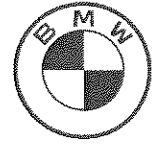


# Performance Motors

BMW Dealer



Allianz Insurance Singapore Pte Ltd  
79 Robinson Road  
#09-01,  
Singapore 068897

Attn: Motor Claims Dept.

Your ref: CC4/AIS23003875/pa3  
Our ref: DS/SND4329P

**Without Prejudice**

16 June 2023

## **ACCIDENT INVOLVING VEHICLES SND4329P & SMX7101R ON 11/04/2023**

Dear Sirs

We refer to the above matter.

The accident was caused solely by the negligence on the part of your insured. As a result of the said accident, our client has suffered losses which are set out hereunder as follows: -

Cost of Repair : \$ 13,649.04	Excess : \$ -
Loss of Use : \$ 600.00 (\$120 X 5 Days)	GIA/LTA Search : \$ 2.00
Loss of Rental : \$ -	Others : \$ -
	<b>Total : \$ 14,251.04</b>

A copy of each of the following supporting documents is enclosed:

1. Copy of Tax Invoice & Receipts
2. Copy of LTA/GIA Search Slip
3. Copy of GIA Report
4. Copy of Letter of Authorisation

Please note that you or your insured should send us an acknowledgement of receipt of this letter within fourteen (14) days from the date of this letter, failing which our client will have no alternative but to commence legal proceedings against you without any further notice to you or your insured.

Should you have a counterclaim against our client arising out of the accident, you are also required to send a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter.

For any correspondence, please email to [pml-pbsp@sime-darby.com.sg](mailto:pml-pbsp@sime-darby.com.sg).


Yours sincerely

  
Cresendo Lagman  
Customer Service Manager, Bodyshop

  
Bernard Wan  
Aftersales Manager, Bodyshop

Performance Motors Limited.  
Sime Darby Performance Centre, 303 Alexandra Road  
Sime Darby Business Centre, 315 Alexandra Road  
East Coast Centre, 280 Kampong Arang Road  
Ubi Service Centre, By-appointments only

Tel: 1800-2255-269  
Co Reg No. 197401559W

A  Motors Company

## 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)



## SERVICE TAX INVOICE

Repair Order No. : B1 1762352	Page No. : 1 of 2
Date IN : 08/05/2023	Invoice Number : 2669819 / WSB
Motor Claim Advisor: Han Kwan Yong	Invoice Date : 13/06/2023
	Payment Terms : 30 Days From Invoice
	Invoice By : Mahamod Bin Mohd Sanif

## - CUSTOMER INFORMATION -

Mr CHIA CHOON SENG  
481 Yio Chu Kang Road  
#08-07

Singapore 787056

## - INVOICE TO - 224093

Allianz Insurance Singapore Pte Ltd  
79 Robinson Road  
#09-01  
Singapore 068897

REGN. NO. SND4329P	CHASSIS NO. WBA70DY0008C30990	REGN. DATE 29/12/2021	MODEL 318I SEDAN	MILEAGE 16480
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## - - - - L A B O U R 1 - - - -

	NETT
To replace rear bumper,boot lid,rear carrier,replace damaged attachment parts.Make good tail end panel include carry out repairs caused by accident.	2,975.00
To respray rear bumper, boot lid and tail panel	2,532.00
To remove and install boot compartment carpet and garnish to facilitate repair.	257.00
To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct check for proper function.	168.00
To check electrical wiring system and lighting at the rear section for proper function.	168.00
Sundries.	150.00
To replace rear exhaust silencer include alignment of system and conduct checks for leak.	504.00
To carry out body cavity preservation. (Perpanel)	112.00
INS CLAIMS : ACCIDENT REPAIR. DIRECT SETTLEMENT.	0.00
DATE OF ACCIDENT :11.04.2023. 3RD PARTY CAR :SMX7101R. YOURREF NO:CC4/AIS23003875/pa3 VEHICLE WAS SURVEYED BY RASUL FRM LKK ON 08.05.2023@1230HRS. AUTHORISED BY HSIAO TONG FROM LKK VIA EMAIL ON 20.04.2023.	
PROPOSE LOSS OF USE = \$120x5 THE AMOUNT IS SUBJECTED TO INSURANCE COMPANY CONFIRMATION.	0.00
GIA SEARCH FEE = \$2.00.	0.00
Total Labour 1:	<b>6,866.00</b>

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

	Qty	Retail Price	NETT
TRUNK LID	1	1,408.30	1,408.30
REAR BUMPER CARRIER	1	516.20	516.20
ADAPTER	1	124.55	124.55
TRIM STRIP (SPORT)	1	96.10	96.10
REAR BUMPER LH SIDE GUIDE	1	136.30	136.30

**Performance Motors Limited**

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

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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)

**SERVICE TAX INVOICE**

Repair Order No. : B1 1762352	Page No. : 2 of 2
Date IN : 08/05/2023	Invoice Number : 2669819 / WSB
Motor Claim Advisor: Han Kwan Yong	Invoice Date : 13/06/2023
	Payment Terms : 30 Days From Invoice
	Invoice By : Mahamod Bin Mohd Sanif

REAR BUMPER RH SIDE GUIDE	1	136.30	136.30
REAR DIFFUSER	1	74.50	74.50
REAR BUMPER PANEL PRIMED (SPORT)	1	1,280.35	1,280.35
REAR LH TRIM PANEL	1	99.75	99.75
(DG/SL) ADHESIVE SET K6	1	53.05	53.05
EXPANDING RIVET D=8MM	14	1.15	16.10
PLAQUE 74MM	1	72.85	72.85
GROMMET	2	0.80	1.60
SILENCER CLAMPING BUSH	1	66.25	66.25
TAILPIPE TRIM CHROME D=90MM	1	136.15	136.15
HEX NUT M8	3	1.30	3.90
LETTERING 318I	1	65.60	65.60
REAR LH REAR REFLECTOR	1	41.00	41.00
REAR SILENCER	1	1,231.30	1,231.30
REAR LH LATERAL MOUNT	1	211.85	211.85
Total Parts :			<b>5,772.00</b>

Labour Charges :	<b>6,212.00</b>	Total Labour & Parts Charges :	<b>S\$ 12,638.00</b>
Parts Charges :	<b>5,772.00</b>	Less Insurance Excess :	<b>S\$ 0.00</b>
Lubricant/Misc :	<b>654.00</b>	Invoice Total Amount Exclude GST :	<b>S\$ 12,638.00</b>
		GST @ 8% :	<b>S\$ 1,011.04</b>
		Invoice Total Amount Include GST :	<b>S\$ 13,649.04</b>

Computer generated invoice. No signature is required.

Amount Payable Include GST : **S\$ 13,649.04**

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.



BMW Dealer

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GST REG. NO : M2 - 0020081 - X

**E S T I M A T E**

13 APR 2023

1762352

Estimate No. : b1 65627  
Date Estimated : 12/04/2023  
Prepared By : Han Kwan Yong

Page No. : 1 of 5

**- ESTIMATE REPAIR FOR -**

CHIA CHOON SENG  
481 Yio Chu Kang Road  
#08-07

Singapore 787056

**- ACCOUNT - 40000**

Cash Sales - Service  
Singapore

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SND4329P	WBA70DY0008C30990	29/12/2021	318i Sedan	9739

**DESCRIPTION**

To replace rear bumper, boot lid includ- ing to knock out tail panel and dented area

2552 2,875.00

To respray rear bumper, boot lid and tail panel

2532 2,866.00

To remove and install boot compartment carpet and garnish to facilitate repair.

257 271.00

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

168 171.00

To check electrical wiring system and lighting at the rear section for proper function.

168 171.00

Sundries.

150.00

Total Labour 1: **6,416.00****DESCRIPTION**

DESCRIPTION	QTY	PRIC	VALUE
TRUNK LID	1	1,408.30	1,408.30
# Set of mount	1	70.45	70.45
# REAR RH LATERAL MOUNT	1	211.85	211.85
# REAR BUMPER CARRIER	1	516.20	516.20
# ADAPTER	1	50.55	50.55
TRIM STRIP (SPORT)	1	96.10	96.10
# REAR LH TRIM PANEL	1	99.75	99.75
# REAR BUMPER LH SIDE GUIDE	1	136.30	136.30
# REAR BUMPER RH SIDE GUIDE	1	136.30	136.30
# REAR BUMPER PANEL PRIMED (SP)	1	1,280.35	1,280.35
PLAQUE 74MM	1	72.85	72.85
LETTERING 318i	1	65.60	65.60
GROMMET	2	0.80	1.60
EXPANDING RIVET D=8MM	14	1.15	16.10
# REAR DIFFUSER	1	74.50	74.50

**Performance Motors Limited**

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GST REG. NO : M2 - 0020081 - X

**E S T I M A T E**

Estimate No. : b1 65627  
Date Estimated : 12/04/2023  
Prepared By : Han Kwan Yong

Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SND4329P	WBA70DY0008C30990	29/12/2021	318i Sedan	9739

DESCRIPTION	QTY	PRIC	VALUE
# TRUNK LID SEALING <i>RA</i>	1	135.15	135.15
(DG/SL) ADHESIVE SET K6 <i>RA</i>	1	53.05	53.05
Total Parts :			4,425.00

Claims OD / 3rd Party / Uninsured losses / Direct Settlement	
Pagn No. _____	Claim No. _____
Date & Time <i>08/05/23 @ 1236</i>	Excess S\$ _____
Surveyor's Name <i>RASU</i>	Sign _____
Surveyor's Tel <i>90010068</i>	Authorised Yes / No _____
Authorised Date _____	Time _____
RESURVEY PARTS PHOTO BY SURVEYOR Yes / No _____	PML Yes / No _____
Surveyor's E-mail _____	
No. of Working Days Recommend <i>5-6 days</i>	



Labour 1	:	6,416.00
Parts	:	4,425.00
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 8%	:	867.28
Grand Total	:	11,708.28

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

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


## INSURER ENQUIRY

**Find  
insurer**

Vehicle reg. no.

SMX7101R

Date of Accident

11/04/2023 

Reset

% **RESULT & RECEIPT**

## TP Insurer Enquiry

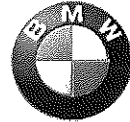
Insurance ..... **Allianz Insurance Singapore P...**Period of Insurance ..... **27/01/2023 - 26/01/2024**Requested By ..... **Peh Ah Hoon (Performance Mo...**Requested Date ..... **13/04/2023 15:14****Payment details**Request Amount: **S\$1.85**GST Amount: **S\$0.15**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**

# Performance Motors Limited

A member of the Sime Darby Group



## LETTER OF AUTHORISATION

**ACCIDENT INVOLVING** SND4329P & SMX7101P **ON** 11 / 04 / 2023 .

I, MR CHIA CHOON SENG owner of Vehicle Registration No. SND4329P hereby authorise **Performance Motors Limited** to submit, correspond, negotiate and settle my claim for cost of repair and/or uninsured losses arising from the above accident.

I further authorise **Performance Motors Limited** to execute, sign, seal and deliver all documents whatsoever in relation to this matter and to accept and receive any payment due to me in respect of my claim above.

I hereby declare that all acts and documents done by virtue of this Letter of Authorisation on my behalf shall be good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by me in person.

I further confirm that the acceptance by **Performance Motors Limited** of the settlement amount in respect of such claim shall constitute the full discharge of my claim in respect of such loss and damage.

Signed by:

x

Name : MR CHIA CHOON SENG (Date) 12 / 04 / 2023

NRIC No.: S7008734J

In the presence of:

Name : Han Kwan Yong (Date) 12 / 04 / 2023

NRIC No.:  
Performance Motors Limited  
303 Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941

## 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 Actual 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	12/04/2023 11:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/04/2023 08:45 (SGT)
Exact Location of Accident	Jln. Ahmad Ibrahim, Singapore
Additional Location Information	TWDS PIONEER RD ROUNDABOUT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND4329P
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHIA CHOON SENG
NRIC No	S7008734J
Email Address	CHIA_C_S@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-97386530
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	318i
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	Auto
CC	1998

#### INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG22008667

#### DRIVER

Name of Driver	CHIA CHOON SENG
NRIC No	S7008734J
Date Of Birth	24/03/1970
Occupation	Indoor



Date Of Driving Pass	26/12/1987
Driving experience	35 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97386530
Alt. Phone Number	-
Email Address	CHIA_C_S@YAHOO.COM.SG
Address	481 YIO CHU KANG RD #08-07
Address complement	-
Postcode	787056
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)	1
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	-

#### 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?	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMX7101P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YUEN SAI KIT IVAN
NRIC No	S9346419B

Contact Number	(Phone) +65-96224826
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
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 Actual 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

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.

Policyholder's Signature / Date & Time

Actual Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan

Describe Circumstance of the Accident

On 11/04/2023 @ around 0845 hrs, I was travelling along 5th Avenue towards  
Power Roundabout. I stopped my car as the vehicle in front had stop. But suddenly  
I felt an impact on my rear then realised that vehicle in had collided onto my  
rear portion.

☐ Claim own policy  
☐ Claim third party  
☒ Claim OD ~~for~~ other workshop or record purpose *Performance*

Policy No. DMP47000367  
Insurer Wing Veh. No. JN0437P

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT MY OWN DAMAGE CLAIM UNDER MY POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

## Declaration

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

  
Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time:

WITNESSED BY REPORTING CENTRE PERSONNEL  
(Name as in SURICAD card)