

**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 62642

Page No. : 1 of 5

Date Estimated : 23/07/2022

Prepared By : Yap Mee Key

**- ESTIMATE REPAIR FOR -**

Chow Sak Yeen  
65 Lorong G Telok Kurau  
#03-09

Singapore 426323

**- ACCOUNT - 40000**

Cash Sales - Service  
Singapore

| REGN. NO. | CHASSIS NO.       | REGN. DATE | MODEL | MILEAGE |
|-----------|-------------------|------------|-------|---------|
| SGY9888G  | WBA1V720205G86542 | 28/04/2017 | 116d  | 39992   |

**DESCRIPTION****VALUE**

Replace rear bumper include remove attachmen etc

1,275.00

Painting rear bumper

1,038.00

To remove and install fuse box at the front section to facilitate repair.

531.00

To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.

177.00

Sundries.

80.00

Total Labour 1: **3,101.00****DESCRIPTION****QTY****PRIC****VALUE**

REAR BUMPER CARRIER

1

424.85

424.85

HOLDER CAMERA SYSTEM

1

36.50

36.50

HOLDER AERIAL

1

26.70

26.70

REAR BUMPER TOWING EYE COVER PRIMED

1

39.95

39.95

(S/L) LH PROTECTION FOIL

1

10.90

10.90

(S/L) RH PROTECTION FOIL

1

10.90

10.90

REAR BUMPER PRIMED (RFC)

1

1,019.95

1,019.95

REAR PDC HOLDER SET

1

26.70

26.70

DECOUPLING RING PDC TORQUE CONVERTE

4

5.30

21.20

Total Parts : **1,617.65**

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|                |   |                 |
|----------------|---|-----------------|
| Labour 1       | : | 3,101.00        |
| Parts          | : | 1,617.65        |
| Labour 2       | : | 0.00            |
| Excess         | : | 0.00            |
| Total GST @ 7% | : | 330.31          |
| Grand Total    | : | <u>5,048.96</u> |

\*\* 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              | 25/07/2022 10:33 (SGT) |
| Reported by                     | Both                   |
| Date of Accident                | 22/07/2022 18:40 (SGT) |
| Exact Location of Accident      | Singapore              |
| Additional Location Information | BRAS BASAH ROAD        |
| Country/State of Loss           | Singapore              |

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SGY9888G

#### INSURED/POLICYHOLDER

|                          |                           |
|--------------------------|---------------------------|
| Is company?              | No                        |
| Name Of Registered Owner | CHOW SAK YEEN             |
| NRIC No                  | SXXXX418A                 |
| Email Address            | ninetripleeight@gmail.com |
| Mobile Phone No          | (Phone) +65-96214118      |
| Alternative Phone No     | -                         |

#### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer   | BMW                       |
| Model  | 116                       |
| Variant  | -                         |
| Exact purpose for which vehicle was being used at time of accident           | -                         |
| Are you claiming under your own insurance policy for repair to your vehicle? | No - Claiming third party |
| Vehicle Category   | Private car               |
| Transmission   | Manual                    |
| CC   | 1598                      |

#### INSURANCE COMPANY

|                                   |                       |
|-----------------------------------|-----------------------|
| Name of Insurance Company         | AXA Insurance Pte Ltd |
| Policy Number / Cover Note Number | -                     |

#### DRIVER

|                |               |
|----------------|---------------|
| Name of Driver | CHOW SAK YEEN |
| NRIC No        | SXXXX418A     |
| Date Of Birth  | 06/07/1971    |
| Occupation     | Indoor        |

|  |                                |
|--|--------------------------------|
| Date Of Driving Pass   | 08/04/1996                     |
| Driving experience   | 26 YEARS AND 3 MONTHS          |
| Gender   | Male                           |
| Mobile Number  | (Phone) +65-96214118           |
| Alt. Phone Number  | -                              |
| Email Address  | ninetripleeight@gmail.com      |
| Address  | 65 LORONG G TELOK KURAU #03-09 |
| Address complement   | -                              |
| Postcode   | 426323                         |
| 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       | 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  |
| Translator's name   | -   |
| Translator's ID   | -   |
| Translator's phone number   | -   |
| Translator's email  | -   |
| Original language used in the statement   | -   |

#### PASSENGER 1

|        |              |
|--------|--------------|
| Name   | LEE BEE LENG |
| 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

#### REFER TO SKETCH PLAN

#### ATTACHMENT(S)

|   |     |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera?   | No  |

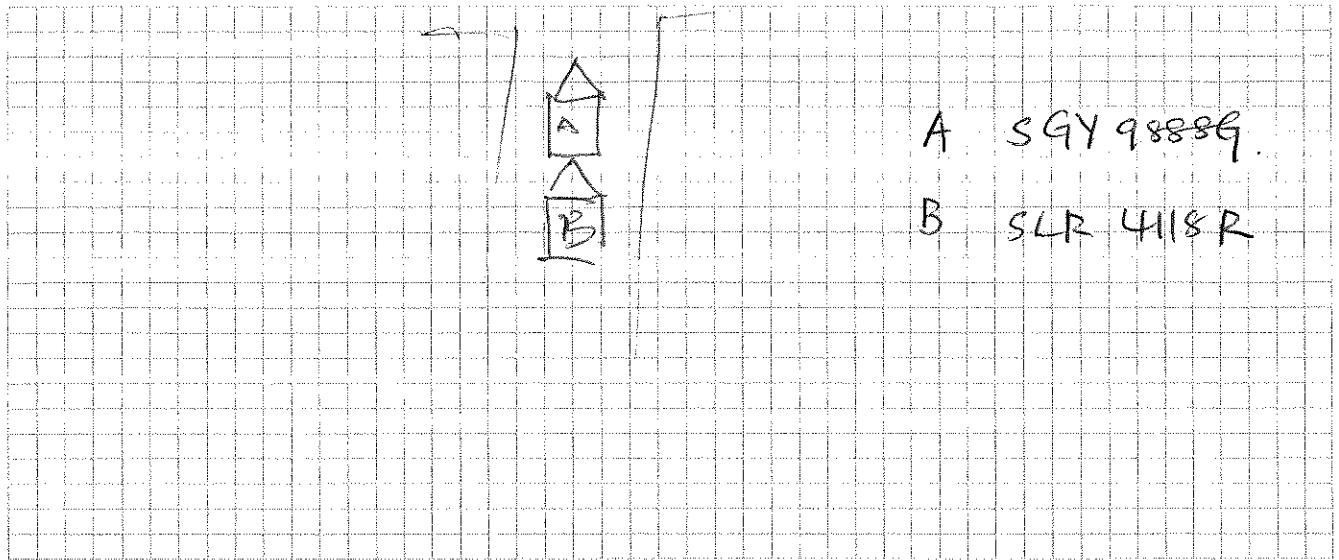
#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |          |
|-----------------------------|----------|
| Vehicle Registration Number | SLR4118G |
| Vehicle Manufacturer        | -        |
| Vehicle Model               | -        |
| Vehicle Variant             | -        |

|   |                                       |
|---|---------------------------------------|
| Vehicle Colour                          | -                                     |
| Vehicle Category                        | Private car                           |
| Name of Driver                          | -                                     |
| Contact Number                          | -                                     |
| Address                                 | -                                     |
| Address complement                      | -                                     |
| Postcode                                | -                                     |
| Insurance Company Name                  | India International Insurance Pte Ltd |
| Nature Of Damage                        | -                                     |
| Details of property damaged in accident | -                                     |
| No. Of Passenger (Including Driver)     | -                                     |

# SKETCH PLAN

Bras Basah Road



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Driving along Bras Basah Rd, approaching traffic light and suddenly SLR 4118G crashed into my rear.

## DECLARATION

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

Policyholder's Signature

Date & Time: 25/7/22  
9:17am

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

PERFORMANCE MOTORS LIMITED

303 Alexandra Road  
Sime Darby Performance Centre  
Singapore 119941  
TEL: 3150108 (Sales)  
6210111 (After-sales)

Reporting Centre Personnel's Signature

Name: Yap mee key  
NRIC/FIN No.: 62744699P

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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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.

PERFORMANCE MOTORS LIMITED  
303 Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941  
TEL: 63180100 (Sales)  
63190111 (After-sales)

Policyholder's Signature

Date & Time: 25/7/22  
9:17 am

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name: Yap mee key  
NRIC/FIN No.: 92744639P



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 25 Jul 2022 / 10:16:52

Receipt Date/Time : 25 Jul 2022 / 10:16:51

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-220725-000752

Previous Receipt No. :

| S/N   | Item Description/<br>Business Transaction Reference<br>No.          | Amount<br>Before<br>GST (S\$)                   | GST<br>Amount<br>(S\$) | Amount<br>After GST<br>(S\$) |
|---|---|---|------------------------|------------------------------|
| Result of Insurance Enquiry - SLR4118G<br>As at 22 Jul 2022/18:40:00<br>Insurance Co: INDIA INT'L INS PTE LTD |   |   |                        |                              |
| 1   | Insurance Enquiry - SLR4118G<br>Enquiry Fee<br>20220725101319403946 | 7.00  | 0.49                   | 7.49                         |
| <b>Sub-Total</b>  |   | 7.00  | 0.49                   | 7.49                         |
| <b>Total Before Rounding</b>  |   | 7.00  | 0.49                   | 7.49                         |
| <b>Rounding Difference</b>  |   |   |                        | 0.04                         |
| <b>Total Amount Payable</b>   |   |   |                        | 7.45                         |
| Paid By   |   |   |                        |                              |
|   | 20220725101349122   | Direct Debit: eNETS Debit<br>(Internet Banking) |                        | 7.45                         |
| <b>Total</b>  |   |   |                        | 7.45                         |
| <b>Cash Change</b>  |   |   |                        | 0.00                         |
| <b>Tendered Amount</b>  |   |   |                        | 7.45                         |
| <b>Excess Refundable Amount</b>   |   |   |                        | 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.