

Yr Ref : SNM24D206480 (SLD72D)

Our Ref : GBL4446J

Without Prejudice

22ND NOV 2024

Attn: Motor Claim Dept

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
3 ANSON ROAD
#15-00 SPRINGLEAD TOWER
SINGAPORE 079909

Dear Sir/Mdm,

Accident involving GBL4446J & SLD72D on 17/11/2024 12:30hrs along Simei Road

We refer to the above said accident.

We enclosed herewith relevant document as stated below:-

1. Accident Report
2. Final Repair Bill
3. Letter of authority
4. Certificate of insurance
5. Driver IC & DL
6. LTA search receipt

As instructed, we are claiming the following as stated below:-

1. Cost of Repair	S\$	1,199.00
2. Loss of Use (S\$ 200 x 2 days)	S\$	400.00
3. LTA search fee	S\$	27.25
Total :	S\$	1,626.25

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to here from you soonest.

Thank you.

Best Regards,



Susan Tan

R & S AutoClaim Pte Ltd

Tel : 6264 7001 ext : 110 Fax : 6264 7002

Email: rnsautoclaim@rnseng.com.sg

Tax Invoice

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909
Tel: 68396111
Fax: 62221033
Attn: MOTOR CLAIM DEPARTMENT

INVOICE NO. : IV.24110012
DATE : 22-11-2024
TERMS : Progress Claim
REF NO. :
JOB NO. :

VEHICLE NO. : GBL4446J

CHASSIS NO. : JTFAT35Y70K216693

MODEL NO. : TOYOTA DYNA 150 5MT

DATE OF ACCIDENT : 17/11/2024

	DESCRIPTION	ITEM	UNIT PRICE	AMOUNT
1	LUMP SUM REPAIR	1	1,100.00	1,100.00

Amount	1,100.00
9% GST	99.00
Total SGD	1,199.00

Sum of Singapore Dollars One Thousand One Hundred Ninety Nine Only

Bank Details:-
Bank Name :- UNITED OVERSEAS BANK
Account Name:- R & S AUTOCLAIM PTE LTD
Account Number :- 387-313-227-0
Bank Address :- 1 FARRER PARK STATION ROAD
#01-13 CONNEXION SINGAPORE 217562
Bank Code :- 7375
Branch Code :- 332
Swift Code :- UOVBSGSG
PayNow - UEN :- 202245519N

R&S Autoclaim Pte. Ltd



Authorised Signature

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 Nov 2024 / 11:43:45

Receipt Date/Time : 18 Nov 2024 / 11:43:45

Tax Invoice/Receipt

Receipt No. : ITNET-00000-241118-001623

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 - SLD72D

As at 17 Nov 2024/12:30:00

Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

1 Insurance Enquiry - SLD72D
Enquiry Fee
20241118114307395968

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

DICNV20241118114307695528

SGQR(PayNow)

27.25

Total

27.25

Cash Change

0.00

Tendered Amount

27.25

Excess Refundable Amount

0.00

62L4446J

DOB: 17/11/2024

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.

LETTER OF AUTHORISATION

RE: ACCIDENT INVOLVING VEHICLE NO.: 6BL4446J 2 SLD72D
ALONG Simei Road ON 17/11/2024 @ 12:30hrs

I/We BIG-FOOT LOGISTICS PTE LTD NRIC/Passport No.: 199500061H of 8 JOO KOON ROAD, SINGAPORE 628972 the owner of vehicle no. 6BL4446J hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately,

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are Allianz Insurance Singapore Pte Ltd

Policy No.: SP203177961B

Date

Expiry Date: 27 Aug 25

Excess:

X



Owner's Signature/Co's stamp (if applicable)



Witness Signature/Name

日昇 R & S Autoclaim Pte Ltd

GST & Co Reg No. : 202245519N
Tel : (65) 6264 7001
Fax: (65) 6264 7002
Email : rnsautoclaim@rnseng.com.sg
Address : No.13 Pioneer Sector 1,
Singapore 628424

Attn: Motor Claims Dept

China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road #1500

Spring leaf Tower

Singapore 079909

Dear Sir/Mdm,

ACCIDENT ON 17/11/2024 @ 12:30hrs

INVOLVING VEHICLE No.: 6BL4446J & SLD720

ALONG Simei Road

I/We the registered owner/driver of vehicle No. 6BL4446J which was involved in the above accident with motor vehicle No. SLD720 insured by you.

I/We also hereby authorise that any payment due to me/us from the aforesaid claim be paid to **R&S Autoclaim Pte Ltd**.

I/We hereby indemnify **R&S Autoclaim Pte Ltd** against all claims and/or damages which may arise from all action taken for and on my/our behalf.

I/We hereby affirmed that above-mentioned statement to be true and correct.

Yours faithfully,

X



Owner Signature

(Company's stamp if applicable)

Name in Full : BIG-FOOT LOGISTICS PTE LTD

NRIC No. : 199500061H

Address : 8 JOO KOON ROAD, SINGAPORE 628972