

Our Ref : SMK7972L  
Your Ref : SLP185Z

Date: 18-Mar-2025

India International Insurance Singapore  
64 Cecil Street; #05  
IOB Building , Singapore 049711  
ATTN: Motor Claim Department

Accident involving SMK7972L/SLP185Z (III Insured) on 31/10/2024

We act for Ho Wai Loon, Kelvin, the owner of vehicle no. SMK7972L which was involved in the above accident.

Our client suffered loss and damage because of your Insured's negligence in the driving of motor vehicle no. SLP185Z

We quantify our client claim's as follows:

1	Cost of Repair inclusive of GST	S\$ 5680.00
2	Loss of Use S\$100.00 x 4 days	S\$ 400.00
3	LTA/GIA SEARCH FEE	S\$ 31.00
4	MEDICAL FEE - Ho Wai Loon, Kelvin	S\$ 72.16
	- HING CHEW LUAN	S\$ 97.56
	Total Claim Amount	S\$ 6,280.72

Pre-repair inspection of our client's vehicle was carried out by your appointed Surveyor Marcus from LKK Auto Consultants Pte Ltd and we have finalized \$\$ 5,200.00 before GST on 17-Mar-2025.

We enclose herewith the necessary invoices for your immediate action

Please let us know whether you accept the liability and willing to do the settlement with us within 7 days upon receiving this letter. If there are no discrepancies, please assist in forwarding the DV to us within 7 days.

Best Regards,

Yvonne Ang  
Joo Hak Kee Auto Pte Ltd



## LETTER OF AUTHORITY & INDEMNITY

函件的授权及弥偿

To: Joo Hak Kee Auto Pte Ltd  
Blk 3007 Ubi Road 1  
#01-406 Singapore 408701

Accident involving vehicle no. SMK7972L and SLP1852  
at Paya Lebar  
On 20/10/2024

1. I/We, the owner of vehicle no. SMK7972L hereby instruct and authorize Joo Hak Kee Auto Pte Ltd to commence repairs to the said vehicle.
2. You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instruction as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver/ or his insurers including if necessary, to commence legal proceedings in court in my/our name against the third party.
3. You have my/full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such term as you deem fit.
4. Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account. In the event that my/our claim or legal suit is not successful or is dismissed for whatever reason, I/We understand and agree that I/We shall be personally liable to bear the legal cost of the third party as well as the professional cost and disbursement of my/our solicitors notwithstanding that my/solicitors were appointed by you on my/our behalf.
5. In the event that I/We am/are required to attend at my/our solicitors' office or to attend Court in connection with my/our claim, I/We shall render full co-operation.
6. In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with and/or if any judgment or settlement is not honored or satisfied by the third party, I/We authorize you to make a claim against my/our own insurer for the cost of repairs and any other losses recoverable under my/our policy of insurance. In the respect, I/We understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us.
7. If for whatever reason, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
8. I/We shall keep you informed of any correspondences and/or summons that I may receive due to this action before agreeing to pay or receive any monies due to this claim.

Dated this day of 07 month of NOV year 2024



HO WAI LOON, KELVIN

Sign/Name/Company Chop

NRIC: SXXXX402J

Address:

BLK 46 CEYLON ROAD 05-06 SINGAPORE 429634

Name of Insurers: Income Insurance Limited

Policy No: 5126292890-02

Contact No: -

**AUTHORIZATION LETTER TO CLAIM FOR MEDICAL BILLS**

I/We, HO WAI LOON, KELVIN (the third party claimant") of  
BLK 46 CEYLONR OAD0 #5-06 SINGAPORE 42963 (address), owner/driver/passenger  
of SMK7972L (vehicle no.) hereby authorize JOO HAK KEEAUTO PTE LTD  
("the workshop") to act for me with respect to my claim for medical bills ("claim") pursuant to the  
accident which occurred on 31/10/2024 (date) along ATALONGPAYALEBARROAD  
(location) involving vehicle no/s SLP185Z ("the accident").

I/We, also confirmed that I/We **will not be making any Injury Claim** and will only claim for the  
medical bills related to this accident.

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit  
and the workshop is further authorized to receive payment further to settlement of my claim with  
payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other  
vehicle/s is concerned.

Dated this 18 (day) of MARCH (month) 2025 (year)



Signed by "the third party claimant"  
(with chop if applicable)



Signed by "the workshop"  
(with chop)



**AUTHORIZATION LETTER TO CLAIM FOR MEDICAL BILLS**

I/We, HING CHEW LUAN (the third party claimant") of BLK 46 CEYLONR OAD0 #5-06 SINGAPORE 42963(address), owner/driver/passenger of SMK7972L (vehicle no.) hereby authorize JOO HAK KEEAUTO PTE LTD ("the workshop") to act for me with respect to my claim for medical bills ("claim") pursuant to the accident which occurred on 31/10/2024 (date) along ATALONGPAYALEBARROAD (location) involving vehicle no/s SLP185Z ("the accident").

I/We, also confirmed that I/We **will not be making any Injury Claim** and will only claim for the medical bills related to this accident.


I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 18 (day) of MARCH (month) 2025 (year)

  
\_\_\_\_\_  
Signed by "the third party claimant"

(with chop if applicable)

  
\_\_\_\_\_  
Signed by "the workshop"

(with chop)

## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MFL2024D0012992  
Claimant Ref: SMK7972L

We/I, JOO HAK KEE AUTO PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 5,668.00 (repair cost), S\$ 240.00 (loss of use/rental), S\$ 200.72 (search fee) & MEDICAL FEE, vehicle no. SMK7972L that was damaged pursuant to the accident which occurred on 31/10/2024 (date) at PAYA LEBAR ROAD (location) involving vehicle no. SLP185Z (insured vehicle). This is pursuant to the inspection conducted on 11/03/2025 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner HO WAI LOON, KELVIN ("the third party claimant") of vehicle no. SMK7972L to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SMK7972L (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 6,108.72 to JOO HAK KEE AUTO PTE LTD.

Dated this 04 day of APRIL 2025

#### CLAIMANT:

Signature: [Signature]  
Signed by "the workshop" (with chop)  
Name: Yvonne Ang  
NRIC: 800007152  
Address: -  
Nationality: -  
Occupation: -

#### WITNESS:

Signature: [Signature]  
Signed by appointed Surveyor  
Name: LKK Auto Consultants Pte Ltd  
NRIC: 199607198R  
Address: 51 Ubi Avenue 1  
#02-25 Paya Ubi Ind. Park S(408933)  
Nationality: -  
Occupation: -

## INVOICE

**Bill To:** India International Insurance Pte Ltd  
Singapore  
**Attn:** Accounts Department  
**Tel:**  
**Email:**

**Invoice No.:** INV2503042  
**Invoice Date:** 17 Mar 2025  
**Due Date:** 24 Mar 2025  
  
**Reference:** SMK7972L

Description	Quantity	Discount	Unit Price	Tax	Amount SGD
TOTAL LUMP SUM REPAIR COST	1.00	%	5,200.00	9%	5,200.00
Subtotal (Includes discount of \$)					5,200.00
Total Local supply of goods and services 9%					468.00
<b>Total Amount Due SGD</b>					<b>5,668.00</b>

\*\* A late payment interest of 2% per month will be imposed on overdue accounts

For PAYNOW payment:

**UEN: 201300082W** (Joo Hak Kee Auto Pte Ltd)

For Bank Transfer, our bank details as follows:

Bank Name :Overseas-Chinese Banking Corporation Ltd  
Account Name :Joo Hak Kee Auto Pte Ltd  
Account No :647-245505-001  
Bank Code :7339  
Branch Code :647  
Swift Code :OCBCSGSGXXX



This is an auto-generated document. No Signature is required.



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard, Suntec City Tower Two #42-01B  
Singapore 038989

E-mail: [gears-support@shift-technology.com](mailto:gears-support@shift-technology.com)

GST Registration: M400017735

## TAX INVOICE

Date of Request: 06/11/2024

**Your Ref No: SMK7972L**

Dear Sir/Madam,

Date of Accident: 31/10/2024 16:00 (SGT)

Vehicle No: SMK7972L

Place of Accident: Paya Lebar Rd, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
<b>SLP185Z</b>	Paya Lebar Rd, Singapore	(31.00 )	1	(28.44 )
GST Amount				(2.56 )
Total Amount Due (GST Inclusive)				(31.00 )

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.



**TAX INVOICE**

Provider : TIMOTHY TAN

Invoice No. MP213802  
Invoice Date : 01-11-2024

HO WAI LOON KELVIN  
46 CEYLON ROAD, #05-06, BELLEZZA @ KATONG, 429634

Item Name	Quantity	UOM	Total Price
Cogesic Max Cream 25g	1	TUBE	\$8.50
ACUGESIC Tramadol Capsule 50mg	10	CAPSULE	\$15.00
Anarex (Orphenadrine 35mg/Paracetamol 450mg)	20	TABLET	\$10.00
Probitor (Omeprazole) Cap 20mg	7	CAPSULE	\$7.70
Consultation	1	EA	\$25.00
Subtotal:			\$66.20
9% GST:			\$5.96
Total:			\$72.16
Amount Paid:			\$72.16

Receipt No.	Payment Date	Paid Amount	Payment Mode	Remark	Company
RT-MP030775	01-11-2024	\$72.16	NETS		

All cheques should be crossed & made payable to

**"MP MEDICAL PTE. LTD."**

Paynow to UEN: 202219547C

For safety reasons, medications sold are non refundable and non exchangeable.



fund services are only  
at Bedok, Eunos, Outram  
gg+  
in

MEDILINE WEI MIN CLINIC @ MARINE PARADE  
81 Marine Parade Central, #01-634, Singapore 440081

1doc+  
MMP

MEDILINE HEALTHPLUS PTE. LTD.  
81, MARINE PARADE CENTRAL, #01-  
634, MARINE PARADE PROMENADE,  
Singapore 440081  
UEN: 200917098E

GST Reg No. 200917098E

### Tax Invoice

HING CHEW LUAN (XXXX0921F)  
46 CEYLON ROAD 05-06  
Singapore 429634  
Date & Time: 31 October 2024, 16:48  
Attended By: DR PETER GOH MIN YIH

Invoice No.: INV-P20241031000027  
Order No.: M20241031000108  
Receipt No.: PAY-20241031000218

Item(s)	Quantity	Description	Amount
1.(CP) VOREN Gel [Diclofenac Sodium] 10mg/g 20g	1.0 TUBE	VOREN GEL 20GM ANALGESIC ANTI-INFLAMMATORY (NSAIDS)	\$7.50
2.1. Fam Med Consultation	-	-	\$62.00
3.(CP) ALVOGEN ETORICOXIB 120 MG 10s	1.0 BLISTER PACK	ETORICOXIB 120 MG	\$20.00
Summary			Amount
Subtotal			\$89.50
9% GST			\$8.06
Total Payable (Inclusive GST)			\$97.56
Paid With NETS			\$97.56
Balance Due			\$0.00

Serviced by MEDILINE WEI MIN CLINIC @ MARINE PARADE, 81 Marine Parade Central, #01-634,  
Singapore 440081  
This is a computer generated invoice which does not require a signature

Radiographer Initial: \_\_\_\_\_



Claim Audit

AUDIT TRAIL				
No.	On	Audit	Remarks	By
1	07 Nov 2024 15:43	Clm Dtl Modified	Claimant's Name: -> HO WAI LOON, KELVIN. Claimant's ID: -> SXXXX402J.	[A] HOW MEI KWAN
2	07 Nov 2024 15:43	Clm Veh Model Changed	(206393) HYUNDAI AD AVANTE 1.6 GLS S (A).	[A] HOW MEI KWAN
3	07 Nov 2024 15:43	Clm Created	Reg No: SMK7972L. Acct Date: 2024/10/31. Claim Type: TP. Insurer: India International Insurance Pte Ltd (HQ). TP Insurer: Income Insurance Limited (HQ). Workshop: Joo Hak Kee Auto Pte Ltd (HQ)	[A] HOW MEI KWAN
4	07 Nov 2024 15:43	Adj Co Assigned	LKK Auto Consultants Pte Ltd (HQ):	[A] HOW MEI KWAN
5	07 Nov 2024 15:43	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/11/18	[A] HOW MEI KWAN
6	07 Nov 2024 15:43	Adj Mandate Set	Approved:0.00.Reinsp:Adj decides.	[A] HOW MEI KWAN
7	07 Nov 2024 15:45	Adj Adjuster Assigned	[None] -> MARCUS CHUA	[A] HOW MEI KWAN
8	08 Nov 2024 13:58	Clm Dtl Modified	Insured Name: -> LION CITY RENTALS PTE LTD. Insured ID: -> 201504621K.	[A] HOW MEI KWAN
9	17 Dec 2024 11:07	Adj Mandate Request	Cur.Req:0.00:LIABILITY UNCLEAR. NO VIDEO FROM TP. PLS ADVISE IF ANY VIDEO FROM I	[A] CHEW HSIAO TONG
10	18 Dec 2024 09:08	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2024/11/18. Mandate Remarks: Yes, insured have video footage. Liability is clear in TP favour. Pls proceed with DS. Thank you.	[I] Loganathan S/O Agoram
11	18 Dec 2024 09:08	Adj Mandate Set	Approved:0.00:Yes, insured have video footage. Liability is clear in TP favour. Pls proceed with DS. Thank you.	[I] Loganathan S/O Agoram
12	28 Feb 2025 16:46	Label Added	(30653):Direct Settlement.	[A] CHEW HSIAO TONG
13	17 Mar 2025 08:25	Adj Im. Advice Submitted	Next Rpt:Final Rpt.Due Date:2024/11/18	[A] CHEW HSIAO TONG
14	21 Mar 2025 10:29	Adj Rpt Initiated		[A] Elaine Kuan Hwa Meen
15	21 Mar 2025 10:29	Clm Dtl Modified	Claim Conclusion: -> 3.	[A] Elaine Kuan Hwa Meen
16	21 Mar 2025 10:29	Clm Dtl Modified	JPJ Reg. Date: -> 2019/04/25.	[A] Elaine Kuan Hwa Meen
17	21 Mar 2025 10:29	Clm Details Notified		[A] Elaine Kuan Hwa Meen
18	21 Mar 2025 14:32	Adj Mandate Request	Cur.Req:6108.72:Liability: 100% *Quantum: \$ 6,108.72 (all-in). Pls refer to adjuster report for details. *For your approval please	[A] CHEW HSIAO TONG
19	21 Mar 2025 16:20	Adj Mandate Set	Approved:6108.72.	[I] Priya

Date From

Date To

Audit TypeNone

Go

ACTIVITY

[28/02/2025 16:46] CHEW HSIAO TONG:

Dear Hsiao Tong,

Kindly arrange survey for the above mentioned vehicle on the 11/03/2025 after 11am

Thanks & Best Regards,

Yvonne Ang (Ms)

Joo Hak Kee Auto Pte Ltd

Merimen Billing for this case - Transaction History								
Bill Ref No	Bill Date	Bill Type	Acc Type	Acc Name	Co Name (Branch)	Ref 1	Ref 2	Amount
3268929	08 Nov 2024 09:33:16	TP Case (Insurer)	Motor	LKK Auto Consultants Pte Ltd	India International Insurance Pte Ltd (HQ)	SMK7972L	SLP185Z	12.00
3350666	17 Mar 2025 08:25:54	OD/TP Case (Adjuster)	Motor	LKK Auto Consultants Pte Ltd	LKK Auto Consultants Pte Ltd (HQ)	SMK7972L	SLP185Z	12.00