

09.01.2025

OUR REF : TP 1124-8376

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Road #16-01
City House
Singapore 068877

Attn: Motor Claims Department

Dear Sir,

ACCIDENT INVOLVING VEHICLE: SMJ5532S & SHD7237Y ON 28.11.2024

We are the authorized repair workshop for the owner of motor vehicle no: **SMJ5532S**, which was involved in the above captioned accident with your insured vehicle: **SHD7237Y**. 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.

01)	Cost of Repair (incl gst)	\$	5,722.50
02)	Reimbursement - Loss of Rental (10 days x \$150/days)	\$	1,500.00
		\$	<u>7,222.50</u>

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 8822

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



PROGRESSIVE
CAR CARE PTE LTD

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

Date : 29/11/2024

Our Ref : TP 1124

I / We Siddhartha Sanyal Nric No 578782425

Residing at #08-03, 2 Simei Rise owner of

Vehicle No SMT5532S hereby authorize **PROGRESSIVE CAR CARE PTE LTD** at

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 Payments include Loss of Use to make in favour of

PROGRESSIVE CAR CARE PTE LTD.

I / We am/are fully aware that all settlement made in respect of the accident occurred on

slip road Along / at Exit 3B (PIE Changi) for will be full and
Tampines Avenue 2

Final discharge of the claims inclusive of damages, loss of use etc.

Siddhartha

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

Fax: 62223547

Attn: Motor Claim Department \ FIRST
CAPITAL

Your Ref No: TP 1124-8376

Claim Type: Third Party

Accident Date: 28 November 2024

TP Veh Reg No: SHD7237Y

Claim No: EST1512095

No: PS1509111

Date: 09 Jan 2025

Policy No: P10708124R02

Veh Reg No: SMJ5532S

Make/Model: MITSUBISHI

OUTLANDER 2.0 CVT

Chassis No: GF7W0600635

Engine No: 4J11AC5069

Reg. Date: 12 Mar 2019

Final Repair Bill: SMJ5532S

Description	Unit Price	Quantity	List Price SGD	Amount SGD
Others				
1 COST OF REPAIR-	5,250.00	1 UNIT	5,250.00	5,250.00

Total 5,250.00

Add GST @ 9% 472.50

Total Amount Payable SGD 5,722.50

SINGAPORE DOLLAR FIVE THOUSAND SEVEN HUNDRED TWENTY TWO AND CENTS FIFTY ONLY

For 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

AUTHORISED SIGNATURE

RENTAL AGREEMENT NO: 8822

HIRER'S PARTICULAR Name : <u>SIDDHARTHA SANYAL</u> Address : <u>2 SIMEI RISE # 08-03</u> <u>(528800)</u> NRIC No : <u>S7878242J</u> Tel (R) : <u>81889327</u> H/P : <u>81889327</u> Off : _____ Licence Pass Date : _____ Class : <u>3</u> Birth Date : _____ Age : _____ Co. Name/ Address : _____ Occupation : _____		GUARANTOR / ADD. DRIVER Name : _____ Address : _____ NRIC No : _____ Tel (R) : _____ H/P : _____ Off : _____ Licence Pass Date : _____ Class : _____ Birth Date : _____ Age : _____ Co. Name/ Address : _____ Occupation : _____																						
RENTAL CHARGES <table style="width:100%;"> <tr> <td>Hourly @\$</td> <td>per hour</td> <td></td> </tr> <tr> <td><u>10</u> Daily @\$ <u>150</u></td> <td>per day</td> <td><u>1500</u></td> </tr> <tr> <td>Weekly @\$</td> <td>per week</td> <td></td> </tr> <tr> <td>Monthly @\$</td> <td>per month</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUB-TOTAL</td> <td></td> </tr> <tr> <td colspan="2">Deposit</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">TOTAL CHARGE</td> <td><u>1500</u></td> </tr> </table>		Hourly @\$	per hour		<u>10</u> Daily @\$ <u>150</u>	per day	<u>1500</u>	Weekly @\$	per week		Monthly @\$	per month		SUB-TOTAL			Deposit			TOTAL CHARGE		<u>1500</u>	METHODS OF PAYMENT Cash : _____ Cheque No.: _____ Credit Card Type: _____ Bill to Company: _____ Date Payment Collected: _____ Payment Collected: By: _____	
Hourly @\$	per hour																							
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SUB-TOTAL																								
Deposit																								
TOTAL CHARGE		<u>1500</u>																						
INSURANCE EXCESS CLAUSE																								
Hirer is responsible for the first S\$ <u>3000</u> excess for collision / damage / fire & theft for the first party (I.e. EXPRESS RENTAL'S) vehicle and also first S\$ excess for collision / damage / fire & theft to third party's vehicle for each and every accident / damage.																								
CHECK OUT Date Out <u>29/11/24</u> Time Out <u>1150</u>		CHECK IN Date In <u>09/12/24</u> Time In <u>1453</u>																						

HIRER'S DECLARATION

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.

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HIRER'S SIGNATURE

EXPRESS RENTAL



EXPRESS RENTAL

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

OFFICIAL RECEIPT

No: **6791**

Date: 9/12/2024

Received from SIDDHARTHA SANYAL

the sum of Dollars ONE THOUSAND AND FIVE HUNDRED ONLY

being payment of RA8822 / SKD5891K

\$ 1500

Cash/Cheque No.

All receipts subject to the clearance of cheque.

EXPRESS RENTAL

Authorised Signature