

## Hsiao Tong (LKKAuto)

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**From:** anna@falconair.com.sg  
**Sent:** Thursday, 21 November 2024 10:15 AM  
**To:** Hsiao Tong (LKKAuto)  
**Subject:** LOD - TPC/SKR2515T/T1495 (CD/CNB24110096/XPP)  
**Attachments:** 20241121102622.pdf

"Without Any prejudice to any Personal Injuries"

Dear Sirs

We would like to submit our Letter of Demand as follows:-

COR : \$ 4,142.00

RENTAL : \$ 436.00

Attached herewith are all the supporting documents for your Perusal and awaiting for your offer.

Thanks and regards,  
Anna Ng  
Falcon-Air Auto Services Pte Ltd (Tampines)  
[Tel:67897997](tel:67897997)



**CENTRAL NARCOTICS BUREAU (MHA09)**  
CORPORATE SERVICES DIVISION  
BLK B POLICE CANTONMENT COMPLEX  
393 NEW BRIDGE RD  
SINGAPORE 088763

**Tax Invoice** : **TI800261**  
Date : 21/11/2024  
Vehicle No. : SLL9157S  
Vehicle Model : TOYOTA AURIS  
Chassis/Eng# :  
Accident Date : 04/11/2024  
Claim No :  
Reference :  
Policy :

Item	Qty	Description	Unit Price S\$	Amount S\$
1.	1	BEING LUMP SUM REPAIR (INCLUSIVE OF PARTS, PANEL BEATING, LABOUR AND SPRAY PAINTING )	3,800.00	3,800.00

SINGAPORE DOLLAR FOUR THOUSAND ONE HUNDRED FORTY TWO ONLY

<b>Sub Total</b>	<b>S\$</b>	<b>3,800.00</b>
<b>GST @ 9%</b>	<b>S\$</b>	<b>342.00</b>
<b>Total</b>	<b>S\$</b>	<b>4,142.00</b>

Term : 30

  
for **FALCON-AIR AUTO SERVICES PTE LTD****FALCON-AIR AUTO SERVICES PTE LTD**

(a subsidiary of Falcon-Air Holdings Pte Ltd)

**Head Office:** 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880/6458-0880 Fax: 6454-7862**Branch :** Tampines St 93 Blk 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997**Website :** www.falconair.com.sg **E-mail:** email@falconair.com.sg



## TAX INVOICE

FA INVOICE : **TP 14683**

Please quote full invoice number when making payment

FALCON-AIR

V. A. Nr:		Vehicle Reg. Nr. <b>SJE 8003 U</b>		Model Type <b>Mit Lancer.</b>		Co. Reg. No.: 1988-04415-W	
						GST Reg. No.: M2-0084125-5	
Rates/Remarks <b>SKR 2515T</b>		<input type="checkbox"/> Inc. GST <input type="checkbox"/> exc. GST		Rental Period		Agreed Return Date	
\$	Per Day	\$	Per Week	KM IN		Time/Date In	<b>0900 16 11 2024</b>
\$	Per Month	\$		KM OUT		Hour	Day Mth Yr
Plus First	Km Free Per	, thereafter,		KM DRVN		Time/Date Out	<b>0935 12 11 2024</b>
Chargeable at \$		Per Km				Hour	Day Mth Yr
Hirer's Name <b>Mur Aisyah Bte Zainudin</b>				Collision Damage Excess Reduction			
Hirer's Address <b>9 Flora Road, #02-01 Avila Gardens (509737)</b>				<input type="checkbox"/> Accept <input type="checkbox"/> Decline			
Co.Reg. No.				Personal Accident Insurance			
Tel. No (Res/HP/Pgr) <b>81897212</b>				<input type="checkbox"/> Accept <input type="checkbox"/> Decline			
Fax. No.				\$ Per Day \$ Per Mth			
Reference Contact				Rental Charge Computation			
Tel. No. (Ofc)				Dollars Cents			
Driver's Name				Vehicle Hire			
D.O.B. <b>28/6/93</b>				<b>4 days</b>			
Driver's Address				<b>400 00</b>			
Tel. No. (Res/HP/Pgr)				CDER			
Passport/I.C. Nr./Country <b>S9323196 A</b>				PAI			
Driving Licence Nr. <b>S9323196 A</b>				Delivery / Collection Fee			
Expiry / Pass Date <b>12/11/12</b>				Petrol			
Issued By <b>TP</b>							
Additional Driver's Name							
D.O.B.							
Additional Driver's Address							
Tel. No. (Res/HP/Pgr)				Sub-Total			
Passport/I.C. Nr./Country				<b>400 00</b>			
Driving Licence Nr.				Add GST @ <b>9 %</b>			
Expiry / Pass Date				<b>36 00</b>			
Issued By				Total Net Charges (Incl. GST)			
				<b>436 00</b>			
Method Of Payment <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Card <input type="checkbox"/> Bill Co				*Less Total Prepayment/Deposit Rec'd			
Details of Payment				Balance Amount Due/Refundable			
Amount \$							
Date							
Rec'd by							
* Total Payment Received				Refund Acknowledgement <input type="checkbox"/> By Cash <input type="checkbox"/> By Credit Card <input type="checkbox"/> By Cheque			
				Received \$			
				By Hirer X			
				Out By			
				In By			
				Check In Station			
				Computed By			
				Extension 1. 2. 3.			
				Remarks: Vehicle Out			
				Remarks: Vehicle In			
				E 1/4 1/2 3/4 F			
				↑ Indicate petrol level when vehicle is checked out			
				↓ Indicate petrol level when vehicle is returned			

X  
Hirer's signature signifies acceptance of agreement. (Please read overleaf for additional terms and conditions).

FA RENTAL AGREEMENT NO. : **TP 14683**

FALCON-AIR RENT-A-CAR PTE LTD  
(a subsidiary of Falcon-Air Holdings Pte Ltd)

Head Office: 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880 / 6458-0880 Fax: 6454-7862

Branch: Tampines St 93 Blk 9006 #01-200 Singapore 528840 Tel: 6789-7997 Fax: 6788-7997

Websites: www.falconair.com.sg E-mail: email@falconair.com.sg

## LETTER OF AUTHORITY

To : MOTOR CLAIMS DEPT

ACCIDENT INVOLVING SKR 2515T AND SLL 9157S  
ON 04/11/24 ALONG Pasir Ris Dr 3/Loyang Way X-Junction

I, Nur Aisyah Binte Zainudin CO. REG NO/  
NRIC NO. S9323196A


Of 9 Flora Rd #02-01 S(509737)

Owner of Motor Vehicle Registration No.: SKR 2515T do hereby authorize

M/s FALCON-AIR AUTO SERVICES PTE LTD as my agent and representative to correspond in, negotiate

And settle, on my behalf, my claim against the parties involved in the above mentioned accident. I

Also authorize the said insurers to make all payments in favor of Falcon-Air Auto Services Pte Ltd directly.

  
\_\_\_\_\_  
Date & Signature of Owner/Co. Stamp

"WITHOUT PREJUDICE  
to any  
PERSONAL INJURIES"

\_\_\_\_\_  
Date & Signature of Driver