

Main Office:
Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel : **(65) 6476 3333**
Fax : (65) 6271 5891
www.mova.com.sg

Workshop Dept:
Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722
Tel : **(65) 6272 3892**
Fax : (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088864-2

Our Ref : SMR2915Z/ T641024
Your Ref : D24008983MFSH
Date : 19 December 2024

MS FIRST CAPITAL INSURANCE LIMITED
16 RAFFLES QUAY
#42-01 HONG LEONG BUILDING
Singapore 048581
Attn: Motor Claims Department

BY EMAIL
WITHOUT PREJUDICE

Dear Sir/Mdm

ACCIDENT INVOLVING: SMR2915Z & SHB1151K
DATE OF ACCIDENT: 9 October 2024
ALONG: PIE (TUAS) AFTER TOH GUAN EXIT

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$	4,796.00
#Loss of Use (\$ 120.00 x 11 days)	\$	1,438.80
Loss of Rental (\$ x days) + 9% GST	\$	-
Loss of Income (\$ x days)	\$	-
LTA Fees	\$	27.25
Police Report / GIA	\$	-
Medical Fee	\$	-
Taxi Fare	\$	-
Grand Total	\$	6,262.05

Car date in: 2024-10-21
Car date out: 2024-11-01

Authorized Repair Days: **(TP/OD/WS/Recovery of Incidental Costs)**

Please pay the amount of **\$ 6,262.05** in favour of **MOVA AUTOMOTIVE PTE LTD.**
If you have any enquiries, please call Ms Suann @ 62623377 or
email suann@moval.com.sg

Yours faithfully,
MOVA AUTOMOTIVE PTE LTD
For Claims Manager

Note: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

* This is a computer generated letter and does not need a signature.

To:

MS FIRST CAPITAL INSURANCE LTD

SMR2915Z, HONDA, VEZEL 1.5X CVT

16 Raffles Quay

#42-01 Hong Leong Building

Singapore 048581

Job Site:

Work Order

Job No. : CBMW24100199

Date : 11/10/2024

Type : Accident Claim -
TP

Advisor : Keong

Time in : 07/11/2024 10:59

Time out :

Created : 07/11/2024 10:59

T	Job Description	Quantity	UOM	Unit Price	Amt
Ad hoc					
M	COST OF REPAIR	1.00		4,400.00	4,400.00

Remarks:

ACCIDENT INVOLVING SMR2915Z & SHB1151K ON 09/10/2024

TP - FIRST CAP

Subtotal	4,400.00
GST 9.0%	396.00
Total	4,796.00

SIGNATURE & COMPANY'S STAMP

(Authorised Signature)

TAX Invoice

30-Nov-24

Veh : SMJ9387T

Prof : RK510349

RA : I15351

From : 21/10/2024

To : 1/11/2024

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MOHAMAD SHAFRI BIN AMAT NOH

Attention : Mova - claims Dept

Description	Qty	U.Price	Amount S\$
RENTAL CHARGES FROM 21/10/24 TO 1/11/24 HYUNDAI AVANTE SMJ9387T RENTAL AGREEMENT : I15351 DRIVEN BY: MOHAMAD SHAFRI BIN AMAT NOH YOUR REF : SMR2915Z	11	\$120	\$1,320.00


Mova Automotive Pte Ltd

Non - GST amount	\$1,320.00
GST 9%	\$118.80
Total Amount	\$1,438.80

**MOVA**

AUTOMOTIVE PTE LTD

Website: www.mova.com.sg

Co. Reg. No.: 198904033G

Automotive Pte Ltd

Main Office: No. 22 Jalan Kilang, Singapore 159419

Bukit Merah Branch:

Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122

Fan Young Branch: No. 15 Fan Young Road, Singapore 629792

Tel: (65) 6476 3333 Fax: (65) 6270 8314

24 Hours Breakdown Service: (65) 9799 8888

Bedok Branch: 219 Bedok Central #01-138, Singapore 460219

Tel: (65) 6604 7877

RENTAL AGREEMENT

RA NO.: I 15351

R4510349
No malayen.

RENTAL DETAILS				INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	Avante	Vehicle No:	SMJ9887T	Singapore	Malaysia	Signature
Date/Time Out:	21/10/24		1 (A.00)	S\$ 2500	S\$ —	gr
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Per Accident	Per Accident	
Date/ Time In:	01/11/24		1233	Charges		
Petrol Level In:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Months @\$	Per Month	
Change Over 1:	Date:	Initial:		Weeks @\$	Per Week	
Change Over 2:	Date:	Initial:		11 Days @\$ 120.00	Per Day	\$1,320.00
KM Out:	10035	KM In:		Hours @\$	Per Hour	
HIRER DETAILS				Sub-Total		
Named Hirer				Less Discount	%	
Name:	Mohamad Shafri Bin Amur Noh.			Rental Charges		
Address:				CDW @\$	per day / week / month	
				PAI @\$	per day / week / month	
				Petrol Top-Up		
				Misc Charges		
Identity Card No:	S8716536A.			GST	9%	\$118.80
Date of Birth:				Total		
Driving License:				\$1,438.80		
Country of Issue:				VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS	
Tel:	(HP) 8726 4057	(O)		Pre-Payment		
Nationality:				Downpayment and Deposit		
Effective Date:				Amount Refunded/ Due		
				Signature of Refund		
Additional Hirer				Remarks:		
Name:				SMR2915Z		
Address:				Invoice No: kerrie		
				Ref. No:		
				Checked Out By:	Checked In By:	Checked By:
Identity Card No:						
Date of Birth:						
Driving License:				Sales-In Charge:		
Country of Issue:				Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/>		
Tel:	(HP)	(O)				
Nationality:						
Effective Date:						

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/ credit card voucher given above. All above information given by me are true in connection to this agreement.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered as a day rental.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.

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

Print Date/Time : 10 Oct 2024 / 16:16:21
Receipt Date/Time : 10 Oct 2024 / 16:16:21

Tax Invoice/Receipt

Receipt No. : ITNET-00000-241010-003178
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 - SHB1151K As at 09 Oct 2024/16:15:00 Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHB1151K Enquiry Fee 20241010161427664469	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				
515705XXXXXX6720		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.

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POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SMR29152 and (Third Party's Vehicle No.) SHB1151K on 9/10/2024 along DIE (TUAS) AFTER TOH GUAN EXIT

BY THIS POWER OF ATTORNEY, *I/We, MOHAMAD SHAFRI BIN AMAT NOH
NRIC/Passport No. S8716536A (Address)
BLK 804B #10-26 KEAT HONG CLOSE 682804 /
_____ a company incorporate in Singapore and having its registered office at
(Address)* _____ owner of Vehicle Registered No.

_____ hereby irrevocably appoint MOVA AUTOMOTIVE PTE LTD, (MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be *my/our Attorney and in *my/our name(s) and on *my/our behalf to do all or any of the following :

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. _____ taken up by *me/us (subject to approval by my Insurance Company) in respect of the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by *me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as *my/our Attorney shall in MOVA absolute **discretion, deem fit**.
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of **MOVA AUTOMOTIVE PTE LTD** and to give a valid receipt and discharge thereof.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of MOVA.**


*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

*I/We further confirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

***IN WITNESS WHEREOF.** *I/We have hereunto to set *my/our hand and seal this day 21 of the month of 10, Year Two Thousand - 24 (20 _____).

Signed, Sealed & Delivered By


Customer's Name: Mohamad Shafri Bin Amat Noh
NRIC No: S8716536A
Co's Rubber Stamp, where applicable.

MOVA's copy

***delete as appropriate.**