



**DICKSON GROUP**  
Your Trusted Automotive Solutionist

DICKSON AUTO CARE CENTRE PTE LTD  
29 UBI ROAD 4, DICKSON AUTO CENTRE  
SINGAPORE 408619  
TEL: 6668 1122 | FAX: 6668 1123

Our Ref: SLM2680M\_161224  
Accident Date: 16-Dec-24

**27-Dec-24**

**ATTENTION:** MS First Capital Insurance Ltd  
Email: [motorclaims@msfirstcapital.com.sg](mailto:motorclaims@msfirstcapital.com.sg)

MS First Capital Insurance Ltd  
6 Raffles Quay  
#21-00  
Singapore 048580

**CLAIMANT: DICKSON AUTO CARE CENTRE PTE LTD**  
**ACCIDENT INVOLVING SLM2680M & SHD7066Z AT UBI RD 1 ON 16 DEC 2024**

We would like to claim damages against your insured in connection with a road accident involving our client's motor registration number and motor vehicle registration number driven by your authorised driver at the material time.

As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair (with GST) after surveyor final esti.	\$	1,253.50
2) Loss of rental \$100 X 2 (w GST)	\$	218.00
3) TP insurer enquiry	\$	2.18
<b>TOTAL:</b>	<b>\$</b>	<b><u>1,473.68</u></b>

A copy of each of the following supporting documents is enclosed:  
1) GIA report of our Insured

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within **14 days** of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within **8 weeks** of your receipt of this letter.

For any further enquiry, kindly contact us via email to [admin@dacc.com.sg](mailto:admin@dacc.com.sg) or call us at 6668 1122 directly.

Yours Faithfully,



Poon Heng Cheong  
Dickson Auto Care Centre Pte Ltd  
Deputy GM - Aftersales

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**Dickson Auto Care Centre Pte Ltd**

Address: 29 Ubi Road 4, Singapore 408619

Tel No: 6668 1122 Fax No: 6668 1123

24/7 Roadside Assistance: 6668 1129

Email: enquiry@dicksonautocarecentre.com.sg

GST Reg. No.: 201921404K Company Reg. No.: 201921404K

**Tax Invoice****MS FIRST CAPITAL INSURANCE LTD**

16 Raffles Quay #42-01

Hong Leong Building

Singapore 048581

Tel: 65073848

**Make** : NISSAN**Model** : QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR**Veh. No.** : SLM2680M

**Invoice No.** : INV24120756  
**Invoice Date** : 27/12/2024  
**Ref. No.** : WJ2412352  
**Terms** : COD  
**Service Advisor** : Choon Xiang  
**Invoiced By** : Mahirah  
**Current Mileage** : 137715 km

#	Description	Qty	UOM	U/P	Disc	Amt
1	COST OF REPAIR	1.00		1,150.00	0.00	1,150.00
2	BEING RENTAL OF VEHICLE SLJ9916D FOR THE PERIOD 23 DEC 2024 TO 24 DEC 2024 (2 DAYS)	1.00		200.00	0.00	200.00

**Remarks:** TP CLAIM

D.O.A: 16 DEC 2024

Transfer to bank account: DBS 072-021-5168

Paynow to company UEN: 201921404K

Subtotal : S\$ 1,350.00

GST 9.0% : S\$ 121.50

**Total : S\$ 1,471.50**

*I agree to the remarks and price as listed  
above and affirm that the goods are  
received in good condition.*

**For Dickson Auto Care Centre Pte Ltd**

(Customer's Signature and Company Stamp)

(Authorised Signature)

INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SHD7066Z

Date of Accident

16/12/2024 𠄎

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... MS First Capital Insurance Ltd

Period of Insurance ..... 01/01/2024 - 31/12/2024

Requested By ..... TANG CHOON XIANG (DICKSO...

Requested Date ..... 16/12/2024 17:39

Payment details

Request Amount: **S\$2**


GST Amount: **S\$0.18**

Total Amount Due (GST Inclusive): **S\$2.18**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

Tax Invoice							
<div></div> <div>www.chans.com.sg</div> <div>CHAN'S &amp; SONS ENTERPRISE</div> <div>Company Reg No:51936900M</div> <div>363 Sembawang Road, Goodlink Park,</div> <div>Singapore - 758379</div> <div>Email: admin@chans.com.sg</div>				Tax Invoice No: INV1201872024-12		Dated: December 27, 2024	
				Rental Agreement No: RA 017235 2024-12		Terms of Payment: Due upon receipt	
				Customer Reference: SLM2680M			
				Notes: SLM2680M			
Customer Details DICKSON AUTO CARE CENTRE PTE. LTD. NO.29 UBI ROAD 4 DICKSON AUTO CENTRE Singapore 408619				Executive Name:DICKSON SIANG			
S.No	Product	Description	From Date	To Date	No. of Periods	Price (SGD)	Amount (SGD)
1	SLJ9916D		2024-12-23	2024-12-24(INCL)	2	100.00	200.00
							200.00
GST 9% (9%)							18.00
Amount in words : Two Hundred Eighteen Singapore Dollar (SGD)					Total (SGD)		218.00
Declaration: Please make your cheques payable to : CHAN'S & SONS ENTERPRISE			For CHAN'S & SONS ENTERPRISE  This is a Computer generated document. No signature is required.				
Income Terms Terms							

## RENTAL AGREEMENT

RA 017235 2024-12

Hirer's Name <b>Ang Boon Hwee</b>		Date of Birth <b>22/8/86</b>	Passport/ Nric No. <b>S8623810A</b>	Nationality
Address <b>41 Sims Drive</b>		Occupation	Driving Licence No. <b>AS Above</b>	Date of Expiry <b>Life</b>
Postal Code <b>#04-257</b>		Contact No. <b>380041</b>	Mobile Phone No. <b>85476615</b>	
Joint Hirer's / Guarantor's Name		Date of Birth	Passport/ Nric No.	Nationality
Address		Occupation	Driving Licence No.	Date of Expiry
Postal Code		Contact No.	Mobile Phone No.	

## CHECK OUT

Date <b>23-12-24</b>	Time <b>9.10am</b>	Mileage <b>1</b> KM	E 1/4 3/4 F
Date <b>24-12-24</b>	Time <b>3.50pm</b>	Mileage <b>1</b> KM	Remarks

## CHECK IN

### IMPORTANT NOTES:-

- Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance.
- No refund will be given for vehicle that returns early.
- Own Damage Liability - First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- Third Party Liability - First \$2000 for any Third Party Accident Claim.
- Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience.
- Hirer is responsible for all parking fines & traffic summons.
- Extension:- One day's advance notice is required otherwise no extension will be allowed.
- Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- Vehicle returned after office hour will be charged to the next working day.
- Hourly extension is charged at 1/5 of the daily rate.
- As preventive maintenance, please check water & engine oil daily.
- Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle.
- Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed.

	UNIT		RATE (\$)	TOTAL (\$)
RATE	2	@	100	200.00
DISCOUNT				
GST @ 9%				18.00
TOTAL				218.00
EXTENSION				Inv 120187 2024-12
Dickson				
SLM2680M				
DEPOSIT (refundable) S\$				
CHANGED OVER FROM VEH.				DATE

We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.  
 We declare that all information given on this form is true and accurate.

*[Signature]*

Hirer's Signature



Joint Hirer's / Guarantor's Signature

*[Signature]*

for CHAN'S & SONS ENTERPRISE

VEHICLE NO. <b>SLJ9916D</b>	MODEL
FROM	RETURN

\*Estimate Date. For actual return see CHECK IN

OPERATING HOURS: MONDAY TO FRIDAY 8.30AM TO 5.00PM. SATURDAY 8.30AM TO 12.00PM. CLOSED ON SUNDAY & PUBLIC HOLIDAY



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## DISCHARGE VOUCHER

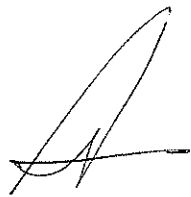
Name of Policyholder ANG BOON HWEE

Vehicle Number SLM 2680 M

Policy Number S1509 25522

Accident Claim Number SD0B74CG 0005

I/We hereby acknowledge having received from the under-mentioned repairers my/our above-stated vehicle which has been repaired to my/our satisfaction and I/we admit that the payment for such repairs by Dickson Auto Care Centre Pte Ltd is in full and final discharge of my/our claim under above-stated policy number in respect of damage caused to the said vehicle as a result of an accident that occurred on 16 day of Dec (month) 2024 (year).

x   
Signature (Insured)

24/12/24  
Date

Company Stamp :



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## LETTER OF AUTHORISATION

In the matter of an accident involving motor vehicles SLM 2680 M and SHD 7066 Z  
on 16 day of Dec (month) 2024 (year) along Ubi Rd 1

I/ We, Ang Boon Hwee the owner of vehicle registration number SLM 2680 M  
at the material time of accident hereby appoint Dickson Auto Care Centre to proceed with the repairs to the damages  
caused to my/our vehicle in the above accident in accordance with the recommendations and advice of the licensed  
motor surveyor appointed by the insurers or on my/our behalf.

I/ We authorise Dickson Auto Care Centre and/or its representative to submit and make any claims which I/ We may  
have against the other party/parties or alternatively under the insurance policy taken up by me/ us in respect of the  
cost of repair suffered by me/us arising from the accident, and to receive payment (such payment to be made by way  
of Cheque or online bank transfer in favour of Dickson Auto Care Centre Pte Ltd due to me/us in connection with and  
arising out of the above claim.

Dickson Auto Care Centre and/or its representative are hereby authorised as my attorney to execute and/or sign any  
documents/discharge vouchers regarding the above claim.

I/ We further confirm that the acceptance by Dickson Auto Care Centre of the settlement amount in respect of such  
claim shall constitute full discharge of my/ our claim in respect of such loss and damage.

I/ We hereby declare that all acts and documents done by virtue of this Letter of Authorization on my/ our behalf shall  
be good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by me/us  
in person.

Date: 24 day of 12 (month) 24 (year).

[Signature]  
Name & Signature  
(Insured/Owner)

NRIC No:

[Signature]  
Name & Signature  
(Dickson Auto Care Representative)