

303, Alexandra Road
Sime Darby Performance
Singapore 159941
Tel. 63190100 (Sale)
63190111 (After)
Fax. 64747770280, Kampong Arang
East Coast Centre
Singapore 438180
Tel. 63190888 (After)
Fax. 63449773315, Alexandra Road
Sime Darby Business
Singapore 159944
Tel. 63190528 ()
63190533/530 ()
Fax. 64796601 ()
64796674 ()

SERVICE TAX INVOICE

Repair Order No. : B1 1671619	Page No. : 1 of 2
Date IN : 01/07/2022	Invoice Number : 2563275 / WSB
Motor Claim Advisor: Foong Shiuh Jye	Invoice Date : 05/09/2022
	Payment Terms : 30 Days From Invoice
	Invoice By : Mahamod Bin Mohd Sanif

- CUSTOMER INFORMATION -

Roselle Mont-Clair Furnishing Pte Ltd
NO. 1 COMMONWEALTH LANE
#04-22/23

Singapore 149544

- INVOICE TO - 136

Ergo Insurance Pte Ltd
5 Temasek Boulevard
#04-01 Suntec Tower Five
Singapore 038985

REGN. NO. SLB363A	CHASSIS NO. WBAHS120905F02296	REGN. DATE 08/11/2016	MODEL X1 SDRIVE18I	MILEAGE 108361
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- - - - L A B O U R 1 - - - -

	NETT
Replace bumper front panel, bonnet and attachments.	1,700.00
Spray paint bumper front panel & bonnet.	2,219.00
To replace radiator include pressure test and check for leak.	850.00
To replace air con condensor include top up feon gas & check leak.	1,003.00
To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.	168.00
To carry out body cavity preservation. (Per panel).	112.00
To check electrical wiring system at the front section for proper function including adjustment of headlights.	168.00
Sundries.	150.00
Additional labour to replace air duct, bumper carrier and attachments.	425.00
INS CLAIMS : ACCIDENT REPAIR. OD CLAIMS.	0.00
DATE OF ACCIDENT : 01.06.22. POLICY NO : SMPG21012586.	
YOUR REF NO : ERGO.	
VEHICLE WAS SURVEYED BY STEVE CHEN FROM LKK ON 20.06.22@1200HRS. AUTHORISED BY CELINE FONG FROM LKK VIA EMAIL ON 30.06.22.	

Total Labour 1: **6,795.00**

- - - - P A R T S - - - -

	Qty	Retail Price	NETT
BONNET	1	1,753.50	1,753.50
EMBLEM GROMMET	2	0.95	1.90
BMW PLAQUE WITH ADHESIVE FILM	1	72.85	72.85
FRT BUMPER PANEL PRIMED (M/PDC/PMA)	1	1,327.45	1,327.45
FRT BUMPER TOP CARRIER	1	396.35	396.35
IMPACT ABSORBER TOP (M/ECE)	1	69.55	69.55
AIR DUCT (M)	1	276.05	276.05
FRT RH GRILLE SPORT LINE (M)	1	124.35	124.35
(S/L) ANTI FREEZE 1.5 LITRES	3	21.75	65.25

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64796624 ()**SERVICE TAX INVOICE**Repair Order No. : **B1 1671619**
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HOSE CLAMP	1	3.75	3.75
CONDENSER AIR CONDITIONING WITH DRI	1	1,032.05	1,032.05
RADIATOR	1	878.70	878.70
HOSE CLAMP	1	3.75	3.75
COOLANT HOSE FEED	1	60.70	60.70
HOSE CLIP	1	3.20	3.20
EXPANDING RIVET WHITE	17	1.95	33.15
GRID CENTRE (M)	1	161.55	161.55
FRT LH GRILLE SPORT LINE (M)	1	124.35	124.35

Total Parts : **6,388.45**

- - - - L A B O U R 2 - - - -

To supply front silver emboss lettering black base number
plate with bracket.

NETT

83.00

Total Labour 2: **83.00**Labour Charges : **6,303.00**
Parts Charges : **6,388.45**
Lubricant/Misc : **575.00**Total Labour & Parts Charges : **S\$ 13,266.45**
Less Insurance Excess : **S\$ 500.00**
Invoice Total Amount Exclude GST : **S\$ 12,766.45**
GST @ 7% : **S\$ 893.65**
Invoice Total Amount Include GST : **S\$ 13,660.10**

Computer generated invoice. No signature is required.

Amount Payable Include GST : **S\$ 13,660.10**

All amounts are in Singapore Dollars.

Work was carried out subject to the Company's Terms and Conditions of Service.

No complaints will be entertained unless reported within seven (7) days of the date of this invoice.

For credit purchases, interest @1% per month will be debited on overdue amounts.



Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W



DISCHARGE / SATISFACTION CERTIFICATE

Vehicle No. : QLR 363A

Make / Model : _____

Accident Location : CTE TOWARDS AYE

Date of Accident : 01-06-22

Name of Owner / Insured : ROSELLE MONT-CLAIR FURNISHING PTE LTD

Repairer : Performance Motors Limited

Own Insurer : ERGO


Motor Insurance Policy No. : SMPG 21012586

Claim Reference No. : ERGO

Policy Excess (W/GST) : * \$535.00 (C\$500.00 + 7%)

Official Receipt No. : 999126 - 25-07-22

I/We hereby declare and confirm that I have received from the Repairers my/our Vehicle and that the repairs have been carried out to my/our entire satisfaction. I/We agree that the settlement of the cost of repairs by the Insurance Company to the account of the Repairers for the repairs shall be in full discharge of all claims under the Motor Insurance Policy in respect of damage to my/our vehicle resulting from the Accident/Loss on the Date of Accident/Loss.

Signature of Owner / Insured : 

Date : _____



* Without Prejudice for any
Personal Injury Claim