANG73@GMAIL.COM
Mobile Phone No	(Phone) +65-97847525
Alternative Phone No	(Home) +65-81230965

VEHICLE PARTICULARS

Manufacturer	BMW
Model	218i
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	JASON CHANG PIK EU
NRIC No	SXXXX374G

Date Of Birth	03/07/1973
Occupation	Indoor
Date Of Driving Pass	26/06/2003
Driving experience	18 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97847525
Alt. Phone Number	(Home) +65-81230965
Email Address	JASONCHANG73@GMAIL.COM
Address	APT BLK 631 CHOA CHU KANG NORTH 6
Address complement	#02-225
Postcode	680631
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 - Cross Junction
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	JESSICA CHANG LI SHYEN
Gender	Female

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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMV9646H
Vehicle Manufacturer	Hyundai
Vehicle Model	Ioniq
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire

Name of Driver	GOH AH HOCK
NRIC No	SXXXX402F
Contact Number	(Phone) +65-92380298
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2


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.
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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.

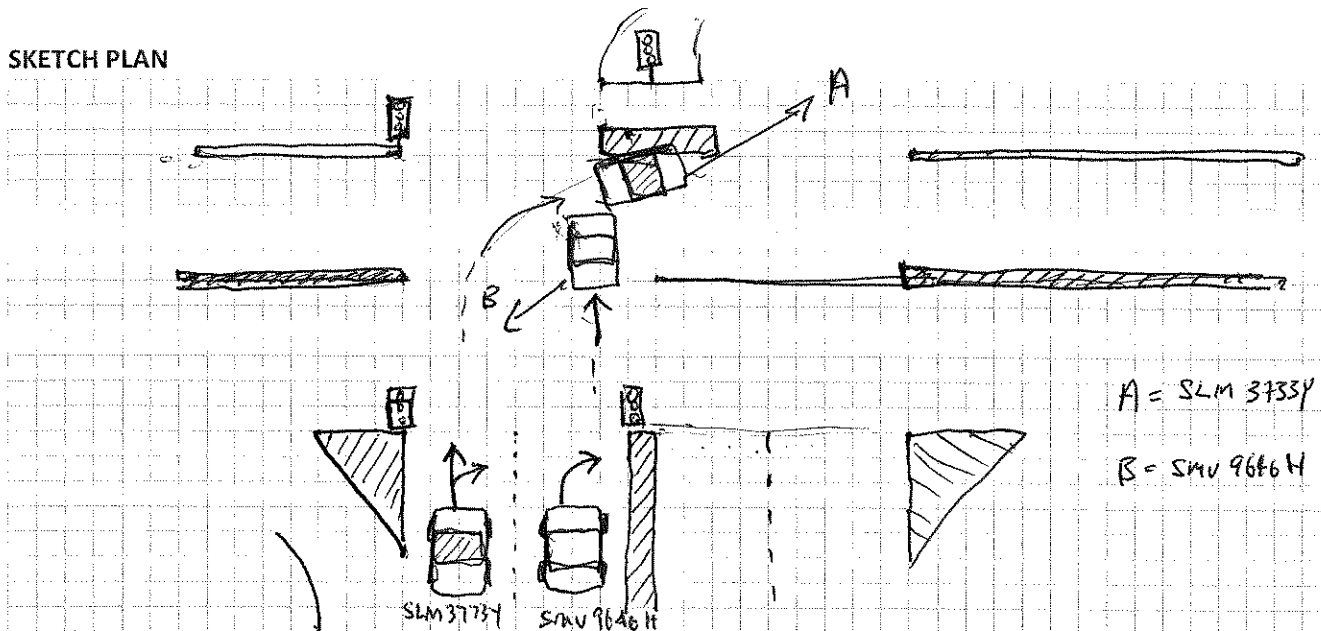
JASON CHAN 
Policyholder's Signature

Date & Time: 11/4/22
8.00 am

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

At 9.00 am on Sunday 10/4/22, I came to a stop at the traffic light of the junction of Stagsmont Ring Road and Woodlands Road. It was a clear sunny day. I was on the left lane (for turning right or going straight). In the right lane next to me (for turning right only) was a silver Hyundai Ioniq SMV 9646 H. As the traffic light turned green, I proceeded to make a right turn onto the leftmost lane of Woodlands Road. The silver Hyundai also moved forward at the green light but instead of turning right (he was on the 'right turn only' lane on the right), the driver, Mr. Zoh Ah Hock drove straight ahead and ~~collided~~ his left front bumper collided with the right rear bumper of my car. As I saw him coming directly at me as I made the right turn, I was forced to swerve to the left to avoid a collision. This caused me to drive over a small road divider. The left rear wheel of my vehicle hit and ascended over the divider.

Neither myself nor my passenger (Jessica Chong) who was in the front passenger seat were injured in any way. I pulled my vehicle to the side of the road. The driver of the Hyundai was also not injured. He admitted that he was in the wrong. The front left bumper of his car was scratched. The rear right bumper of my car was scratched.

DECLARATION

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

<p>Policyholder's Signature Date & Time: 11/4/22 0840</p>	<p>Driver's Signature (If driver is not the policyholder) Date & Time:</p>	<p>Reporting Centre Personnel's Signature Name: NRIC/FIN No.:</p>
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