

Progressive Car Care Pte Ltd

(Co. Reg. No. 201006949C)
Blk 3022A Ubi Road 1 #01-45/ 46 S408716
T: +65 6741 5336 | F: +65 6741 7208
E: claims@procarcare.com.sg
W: www. procarcare.com.sg

OUR REF: TP 1124-8343

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Ro City House Singapore 068877

Attn: Motor Claims Department

Dear Sir,

ACCIDENT INVOLVING VEHICLE: SLW8834U & SHA6935M ON 06.11.2024

We are the authorized repair workshop for the owner of motor vehicle no: SLW8834U, which was involved in the above captioned accident with your insured vehicle: SHA6935M. The vehicle owner has requested and authorized us to assist him in presenting the claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

		\$ 5,919.00
02)	Reimbursement - Loss of Rental (02 days x \$180/days)	\$ 360.00
01)	Cost of Repair (incl gst)	\$ 5,559.00

We enclosed herewith the following documents to support the claims:-

- a) Letter of Authorisation / GIA report(s) / Insurance Certificate, etc...
- b) Final Tax Invoice / Car rental No 8812

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

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.

Thank you Yours faithfully

Annie

Progressive Car Care Pte Ltd

Email: claims@procarcare.com.sg



Date

27/11/2024

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Our Ref : TP 1124-83	43				
LEE TECK SIANG	S7518970B Nric No				
Residing atOwner o					
\$1W883411	owner ofowner owner ow				
Blk 3022A Ubi Road 1 #01-45	/46 Singapore 408716 to resolve the above matter.				
In respect of this authorization	, I / We confirmed to accept whatsoever settled or agreed by them				
and also agreed that all Payme	ents include Loss of Use to make in favour of				
PROGRESSIVE CAR CARE F	PTE LTD.				
I / We am/are fully aware that a	all settlement made in respect of the accident occurred on				
06/11/2024 Along / at	BEDOK NORTH DRIVEwill be full and				
Final discharge of the claims in	clusive of damages, loss of use etc.				
h					
SIGNATURE OF OWNER					

Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716

TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg

GST REG NO: 201006949C Company Reg No: 201006949C

MS FIRST CAPITAL INSURANCE LIMITED

6 Raffles Quay #21-00

Singapore 048580

Tel: 62222311

Attn: Motor Claim Department \ FIRST

CAPITAL

Your Ref No: TP 1124-8343 Claim Type: Third Party

Accident Date: 06 November 2024

TP Veh Reg No: SHA6935M

Claim No: EST1512010 No: PS1509035

Date: 27 Nov 2024
Policy No: MT/01180444
Veh Reg No: SLW8834U

Make/Model: INFINITI Q50 2.0T A/T

(R18) EU6 NAV

Chassis No: JN1BCAV37Z0530046

Engine No: 274AE066318A Reg. Date: 07 Mar 2018

Final Repair Bill: SLW8834U

	Description	Unit Price	Quantity	List Price SGD	Amount SGD
1	Others COST OF REPAIR-	5,100.00	1 UNIT	5,100.00	5,100.00

Total 5,100.00
Add GST @ 9% 459.00

Total Amount Payable SGD 5,559.00

SINGAPORE DOLLAR FIVE THOUSAND FIVE HUNDRED FIFTY NINE ONLY

Fax: 62223547

PROGRESSIVE CAR CARE PTE LTD

BIK 3022 FO Progressive Car Care Pte Ltd

Singapore Sive 16 or Care Pte Ltd

Tel: 6741 5366 Fax: 6741 7208

Email: claims@procarcare.com.sg



EXPRESS RENTAL

OFFICIAL RECEIPT

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6741 5336 (2 Lines) Fax:6741 7208

No: 6780

Date: 21 11 2024

Received from LEE TECK SIANG

THREE HUNDRED AND SIXTY ONLY

being payment of _

the sum of Dollars

RA 8812 SEM34489

Cash/Cheque No.

All receipts subject to the clearance of cheque.

EXPRESS RENTAL

360

Authorised Signature



PRESS RENTAL OG GIA ZEM ZEM

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6741 5336 Fax: 6741 7208

RENTAL AGREEMENT NO: 8812

HIRER'S PARTICULAR Name : LEE TECK SIANG Address : BUK 505 BEDOIL RESERVOIR ROAD # 01-90 S	ed and epid on the date sine Rental 1.	GUARANTOR / ADD. DRIVER September of this vertex of the vertex of vertex of the vertex of		
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Pass Date: Class: Birth Date: Age: Co. Name/ Address:	of hire, as the case may b	Pass Date: Class: Class: Colored Colo		
Decupation: Occupation: Occupation O		The sevent that the whitele or any part threed is red. or framaped due to any collision couldn't expensing of any of the properties of the Secretary and the term of the sevent that the whitele page of the Secretary or the Secr		
RENTAL CHARGES Hourly @\$ per hour Daily @\$ per day Weekly @\$ per week Monthly @\$ per month SUB-TOTAL Deposit	Or serve \$8 non has a serve \$8 non has a serve \$3.6 C. Short O O O O O O O O O O O O O O O O O O O	METHODS OF PAYMENT Cash: Cheque No.: Credit Card Type: Bill to Company: Date Payment Collected:		
TOTAL CHARGE	nesserique al ac tosoxo bi osmeti so utum esser una ost S\$	Payment Collected: By: XCESS CLAUSE excess for collision / damage / fire & theft for the first party excess for collision / damage / fire & theft to third		
CHECK OUT Date Out 9 24 Time Out 044	tendered in attending to repa grandered in attending to specified in clause 15.2.	CHECK IN Date In 21 11 24 Time In 17-3		

I have read the terms & conditions on overleaf of this rental agreement. I acknowledge receipt of vehicle in good condition plus accessories and if I opt to pay by credit/charge card, my signature here is to deemed to have been made on the application credit card charge slip. I am aware that Express Rental may have to take necessary steps to contact my employer in order to qualify me as a hirer.