ASS. REC. BY: Steve

CS/FCI22006035/Evy3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: GBE 8767T

Policy No. _____

Claims No. D22001919MFCV

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 Rport: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

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

Veh No: SKF 8811L Yr Regn: 28/3/19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: BMW X1 c.c 1499

Colour: White A/C: Insured / Std / Nil / NA

Sp.Reading 68816 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: WBAJG120X0SG71624

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 225/50R18

R: "

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	4 mm	R/Bal.	4 mm
L/Bal.	4 mm	L/Bal.	4 mm
D.O.A.	21/6/22	D.O.I.	24/6/22

Survey held at Performance Motors

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

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

Date / Time	Action / Instruction
	MV-139K
15/8/22	Steve informed final fig $15,250.81 (Red 20,200.20, 56%)

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) 16/8/22-typist

☐ : Prell. Report

☐ : Final Report

Report Format : TP

~~Lump Sum~~ / I.B.I: ($ $15,250.81)

Days Of Repair: 7

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech, Invs ($ _____)

☐ : Weekend ($ _____)

Survey Fee:	
Transportation:	
$ + RS. SI	
Photos	
Others	
TOTAL	

/

Check ✱ camera

BMW Dealer

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)

Steve (LKK)
24/6/22, 2.17p

M PL

GST REG. NO : M2 - 0020081 - X

P/P

E S T I M A T E

by BL y

Estimate No.	: b1 62243	6 dys
Date Estimated	: 22/06/2022	Page No. : 1 of 6
Prepared By	: Foong Shiuh Jye	

- ESTIMATE REPAIR FOR -	- ACCOUNT - 40000
SIM SHEN HENG, EUGENE 120 BEDOK NORTH ST 2 #13-180 SINGAPORE 460120	Cash Sales - Service Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKF8811L	WBAJG120X03G77624	28/03/2019	X1 sDrive18i	56514

DESCRIPTION		VALUE
To replace bumper rear panel, boot lid, tail end panel, trunk floor, trunk floor left and right, and repair both rear side panels	850 X2 1700	9,350.00
To spray paint bumper rear panel, boot lid, tail end panel, trunk floor, trunk floor left and right, rear both side panel	1972	6,748.00
To carry out body cavity preservation. (Per panel).	112	118.00
To carry out body cavity preservation. (For cut panel).	?	531.00
To replace rear windscreen glass.		574.00
To conduct water leak tests.		75.00
To supply and install rear windscreen solar film. (check the price)	?	531.00
To vacuum glass debris		75.00
To supply rear emboss number plate. (Special type). (frame only)	45	165.00
To replace rear exhaust silencer including alignment system and conduct check for leak.	?	531.00
To check electrical wiring system and lighting at the rear section for proper function.	168	177.00
Sundries.		150.00
	Total Labour 1:	19,025.00

DESCRIPTION	QTY	PRIC	VALUE

Performance Motors Limited
A Sime Darby Motors Company
Co. Reg. No. 197401559W GST Reg. No M2-0020081-K
Toll-Free Number (1800-2255269)

303, Alexandra Road
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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 62243
Date Estimated : 22/06/2022
Prepared By : Foong Shiuh Jye

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKF8811L	WBAJG120X03G77624	28/03/2019	X1 sDrive18i	56514

DESCRIPTION	QTY	PRIC	VALUE
BOOTLID / OO	1	1,298.95	1,298.95
TRUNK FLOOR X	1	452.40	452.40
INTERIOR TAIL TRIM X	1	306.50	306.50
TAIL PANEL ?	1	420.70	420.70
LH TRUNK FLOOR X	1	362.45	362.45
RH TRUNK FLOOR X	1	362.45	362.45
REAR LH BUMPER MOUNT ?	1	166.90	166.90
REAR RH BUMPER MOUNT	1	166.90	166.90
RR BUMPER CARRIER ?	1	523.75	523.75
MOUNTING SMART OPENER ?	1	47.00	47.00
REAR TRIM UNDERRIDE PROTECTION (X L (Silv) / CR4	1	151.10	151.10
RR BUMPER LH CORNER MOUNTING ?	1	147.50	147.50
RR BUMPER RH CORNER MOUNTING ? ?	1	147.50	147.50
REAR BUMPER PANEL PRIMED / OO	1	907.80	907.80
REAR BUMPER MIDDLE TRIM PANEL (PDC) (Centre) / CR4	1	266.90	266.90
REAR BUMPER TRIM BOTTOM (LINES) (Low) / CR4	1	238.10	238.10
EMBLEM GROMMET / NC	2	0.95	1.90
BMW PLAQUE WITH ADHESIVE FILM / NC	1	72.85	72.85
LETTERING S DRIVE 18I / NC	1	98.35	98.35
LETTERING X1 / NC	1	65.60	65.60
STRIKER BOOT LID X	1	60.95	60.95
LOCK TRUNK LID X	1	230.30	230.30
SOFT CLOSE AUTOMATIC X	1	624.45	624.45
BOOT LID/TAILGATE PUSH BOTTON ICAM ?	1	42.35	42.35
LH SPRING SUPPORT X	1	176.20	176.20
SPINDLE DRIVE X	2	377.35	754.70
REAR BUMPER TOWING EYE COVER X	1	37.70	37.70
REAR WINDOW (ESG) / OR	1	815.55	815.55
THERMAL PROTECTION LUGGAGE COMP. FL ?	1	156.80	156.80
LOADING SILL COVER X	1	191.10	191.10
TRUNK FLOOR X	1	579.40	579.40
LOWER TAIL LID TRIM PANEL (SCHWARZ) / CUT	1	167.95	167.95
UPPER TRUNK LID TRIM PANEL (EVEREST ?	1	42.10	42.10
LH TRUNK LID PANEL TRIM (EVERESTGRA / CUT	1	32.15	32.15
RH TRUNK LID PANEL TRIM (EVERESTGRA / CUT	1	32.15	32.15
TRUNK LID SPOILER PRIMED X	1	757.40	757.40
AEROBLADE (SCHWARZ) X	1	558.15	558.15
REAR LH LIGHT IN TRUNK LID / CUT	1	270.35	270.35
REAR RH LIGHT IN TRUNK LID X	1	277.10	277.10
REAR LH LIGHT IN THE SIDE PANEL X	1	405.85	405.85
REAR RH LIGHT IN THE SIDE PANEL X	1	405.85	405.85
SET ADHESIVE PADS FOR ACE 2.0 / NC	1	37.35	37.35
BMW ADVANCED CAR EYE 2.0 / MIS	1	892.25	892.25
(DG) CLEANER R1 (100ML) / MIS	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR) / NC	2	131.55	263.10
(DG/SL)ADHESIVE PRIMER VP 206 (30ML / NC	1	27.85	27.85
		Total Parts :	14,070.85

erformance Motors Limited
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Fax. 64796601 (AfterSales)
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

E S T I M A T E

Estimate No. : **bl 62243**
Date Estimated : **22/06/2022**
Prepared By : **Foong Shiuh Jye**

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKF8811L	WBAJG120X03G77624	28/03/2019	X1 sDrive18i	56514

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:

Labour 1	:	19,025.00
Parts	:	14,070.85
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	2,316.71
Grand Total	:	35,412.56

** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**
** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **

M0001 / Performance Motors Limited
DATE & TIME: 22/06/2022 11:33 (SGT)
TED BY: Chan Sook Ling
ON: 1 (22/06/2022 11:33 (SGT))

Q:62243.

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 witholding 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	22/06/2022 11:33 (SGT)
Date of Accident	21/06/2022 10:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE EXIT 15A
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF8811L

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SIM SHEN HENG, EUGENE
NRIC No	SXXXX520Z
Email Address	CD.EUGENE@GMAIL.COM
Mobile Phone No	(Phone) +65-91287979
Alternative Phone No	(Home) +--

VEHICLE PARTICULARS

Manufacturer	BMW
Model	X1
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	SD20V01671/VPC2/R01
Cover Note Number	-

DRIVER

Name of Driver	SIM SHEN HENG, EUGENE
NRIC No	SXXXX520Z

ıe Of Birth	11/11/1968
;cupation	Indoor
ıate Of Driving Pass	18/11/1989
Driving experience	32 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91287979
Alt. Phone Number	(Home) +--
Email Address	CD.EUGENE@GMAIL.COM
Address	BLOCK 120 BEDOK NORTH STREET 2
Address complement	#13-180
Postcode	460120
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	Clear
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 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	GBE8767T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	YEO GEK HWA
NRIC No	SXXXX360E
Contact Number	(Phone) +65-90908849
Address	BLOCK 515A TAMPINES CENTRAL 7

Address complement	#07-08
Postcode	521515
Insurance Company Name	-
Nature Of Damage	FRONT
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.

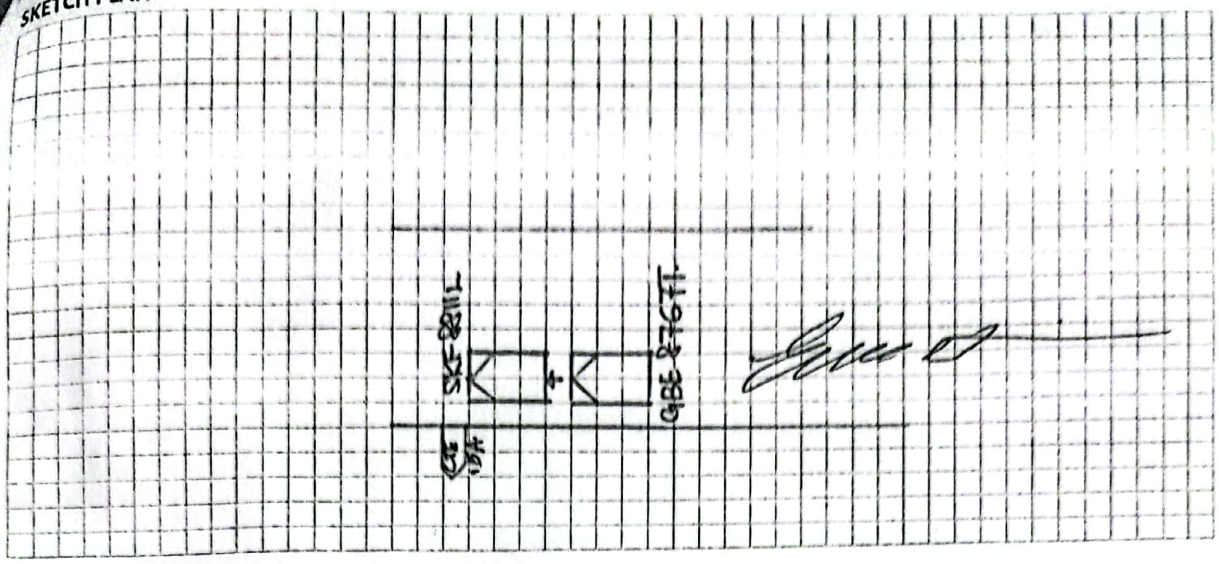
   (e) the information so collected under (d) above may be shared / disclosed:

   (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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At CTE exit 15A, heavy traffic in front, I followed to slow down and stop, suddenly heard the bang from the rear, realising GBE8767T knocked into my vehicle SKF 8811L.

DECLARATION

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

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.: