



**DICKSON GROUP**  
Your Trusted Automotive Solutionist

DICKSON AUTO CARE CENTRE PTE LTD  
29 UBI ROAD 4, DICKSON AUTO CENTRE  
SINGAPORE 408619  
TEL: 6668 1122 | FAX: 6668 1123

Our Ref: SCE3656B\_231024  
Accident Date: 13-Sep-24

**23-Oct-24**

**ATTENTION:** MS First Capital Insurance Ltd  
Email: [motorclaims@msfirstcapital.com.sg](mailto:motorclaims@msfirstcapital.com.sg)

**MS First Capital Insurance Ltd**  
6 Raffles Quay  
#21-00  
Singapore 048580

**CLAIMANT: DICKSON AUTO CARE CENTRE PTE LTD**  
**ACCIDENT INVOLVING SCE3656B & SHC7149Z AT CTE ON 13 SEP 2024**

We would like to claim damages against your insured in connection with a road accident involving our client's motor registration number and motor vehicle registration number driven by your authorised driver at the material time.

As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair (with GST) after surveyor final esti.	\$	8,829.00
2) Loss of rental (7 days X \$100) w GST	\$	763.00
3) TP Insurer Enquiry	\$	2.18
<b>TOTAL:</b>	<b>\$</b>	<b><u>9,594.18</u></b>

A copy of each of the following supporting documents is enclosed:  
1) GIA report of our Insured

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within **14 days** of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

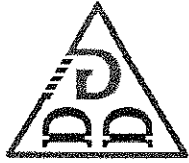
Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within **8 weeks** of your receipt of this letter.

For any further enquiry, kindly contact us via email to [admin@dacc.com.sg](mailto:admin@dacc.com.sg) or call us at 6668 1122 directly.

Yours Faithfully,



Poon Heng Cheong  
Dickson Auto Care Centre Pte Ltd  
Deputy GM - Aftersales

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**Dickson Auto Care Centre Pte Ltd**

Address: 29 Ubi Road 4, Singapore 408619

Tel No: 6668 1122 Fax No: 6668 1123

24/7 Roadside Assistance: 6668 1129

Email: enquiry@dicksonautocarecentre.com.sg

GST Reg. No.: 201921404K Company Reg. No.: 201921404K

**Tax Invoice****MS FIRST CAPITAL INSURANCE LTD**

16 Raffles Quay #42-01

Hong Leong Building

Singapore 048581

Tel: 65073848

**Make** : AUDI**Model** : A4 1.8 TFSI MU ATTRACTION**Veh. No.** : SCE3656B

**Invoice No.** : INV24100608  
**Invoice Date** : 23/10/2024  
**Ref. No.** : WJ2409316  
**Terms** : COD  
**Service Advisor** : Choon Xiang  
**Invoiced By** : Mahirah  
**Current Mileage** : 129789 km

#	Description	Qty	UOM	U/P	Disc	Amt
1	COST OF REPAIR	1.00		8,100.00	0.00	8,100.00
2	ACCIDENT REPAIR CAR RENTAL FOR SCE3656B RENTAL PERIOD: 25 SEP 2024 TO 2 OCT 2024 (7 DAYS) RENTAL CAR: SLG3519Y	7.00		100.00	0.00	700.00

**Remarks:** TP CLAIM

D.O.A: 13 SEP 2024

Payment by cheque to be crossed and made payable to Dickson Auto Care Centre Pte Ltd

Transfer to bank account: DBS 072-021-5168

Paynow to company UEN: 201921404K

Subtotal : S\$ 8,800.00

GST 9.0% : S\$ 792.00

**Total : S\$ 9,592.00**

*I agree to the remarks and price as listed above and affirm that the goods are received in good condition.*

**For Dickson Auto Care Centre Pte Ltd**

(Customer's Signature and Company Stamp)

(Authorised Signature)

**RENTAL AGREEMENT**

RA 016825 2024-09

Hirer's Name <b>Ang Kok Wee</b>	Date of Birth <b>12/9/69</b>	Passport/ Nric No. <b>S6931909B</b>	Nationality
Address <b>17 Kovan Road #07-06</b>	Occupation	Driving Licence No. <b>As Above</b>	Date of Expiry <b>Life</b>
Postal Code <b>548190</b>	Contact No. <b>81897183</b>	Mobile Phone No. <b>92958120</b>	
Joint Hirer's / Guarantor's Name	Date of Birth	Passport/ Nric No.	Nationality
Address	Occupation	Driving Licence No.	Date of Expiry
Postal Code	Contact No.	Mobile Phone No.	

<b>CHECK OUT</b>	Date <b>25.9.24</b>	Time <b>9.55am</b>	Mileage KM	E	1/4	3/4	F
<b>CHECK IN</b>	Date <b>2.10.24</b>	Time <b>10.25am</b>	Mileage KM	Remarks			

**IMPORTANT NOTES:-**

- 1. Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance
- 2. No refund will be given for vehicle that returns early.
- 3. Own Damage Liability - First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- 4. Third Party Liability - First \$2000 for any Third Party Accident Claim.
- 5. Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience
- 6. Hirer is responsible for all parking fines & traffic summons.
- 7. Extension:- One day's advance notice is required otherwise no extension will be allowed.
- 8. Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- 9. Vehicle returned after office hour will be charged to the next working day.
- 10. Hourly extension is charged at 1/5 of the daily rate.
- 11. As preventive maintenance, please check water & engine oil daily.
- 12. Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- 13. For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle
- 14. Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed

	UNIT		RATE (\$)	TOTAL (\$)
RATE	7	@	100	700
DISCOUNT				
GST @ 9.1.				63
TOTAL				763
EXTENSION				
Inv 10 0021 2024-10				
Dickson/Siang				
SCE3656B				
DEPOSIT (refundable) S\$				
CHANGED OVER FROM VEH.			DATE	

I/We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.  
I/We declare that all information given on this form is true and accurate.

Hirer's Signature

Joint Hirer's/ Guarantor's Signature

for CHAN'S & SONS ENTERPRISE

VEHICLE NO.

**SLG35194**

MODEL


**Kia Forte 1.6 (A)**

FROM

RETURN

\*Estimate Date. For actual return see CHECK IN

OPERATING HOURS: MONDAY TO FRIDAY 8.30AM TO 5.00PM. SATURDAY 8.30AM TO 12.00PM. CLOSED ON SUNDAY & PUBLIC HOLIDAY

Tax Invoice							
 www.chans.com.sg <b>CHAN'S &amp; SONS ENTERPRISE</b> Company Reg No:51936900M 363 Sembawang Road, Goodlink Park, Singapore - 758379 Email: admin@chans.com.sg			Tax Invoice No: INV1000312024-10		Dated: October 2, 2024		
			Rental Agreement No: RA 016825 2024-09		Terms of Payment: Due upon receipt		
			Customer Reference: SCE3656B				
			Notes: SCE3656B				
<b>Customer Details</b> <b>DICKSON AUTO CARE CENTRE PTE. LTD.</b> NO.29 UBI ROAD 4 DICKSON AUTO CENTRE Singapore 408619			<b>Executive Name:</b> DICKSON SIANG				
S.No	Product	Description	From Date	To Date	No. of Periods	Price (SGD)	Amount (SGD)
1	SLG3519Y	Kia Forte K3 1.6 (A) - Ang Kok Wee	25-09-2024	02-10-2024	7 Days	100.00	700.00
							700.00
						<b>GST 9% (9%)</b>	<b>63.00</b>
Amount in words : <b>Seven Hundred Sixty Three Singapore Dollar (SGD)</b>						<b>Total (SGD)</b>	<b>763.00</b>
<b>Declaration:</b> Please make your cheques payable to : <b>CHAN'S &amp; SONS ENTERPRISE</b>			<b>For CHAN'S &amp; SONS ENTERPRISE</b>  This is a Computer generated document. No signature is required.				
<b>Income Terms</b> Terms							


## INSURER ENQUIRY

**Find  
insurer**

Vehicle reg. no.

SHC7149Z

Date of Accident

13/09/2024 

Reset

% **RESULT & RECEIPT**

## TP Insurer Enquiry

Insurance ..... **MS First Capital Insurance Ltd**Period of Insurance ..... **01/01/2024 - 31/12/2024**Requested By ..... **TANG CHOON XIANG (DICKSO...**Requested Date ..... **13/09/2024 17:17****Payment details**Request Amount: **S\$2**GST Amount: **S\$0.18**Total Amount Due (GST Inclusive): **S\$2.18****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**



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## DISCHARGE VOUCHER

Name of Policyholder ANG KOK WEE

Vehicle Number SCE 3656 B

Policy Number MPC 24 B 00003102

Accident Claim Number SD0B249D0003

I/We hereby acknowledge having received from the under-mentioned repairers my/our above-stated vehicle which has been repaired to my/our satisfaction and I/we admit that the payment for such repairs by Dickson Auto Care Centre Pte Ltd is in full and final discharge of my/our claim under above-stated policy number in respect of damage caused to the said vehicle as a result of an accident that occurred on 13 day of Sep (month) 2024 (year).

x Ang Kok Wee  
Signature (Insured)

2/10/24 for  
Date

Company Stamp :



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## LETTER OF AUTHORISATION

In the matter of an accident involving motor vehicles SCE 3656 B and SHC 7149 Z & SNE 6444 X  
on 17 day of Sep (month) 2024 (year) along CTE

I/ We, Ang Kok Wee the owner of vehicle registration number SCE 3656 B  
at the material time of accident hereby appoint Dickson Auto Care Centre to proceed with the repairs to the damages  
caused to my/our vehicle in the above accident in accordance with the recommendations and advice of the licensed  
motor surveyor appointed by the insurers or on my/our behalf.

I/ We authorise Dickson Auto Care Centre and/or its representative to submit and make any claims which I/ We may  
have against the other party/parties or alternatively under the insurance policy taken up by me/ us in respect of the  
cost of repair suffered by me/us arising from the accident, and to receive payment (such payment to be made by way  
of Cheque or online bank transfer in favour of Dickson Auto Care Centre Pte Ltd due to me/us in connection with and  
arising out of the above claim.

Dickson Auto Care Centre and/or its representative are hereby authorised as my attorney to execute and/or sign any  
documents/discharge vouchers regarding the above claim.

I/ We further confirm that the acceptance by Dickson Auto Care Centre of the settlement amount in respect of such  
claim shall constitute full discharge of my/ our claim in respect of such loss and damage.

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

Date: 2 day of 10 (month) 2024 (year).

x [Signature]  
Name & Signature  
(Insured/Owner)

NRIC No: S693909B

[Signature]  
Name & Signature  
(Dickson Auto Care Representative)