CARSMITH PTE LTD

Email: claims@carsmith.biz / info@carsmith.biz

Date: 20 Sep 2024

Your Ref: TO BE ADVISED Our Ref: A2408-009-PC4415E

INDIA INTERNATIONAL INSURANCE

64 Cecil St #04, #05 IOB Building Singapore 049711

Attn: Motor Claims Department

Dear Sir/Madam,

CLAIMANT: LEGENDARY TRANSPORT PTE LTD

PROPERTY DAMAGES CLAIMS AS A RESULT OF A ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES NO. PC4415E AND SNL2687B ALONG HINDHEDE WALK ON 19.08.2024. TIME 07.45AM.

- We act for <u>LEGENDARY TRANSPORT PTE LTD</u>, the owner of vehicle No. <u>PC4415E</u> involved in the abovementioned road accident, in his claim for damages of the consequential property losses and expenses incurred as a result of the said accident.
- 2. We are instructed that the accident was caused solely or contributed by your / your authorized driver's / your insured's authorized driver's negligent driving, use and/or management of motor vehicle No. SNL2687B.
- 3. Copies of the following supporting documents are enclosed herewith for your perusal: -

a.	Invoice Cost of Repair
b.	Invoice Rental Agreement / Loss of Use
C.	Invoice LTA Search

4. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows.

i.	Cost of Repair \$ 3,600.00 + GST \$ 324	S\$ 3,924.00
ii.	Pre-Inspection Days – 2 Days	S\$ 360.00
iii.	Rental Agreement / Loss of Use – 4 Days	S\$ 720.00
iv.	LTA Search	S\$ 27.25
٧.	Total	S\$ 5,031.25

In compliance with the protocol, we have engaged your panel of surveyor for the damages claim to the said amount. Do refer to attachment and we hope to have an amicable settlement reply soon.

5. You may acknowledge receipt of this letter by email to: claims@carsmith.biz

Yours faithfully CARSMITH PTE LTD

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 21 Aug 2024 / 10:04:36

Receipt Date/Time: 21 Aug 2024 / 10:04:36

Tax Invoice/Receipt

Receipt No.: ITNET-00000-240821-000835

Previous Receipt No.:

FIEVIO	us Receipt No				
S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at Insura 1	t of Insurance Enquiry - SNL2687B 19 Aug 2024/07:45:00 ance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - SNL2687B Enquiry Fee		25.00	2.25	27.25
	20240821100300995369	Sub-Total	25.00	2.25	27.25
		Total Before Rounding	25.00	2.25	27.25
		•	25.00	2.23	
		Rounding Difference			0.00
		Total Amount Payable			27.25
		Paid By			
		20240821100356263	Direct Debit: eNETS Debit (Internet Banking)		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.



CARSMITH PRIVATE LIMITED

PREMIER
8 KAKI BUKIT AVE 4 #04-34/35
Singapore 415875
+65 90910000
info@carsmith.biz

GST Registration No.: 201910097E

Tax Invoice

BILL TO INDIA INTERNATIONAL INSURANCE A2408-009-PC4415E

 INVOICE
 5557

 DATE
 20/09/2024

 TERMS
 Due on receipt

 DUE DATE
 20/09/2024

DATE	ACTIVITY	DESCRIPTION		OIX	RATE	AMOUNT
	LUMP SUM FOR REPAIR			1	3,600.00	3,600.00
THANK YOU			SUBTOTAL	**************************************		3,600.00
			GST TOTAL			324.00
			TOTAL			3,924.00
			BALANCE DUE			S\$3,924.00
GST SUMMARY						
		RATE		GST		NET
	G	ST @ 9%		324.00		3,600.00

Company Registration No. 201910097E

Bank Account Details: DBS Bank: 07-2009261-9

PayNow:201910097E

All payments are transacted in Singapore dollars only.

All payments are non-refundable or exchangeable.

Thanks for your patronage.

Page 1 of 1

LETTER OF AUTHORISATION

To: CARSMITH PRIVATE LIMITED

RE: ACCIDENT INVOLVING VEHICLE NOS. PC 4415E & 911 26878	
ALONG Hindhede Walk	
19.08.2024	ON
I/We Legendary Transport Pte Ltd	
NRIC / Passport No.: 202033191m the owner of vehicle no PC 4415E	
hereby authorise you to commence repair to the said vehicle forthwith. In consider	eration of
you repairing my/our vehicle at my / our request: -	

- 1. I/We hereby irrevocably authorise you to demand, claim, settle (in any manner you deem fit), receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceedings, if necessary, in my/our name for the cost of repair and loss of use, etc and to appoint any solicitor to act for me/us in respect of the claim and all or any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third-party claim to you and my/our solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated directly to you after deduction of their costs on a solicitor and client basis. I/We undertake to co-operate fully with you and my/our solicitors to see the claim to a successful conclusion.
- If the third-party claim is unsuccessful or in your discretion inappropriate for any reason, I/we
 hereby instruct and authorise you to claim directly from my/our insurance company on
 my/our behalf for all monies due to you. I undertake to pay you for the excess applicable
 under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing
 the claim on my/our behalf.

3. If the own insurers' claim is not applicable and/or the third-party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.

4. I undertake to pay you the cost of repair of my vehicle and all costs, fees and expenses incurred by you in pursuing the claim on my/our behalf, in the event the contents of my accident report is untrue or inaccurate or not believed by the court.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of solicitors on my/our behalf as you shall deem fit for the purpose of the third-party/own insurer's claim.

I/We undertake to inform you and/or the solicitors appointed by you on my behalf in the event the third-party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third-party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third-party claim and in case the settlement monies is sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repair settled and related expenses, costs and disbursement incurred.

Policy No	Expiry Date:	
Date:	Excess:	
x Jul	2000	
Owner's Signature/	Co's Stamp (if applicable)	Witness Signature/Name

Attn: Wotor Claims Department			
-			
Dear Sir / Madam,			
RE: ACCIDENT INVOLVING VEHICLE NOS	PC 4415E	& 4	INL2687B ALONG
Hindhede Walk		***************************************	ON
19.08-2024			ON
I/We, the registered owner of vehicle regist	ration no. Pc4	lui5E	which was
involved in the above accident with vehicle	no 901)407	D :	manual bu
coid claim have it a consumer authorize t	nat any payment	due to	me/us from the above
said claim be paid to CARSMITH PRIVATE LI	MITED.		
I/we hereby indemnify CARSMITH PRIVATE	LIMITED against a	all clain	ns and/or damages
which may arise from all actions taken for or	on my/our heha	16	alloy of dallinggoo
	on my/our bella	11.	
Yours faithfully			
Tours raitinumy			
- 6 /			
The state of the s			
J July			
Owner Signature (company stamp if applicab			
Name in Full: Legendary Transport Pte	Ud		
NRIC / FIN / UEN No: 202033191m			
A daluare.			

LETTER OF AUTHORITY

Dear Sirs,	
RE: ACCIDENT INVOLVING VEHICLE NOS. PC 4415E Hindhede Walk 19.08.2024.	ON
I hereby authorize you to release the sum of \$ for my property damage claim only to my (solicitors, worksho	being the settlement sum
	P)
Yours faithfully,	P/

Claimant's signature / company stamp (if applicable)