

Your Ref: SJQ7301C (INDIA INSURANCE)

Our Ref: SNQ1790R

INDIA INTERNATIONAL INSURANCE PTE LTD **64 CECIL STREET** #04/#05/#06 - 02 IOB BUILDING Singapore 049711

Date: 18/11/2024

Dear Sirs/ Mdm

## Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05 Sin Ming Autocare Singapore 575721 Tel: (65) 6455 0600

Fax: (65) 6455 6192

Email: motorclaims@autocare.com.sg Co. Reg. No.: 200210033N, GST Reg. No.: 20-0210033-N

#### ACCIDENT INVOLVING - SNQ1790R AND SJQ7301C ON 24/10/2024

We are the repairers of vehicle nos. SNQ1790R and that you were the insurer of vehicle nos. SJQ7301C in the aforesaid accident. Our investigations reveal that the accident was caused by the negligence of the vehicle insured by you. As such, we are looking to you for reimbursement calculated as follows:

4) Medical Fee	**************************************	2.18 7.01
2) LOU – \$100 X 4 3) Search Fee	S\$ 400 S\$ 2	
1) Repair Costs	S\$ 5, 341	00

TOTAL: \$\$ 5,830.19

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To substantiate our claim, we enclosed the following:

- 1) Final Repair bill
- 3) Letter of Authorisation/ Authority
- 4) SAS report
- 5) Search Fee

We look forward to your favorable reply in due course.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/ claimant.

Yours faithfully

Email. motorclaims@autocare.com.sg

Encl.

# LETTER OF AUTHORITY

Your Ref: SJQ7301 C (India International Ins.)

Our Ref: SNQ 1790R

Date. 24/10/2024

To: India International Insurance P.L.

Attn: Motor Claims Dept

Dear Sirs/ Mdm

ACCINVLG . SNQ 1790R AND SJQ7301C on 24/10/2024

I/ We, M/s Tai Pi Ren the owner of Motor Vehicle No. SNO 1790R authorise M/s Sin Ming AutoCare BFG Pte Ltd as my authorised representative to write, negotiate and settle claim on my behalf in my claim against the party/parties involved in the above-mentioned accident.

I also hereby authorised you to pay your cheque drawn in favour of <u>M/s Sin</u> <u>Ming AutoCare BFG Pte Ltd</u>

Signature of owner

(With Company's stamp, if applicable)

\*PLEASE NOTE THAT IT IS A CONDITION OF ANY SETTLEMENT REACHED THAT IT SHALL BE WITHOUT PREJUDICE TO ANY PERSONAL INJURY CLAIM (IF ANY) OF THE OWNER/ CLAIMANT.

## LETTER OF AUTHORISATION

TO: M/S SIN MING AUTOCARE BFG PTE LTD
NO. 176, SIN MING DRIVE, #02-05
SIN MING AUTOCARE, SINGAPORE 575721

We/ I, <u>Tci Pei Ren</u> below mentioned person/company, being the registered owner of Motor Vehicle Registration no. <u>SNO 1740R</u> involved in an accident on <u>34/1012-024</u> involving Motor Vehicle irrevocably authorise you to:-

- 1) undertake and proceed with all repairs to the said vehicle:
- 2) thereafter negotiate, claim and/or recover from the adjuster/insurance company/owner sustained by me/ us
- 3) settle and claim, collect and/or received monies pertaining to the claim and to give a valid receipt thereof as well as to sign discharge vouchers on my/our behalf
- 4) for the purposes above, appoint any solicitors as you deemed fit to act on my/ our behalf;
- 5) and
- 6) apply all such monies collected or received into account or payment of our repair bills as well as legal costs and disbursements incurred.

I/ We warrant that all facts and documents furnished to you in support of the claim are true and if need be will attend Courts to give evidence in respect thereof. And should any statement of facts furnished to you be found to be false and you are unable to succeed in the claim, I/We will be fully responsible for the repair and legal costs incurred.

Name of Vehicle Owner

: Tai Pei Ren

Motor Vehicle Reg No.

: SNQ 1790R

NRIC No.

:

Address

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Signed

· Olice

**Company Stamp** 

(With Company's stamp, if applicable)

\*PLEASE NOTE THAT IT IS A CONDITION OF ANY SETTLEMENT REACHED THAT IT SHALL BE WITHOUT PREJUDICE TO ANY PERSONAL INJURY CLAIM (IF ANY) OF THE OWNER/ CLAIMANT.



#### INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Empil insure@iii.com.sg Fax (65) 62244174 Website www.lif.com.sg

## **EXPRESS SETTLEMENT**

# DISCHARGE VOUCHER Ill-Direct Settlement (PODS)

India Ref: MPC2024D0012704 Claimant Ref: SNQ1790R

We/I, SIN MING AUTOCARE BFG PTE LTD ("the workshop") he with the appointed Surveyor of India International Insurance Pte Ltd of Surveyor) with respect to the amount claimed for S\$ 5,341.0 &Medical Fee use/rental), S\$ 89.19 (search fee), vehicle no. SNQ1790R that was on 24/10/2024 (date) at CTE EXIT TO OUTRAM RD vehicle). This is pursuant to the inspection conducted on 29/10/2024 (date)	LKK Auto Con  (repair cost damaged pursuar	isultants Pte Ltd (name st), S\$ 400.00 (loss of at to the accident which occurred ling vehicle no. SJQ7301C (insured
We/I confirm that we/I are/am authorized by the owner claimant") of vehicle no. SNQ1790R to make the claim as set out in the at the matter on his/her behalf in a manner that we/I deem fit. We/I encl party claimant".		<del>-</del>
We/l further confirm that we/l will indemnify India International Insurance they will or have already incurred in the event that "the third party of further claim against the former for any loss and expenses suffered per	laimant" after the ertaining to cost of	above said agreement lodges a
We/I confirm that the agreement reached above is in full and final supersuant to the accident and that further this settlement is reached on abasis.		· ·
This agreement is subject to the application of Singapore law and the Si dispute arising out of the same.	ngapore Courts ha	ve exclusive jurisdiction over any
We/l authorize you to pay the total amount of \$\$ 5,830.19 to SIN Dated this 2024	MING AUTOCARE	BFG PTE LTD
CLAIMANT:  Signature:  Signed by "the workshop" (with chop)	WITNESS: Signature:	Signed by appointed Surveyor
Name:  SIN MING AUTOLARE REG PTE LTD  176, Sin Ming Drive #02-05 Sin Ming Autocare Complex Singapore 575721 Tel: (65) 6459 6900 Fax: (65) 6459 6192 Website: www.eutocare.com.ag	Name: NRIC: Address:	LKK Auto Consultants Pte Ltd  199607198R  51 Ubi Avenue 1  #02-25 Paya Ubi Ind. Park S(408933)
Nationality:	Nationality:	



INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #05-00 IOB BUILDING SINGAPORE 049711

Attention: Motor Claim Department

Contact: 6223 8122 Fax No.: 6225 7743

Sin Ming Autocare BFG Pte Ltd 176, Sin Ming Drive #02-05

Sin Ming Autocare Singapore 575721 Tel: (65) 6455 0600 Fax: (65) 6455 6192

Email: motorclaims@autocare.com.sg Co. Reg. No.: 200210033N, GST Reg. No.: 20-0210033-N

Tax Invoice: TP/24017

Date: 18/11/2024 Vehicle Num.: SNQ1790R Make/Model: AUDI Q5

Chassis/Eng#:

Accident Date: 24/10/2024

Claim No.:

Reference: THIRD PARTY CLAIM - INDAI INS

Policy No.: 5145123230

S/N Quantity Particular Unit Price Amount S\$ LIST ITEMS: 1 LUMP SUM REPAIR ( Parts & Labour inclusive ) 4,900.00 List TotalS\$: 4,900.00

E. & O.E.

Total S\$:

4,900.00

GST@9% S\$:

441.00

Amount Due S\$:

5,341.00

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for Sin Ming Autodare BFG Pte Ltd

**INSURER ENQUIRY** 

Find insurer

Vehicle reg. no.

SJQ7301C

**Date of Accident** 

24/10/2024 🗰

Reset

#### % RESULT & RECEIPT

TP Insurer Enquiry	
Insurance	India International Insurance
Period of Insurance	
Requested By	SMBFG (SIN MING AUTOCARE
Requested Date	25/10/2024 15:52

**Payment details** 

Request Amount: **\$\$2** GST Amount: **\$\$0.18** 

Total Amount Due (GST Inclusive): \$\$2.18

**General Insurance Association** 

Records Management Centre

GST Registration No: M400017735

SHQ1790R



820 THOMSON ROAD, SINGAPORE 574623 MAIN LINE: 6347 6688 WEBSITE www.mtalverna.sg GST REGN NO. M4-0003321-8

24-HOUR URGENT CARE CENTRE

Mount Alvernia Hospital 820 Thomson Road Singapore 574623 Tel: 63476210

Patient Name : TAI PEI REN ID No. : S8516572J

Account No. : 0240728470

Receipt No. : 240139392 Payment Date : 25/10/2024

Print Date : 25/10/2024 Page : 1 of 1

		V*************************************	
Item	O+-57	UOM	Amount (c)
EMODICOVID MAD 10000	Qty		Amount (\$)
ETORICOXIB TAB 120MG	3	EA	3.42
OMEPRAZOLE 20MG CAP	7	EA	7.91
OUTPATIENT NURSING SERVICE	1	EA	25.00
RMO CONSULTATION FEE	1	EA	43.00
SURGICAL MASK	1	EA	0.50
Total Charges		******	79.83
GST @ 9%			7.18
			87.01
Paid:			
AMERICAN EXPRESS BY TAI PEI REN			87.01
Mode of Payment : AMERICAN EXPRESS	Reference No.	:	

This is a computer generated official receipt, no signature is required.

11/29/24, 4:22 PM Merimen e-Claims

## **Claim Audit**

□ AUDIT TRAIL						
No. On	Audit	Remarks	Ву			
28 Oct 1 2024 14:31	Clm Dtl Modified	Claimant's Name: -> TAI PEI REN. Claimant's ID: -> SXXXX572J.				
28 Oct 2 2024 14:31	Clm Veh Model Changed	(201613) AUDI Q5 2.0 TFSI Quattro (A).				
28 Oct 3 2024 14:31	Clm Created	Reg No: SNQ1790R. Acct Date: 2024/10/24. Claim Type: TP. Insurer: India International In surance Pte Ltd (HQ). TP Insurer: Income Insurance Limited (HQ). Workshop: Sin Ming Aut ocare BFG Pte Ltd (HQ)				
28 Oct 4 2024 14:31	Adj Co Assigned	LKK Auto Consultants Pte Ltd (HQ):				
28 Oct 5 2024 14:31	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/11/07				
28 Oct 6 2024 14:31	Adj Mandate Set	Approved:0.00.Reinsp:Adj decides.	[A] HOW MEI KWAN			
28 Oct 7 2024 14:31	Label Added	(30653):Direct Settlement.	[A] HOW MEI KWAN			
28 Oct 8 2024 14:31	Adj Adjuster Assigned	[None] -> KENNETH KONG	[A] HOW MEI KWAN			
30 Oct 9 2024 13:37	Adj Mandate Request	Cur.Req:0.00:PODS LIABILITY: 100%. Insured driver swerved into to 3rd party's lane and h it 3rd party car. Please see 3rd party video footage uploaded in Merimen, Thanks.	[A] CHEW HSIAO TONG			
04 Nov 10 2024 15:22	Video Downloaded	Downloaded SNQ1790R TP VIDEO				
04 Nov 11 2024 15:22	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/11/07				
04 Nov 12 2024 15:22	Adj Mandate Set	Approved:0.00.				
06 Nov 13 2024 10:43	TP Ins Updated	TPPolNo:[None] -> 5145123230.				
06 Nov 14 2024 10:43	Clm Dtl Modified	Insured Name: -> ING DESIGNERS PTE LTD. Insured ID: -> 201502217M.				
06 Nov 15 2024 10:50	Adj Im. Advice Submitted	Next Rpt:Final Rpt.Due Date:2024/11/07				
08 Nov 16 2024 15:17	Video Downloaded	Downloaded SNQ1790R TP VIDEO				
22 Nov 17 2024 12:06	Adj Rpt Initiated		[A] CHEW HSIAO TONG			
22 Nov 18 2024 12:06	Clm Dtl Modified	Claim Conclusion: -> 3.				
22 Nov 19 2024 12:06	Clm Dtl Modified	JPJ Reg. Date: -> 2015/07/31.				
22 Nov 20 2024 12:06	Clm Details Notified					
22 Nov 21 2024 13:08	Adj Mandate Request	Cur.Req: $5830.19$ : Liability: $100\%$ *Quantum: $$5,830.19$ (all-in). Pls refer to adjuster report for details. *For your approval please.	[A] CHEW HSIAO TONG			
26 Nov 22 2024 00:33	Adj Mandate Set	Approved:5830.19.	[I] Zuhaidah Bte Samsuri			
Date F	rom	Date To Audit Type None	<b>✓</b> Go			
ACTIVITY						
No record						
Mariman Bill	ing for this case	Transaction History				
		Co Name	A			
Bill Ref No	Bill Date	Bill Type Acc Type Acc Name (Branch) Ref 1 Ref 2	Amount			

3262103	29 Oct 2024 09:09:08	TP Case (Insurer)	Motor	LKK Auto Consultants Pte Ltd	India International Insurance Pte Ltd (HQ)	SNQ1790R	SJQ7301C	12.00
3263198	30 Oct 2024 13:36:07	Video Upload	Motor	India International Insurance Pte Ltd (HQ)	India International Insurance Pte Ltd (HQ)	SNQ1790R	CHEW HSIAO TONG	xx.xx
3267346	06 Nov 2024 10:50:10	OD/TP Case (Adjuster)	Motor	LKK Auto Consultants Pte Ltd	LKK Auto Consultants Pte Ltd (HQ)	SNQ1790R	SJQ7301C	12.00