國際汽車維修 KT MOTORWERK

Blk 3012 Bedok Ind. Park E #01-2020 Singapore 489978 (Bedok North Ave. 4) Tel: 98287487 Fax: 6448 5177 Email: ktmotorwerk@hotmail.com Reg. No.: 53373462B

Telephone: 98287487

Email: ktmotorwerk@hotmail.com

12/03/2025

Our Ref: SJG3646L

CHINA TAIPING INSURANCE(SINGAPORE) PTE LTD

Motor Claims Department

3 ANSON ROAD,#16-00,SPRINGLEAF TOWER S(079909)

Dear Sir/Mdm

ACCIDENT INVOLVING SJG3646L AND SJU6761T ALONG EAST COAST PARK ON 4 NOV 2024 AT 1654HRS

Please refer to the above mentioned accident.

We are v	vriting in on the behalf of LOH K	OK KEONG AL	VIN	
the registered owner of motor vehicle number		SJG3646L	whi	ch was involved in the above accident.
We are in	sJU6761T As a result of which	ed solely and com h, our client have	oletely by the neg suffered loss and	gligence of your insured's vehicle and expenses.
We are in	nstructed by our client to claim for:			
1.	Cost of Repair (Agree with Surveyor)	S	4,600.00	
2.	Rental (8days x \$120.00)	S	960.00	
3.	Search Fee	\$	27.25	
TOTAL	AMOUNT	\$	5,587.25	

We enclsoed hereby the following documents for your consideration:

- (A) Final Repair Bill
- (B) Rental Bill
- (C) Search Fee
- (D) Letter of Authority
- (E) Discharge Voucher

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

JOHN

Mobile: 98287487

Email: ktmotorwerk@hotmail.com

"My execution of thie Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

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64485177

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FINAL REPAIR BILL

Date:

12/03/2025

CHINA TAIPING INSURANCE(SINGAPORE) PTE LTD

Motor Claims Department

3 ANSON ROAD,#16-00,SPRINGLEAF TOWER

S(079909)

Vehicle Number:

SJG3646L

Make/Model:

KIA CERATO

Date of Accident:

04/11/2025

Cost of Repair (Recommended By Surveryor)

S

4,600.00

GRAND TOTAL

4,600.00 \$

ISSUED BY

Mr John

Mobile:98287487

Email: ktmotorwerk@hotmail.com

RENTAL AGREEMENT



55 SERANGOON NORTH AVENUE 4 S(555859)

RECOVERY PLEASE CONTACT

JANELL 81450022

XAVIER 81448833

ANDY 81448811

AMBER 81448822

SIN

TP

Date :

Company Name

Company Address

Hirer's Name LOH KOK KEONG ALVIN

Hirer's Address BIK449B, BUCIT BATIOK WEST AVE 9, 411-86, SINGAPORE GEZULLA

NRIC/Passport No. 58766886B

Country Of Issue Issue By

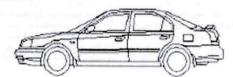
F8911810C: BOD

Driving License No. Local Contact

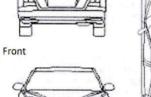
Email:

PLEASE TAKE PHOTO OF CAR BEFORE DRIVING OFF AND SEND TO RESPECTIVE SALE PERSONNEL

Left Side Back









VEHICLE DETAILS

Model MAZDA 3 Licence Plate SNS 2584C

Colour BLACK

Decal

YES - NO

* Rates do not include Petrol.

Taken

E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

Return

E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

* Every 1/8 of petrol used is chargeable @ \$20 nett.

Remarks: **RENTAL DETAILS**

Right Side

Start Date 6/11/2024

Start Time

2.00pm

Return Date 14(11/2024

Return Time 2.30pm

SALES INVOICE	RATES	QTY	TOTAL
Rental Amount	\$120.00	7	\$960.00
Additional Driver			4 ,00
MALAYSIA			4-09
CDW	and the second section of the		
Total Cost Of Rental	\$ 960.0	00	

DEPOSIT



UEN: 202418284G

CASH

REMARKS:

Hirer's Signature

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

05 Nov 2024 / 18:30:36

Receipt Date/Time: 05 Nov 2024 / 18:30:36

Tax Invoice/Receipt

Receipt No.: ITNET-00000-241105-003999

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 - SJU6761T As at 04 Nov 2024/16:54:00 Insurance Co: CHINA TAIPING INSURANC Insurance Enquiry - SJU6761T	E (SINGAPORE) PTE LTD			
Enquiry Fee 20241105183010972105		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			
	DICNV20241105183011244882	SGQ	R(PayNow)	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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LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. STG3646L AND STU67617						
AT/ALONG CAST COAST PARK						
ON 4 DAY NOV MONTH 2	OF YEAR					
a) I/We, the owner of vehicle no. STG3646L repair to the said vehicles.	hereby instruct and authorize you to commence					
b) You are further authorized to appoint solicitors instructions as if the appointment are given by me against third party driver and/or his insurers includir Court in my/our name against the third party.	us with respect to the conduct of my/our claims					
 You have my/our full authority to instruct my/our party and/or his insurers on such terms as you de 	You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement					
 d) Upon resolving my/our claim, you are authorized to a professional cost and disbursements for acting for m 	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 relieve payment of the balance of the					
e) In the event that, I/we am/are required to attend a						
f) In the event that my/our claim against the third party	y and the state of					
proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors. g) If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any loses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to 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.					
Dated this day Nov month	year					
Signature :	Company Stamp					
Name: LOH KOK KEONG	ALVIN					
NRIC/ROCNO. : 28706886B						
Address : BLK 449B BUKIT B	ATOK West AVR9					
#11-86, SINGAPORE 652	Yua 'L					

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DISCHARGE VOUCHER

ACCIDENT INVO ALONG <u>CAS</u>	LVING <u>SJG 3646L</u> AN T COAST PARK	ND <u>\$JU67617</u> ON	4/11/202
MOTORWERK, m repaired to my sat	y vehicle bearing registration isfaction and acceptance. And MOTORWERK shall be in full in respect of the damage	number SJG 3646L, I agree that the payment of discharge of all claims under	which has been f the account for
Signature :	A. Just	*	
NRIC/Co . Re g.:	S8706886B		
Date :	74/11/2024		
Company Stamp: (if applicable)			

(*Based on final settlement from insurance)