

18 SEPTEMBER 2024

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET

#04-00 #05-00 IOB BUILDING

Singapore 049711

Motor Claims Dept

Dear Sir/Madam,

ACCIDENT INVOLVING FBR 5748A AND SLW 1809P AT CHAI CHEE STREET ON 15/08/2024

We are the authorised workshop for the owner of FBR 5748A, which was involved in the above accident with your insured SLW 1809P. The vehicle owner has requested and authorised us to assist him/her in presenting his/her claim against the party responsible for the damage to the vehicle.

The breakdown of this claim is as follows:-

Cost of Repair	: \$ 2,289.00
Loss of Use (4 days x \$60.00)	: \$ 240.00
LTA Search	: \$ 27.25
Total	: \$ 2,556.25

Hope to have your settlement as soon as possible.

Thank you

Yours faithfully

KIVILE ENTERPRISE
Blk 3007, Ubi Road 1 #01-408
(S) 408701 M: 90370110N
Tel: 6748 8645 Fax: 6748 2533
18/9/2024

(with company stamp)

AUTHORISATION TO ACT

I/We, ONG HOCK BENG, IVAN (the third party claimant) of _____
_____ (address), owner of FBR5748A (vehicle no.)
hereby authorize KIVILE ENTERPRISE (workshop) to act for me with
respect to my claim for repair costs and/ or rental and/ or loss of use (claim) for my
vehicle no. FBR5748A that was damaged pursuant to the accident which
occurred on 15/08/2024 (date) along CHAI CHEE STREET
_____ (location) involving vehicle no's SLW1809P (accident)

I further authorize the workshop to settle my above mentioned claim in a manner
that they deem fit and the workshop is further authorized to receive payment
further to settlement of my claim with payment cheque(s) being made in favour
of the workshop.

I further knowledge that any settlement the workshop may reach on my behalf is on
a without prejudice and without admission of liability basis in so far as the driver/
owner/ insurers of the other vehicle(s) is concerned.

Date: 18 / 09 / 2024 (DD/MM/YYYY)

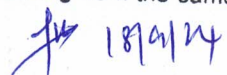


Signed by the third party claimant
(with company stamp if applicable)

KIVILE ENTERPRISE
Blk 3007, Ubi Road 1 #01-408
(S) 408701 M: 90370110N
Tel: 6748 8645 Fax: 6748 2533

Signed by the workshop
(with company stamp)

my execution of this Discharge Voucher is only
for my claim for property damage and not prejudicial
to any other claims arising from the same accident



EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MPC2024D0009625
Claimant Ref: FBR 5748A

We/I, KIVILE ENTERPRISE ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 2,289.00 (repair cost), S\$ 140.00 (loss of use/rental), S\$ 27.25 (search fee), vehicle no. FBR5748A that was damaged pursuant to the accident which occurred on 15/08/2024 (date) at CHAI CHEE STREET (location) involving vehicle no. SLW1809P (insured vehicle). This is pursuant to the inspection conducted on 20/08/2024 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner ONG HOCK BENG, IVAN ("the third party claimant") of vehicle no. FBR5748A to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to FBR5748A (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 2,456.25 to KIVILE ENTERPRISE.

Dated this 08 day of Jan 20 25

CLAIMANT:

Signature:


Signed by "the workshop" (with chop)

Name:

NRIC:

Address:

KIVILE ENTERPRISE
Blk 3007, Ubi Road 1 #01-408
(S) 408701 M: 90370110N
Tel: 6748 8645 Fax: 6748 2533

Nationality:

Occupation:

WITNESS:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:





Signed by appointed Surveyor

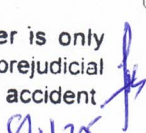
LKK Auto Consultants Pte Ltd

199607198R

51 Ubi Avenue 1

#01-25 Paya Ubi Ind. Park S(408933)

my execution of this Discharge Voucher is only
for my claim for property damage and not prejudicial
to any other claims arising from the same accident


8/1/25

吉維利企業
KIVILE ENTERPRISE

BLK 3007, UBI ROAD 1 #01-408, SINGAPORE 408701.

TEL: 6748 8645, 6747 9547 FAX: 6748 2533

EMAIL: kivilepc@gmail.com

GST REG NO: M90370110N

Tax INVOICES

U NO: 11956

MESSRS INDIA INT'L INS PTE LTD

DATE: 18-9-24

[illegible]

Gst 9%	212.50
TOTAL AMOUNT	2577.50



RECEIVED BY

AUTHORISED SIGNATURE



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 20 Aug 2024 / 09:19:35
Receipt Date/Time : 20 Aug 2024 / 09:19:35

Tax Invoice/Receipt

Receipt No. : ITNET-00000-240820-000523
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 - SLW1809P
As at 15 Aug 2024/11:40:00
Insurance Co: INDIA INT'L INS PTE LTD
1 Insurance Enquiry - SLW1809P
Enquiry Fee
20240820091840360958

25.00 2.25 27.25

Sub-Total 25.00 2.25 27.25

Total Before Rounding 25.00 2.25 27.25

Rounding Difference 0.00

Total Amount Payable 27.25

Paid By
526471XXXXXX8772 eNETS Credit Card 27.25

Total 27.25

Cash Change 0.00

Tendered Amount 27.25

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.

DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of KIVILE ENTERPRISE. Payment will be credited directly
(Name of Paying Organisation)
into the Supplier's bank account stated below through Interbank Giro. The Supplier has to complete Part I of the form,
obtain his banker's certification in Part II and return the duly completed form to

(Name of Paying Organisation)

Part I (To Be Completed By Supplier)

(A) To: _____
(Name of Paying Organisation)

Supplier's Particulars:

Name : KIVILE ENTERPRISE

Address : BLK 3007 UBI RD 1#01-408(408701)

Telephone Number: 83675360 Fax Number: _____

Name of Bank : UOB Name of Branch: TAI SENG

Account Number To Be Credited : 3103018801

I/We hereby authorise _____ to credit payments due to me/us to the above account.
(Name of Paying Organisation)

This authorisation shall continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivered to my/our address last known to you.

In the event of a change of bank account, I/we shall inform you in writing 2 weeks in advance before the change.

(B) To: _____
(Name of Supplier's Bank)

I/We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in this document.

Signatures and Company's stamp As In Bank Account

Date

Part II (To Be Completed By Supplier's Bank)

To: _____
(Name of Paying Organisation)

Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that in our files. The account number to be presented in the Interbank Giro format is as follows:

Bank

Branch

Account Number

--	--	--	--

--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--

Name & Signature of Authorised Bank Officer

Date

Claim Audit

AUDIT TRAIL				
No.	On	Audit	Remarks	By
1	20 Aug 2024 17:51	Clm Dtl Modified	Claimant's Name: -> ONG HOCK BENG, IVAN. Claimant's ID: -> S8706620G.	[A] HOW MEI KWAN
2	20 Aug 2024 17:51	Clm Veh Model Changed	(205464) YAMAHA CZD300A / XMAX300 292cc.	[A] HOW MEI KWAN
3	20 Aug 2024 17:51	Clm Created	Reg No: FBR5748A. Acct Date: 2024/08/15. Claim Type: TP. Insurer: India International Insurance Pte Ltd (HQ). TP Insurer: Income Insurance Limited (HQ). Workshop: Kivile Enterprise (HQ)	[A] HOW MEI KWAN
4	20 Aug 2024 17:51	Adj Co Assigned	LKK Auto Consultants Pte Ltd (HQ):	[A] HOW MEI KWAN
5	20 Aug 2024 17:51	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/08/29	[A] HOW MEI KWAN
6	20 Aug 2024 17:51	Adj Mandate Set	Approved:0.00.Reinsp:Adj decides.	[A] HOW MEI KWAN
7	20 Aug 2024 17:51	Label Added	(30653):Direct Settlement.	[A] HOW MEI KWAN
8	20 Aug 2024 17:51	Adj Adjuster Assigned	[None] -> MARCUS CHUA	[A] HOW MEI KWAN
9	21 Aug 2024 17:24	Adj Next Rpt Request	Cur.Req:0.00:PODS Liability: 100% - BOLA 27 Remark: Insured rear-ended third party.	[A] NA MENG YAN
10	21 Aug 2024 18:08	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/08/29	[I] Sherini Pillai
11	21 Aug 2024 18:08	Adj Mandate Set	Approved:0.00.	[I] Sherini Pillai
12	22 Aug 2024 13:01	Clm Dtl Modified	Insured Name: -> SHARIFAH AISHAH BINTE SYED JAMAL. Insured ID: -> S9008715J.	[A] HOW MEI KWAN
13	09 Oct 2024 15:18	Adj Rpt Initiated		[A] JOANNE LEE KHANG MIN
14	09 Oct 2024 15:18	Clm Dtl Modified	Claim Conclusion: -> 3.	[A] JOANNE LEE KHANG MIN
15	09 Oct 2024 15:18	Clm Dtl Modified	JPJ Reg. Date: -> 2020/08/06.	[A] JOANNE LEE KHANG MIN
16	09 Oct 2024 15:18	Clm Details Notified		[A] JOANNE LEE KHANG MIN
17	11 Oct 2024 17:11	Adj Mandate Request	Cur.Req:2476.25:Liability: 100% *Quantum: \$ 2,476.25 (all-in). Pls refer to adjuster report for details. *For your approval please.	[A] NA MENG YAN
18	14 Oct 2024 16:52	Adj Mandate Set	Approved:2476.25.	[I] Sherini Pillai

Date From   
 Date To   
 Audit Type None  Go

ACTIVITY

No record

Merimen Billing for this case - Transaction History

Bill Ref No	Bill Date	Bill Type	Acc Type	Acc Name	Co Name (Branch)	Ref 1	Ref 2	Amount
3221751	21 Aug 2024 08:54:20	TP Case (Insurer)	Motor	LKK Auto Consultants Pte Ltd	India International Insurance Pte Ltd (HQ)	FBR5748A	SLW1809P	12.00
3251229	09 Oct 2024 15:18:19	OD/TP Case (Adjuster)	Motor	LKK Auto Consultants Pte Ltd	LKK Auto Consultants Pte Ltd (HQ)	FBR5748A	SLW1809P	12.00