CARSMITH PTE LTD

Email: claims@carsmith.biz / info@carsmith.biz

Date: 09 July 2024 Your Ref: To Be Advised Our Ref: SMH8621J

INDIA INTERNATIONAL INSURANCE

64 Cecil St #04, #05 IOB Building Singapore 049711

Attn: Motor Claims Department

Dear Sir/Madam,

CLAIMANT: GRACE AUTO LEASING

PROPERTY DAMAGES CLAIMS AS A RESULT OF A ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES NO. SMH8621J AND GBM3323G ALONG TOWARDS QUEEN STREET JUNCTION ON 01.07.2024.

- 1. We act for <u>GRACE AUTO LEASING</u>, the owner of vehicle No. <u>SMH8621J</u> involved in the abovementioned road accident, in his claim for damages of the consequential property losses and expenses incurred as a result of the said accident.
- We are instructed that the accident was caused solely or contributed by your / your authorized driver's / your insured's authorized driver's negligent driving, use and/or management of motor vehicle No. GBM3323G.
- 3. Copies of the following supporting documents are enclosed herewith for your perusal: -

a.	Invoice Cost of Repair
b.	Invoice Rental Agreement / Loss of Use
C.	Invoice LTA Search

4. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows.

Cost of Repair \$3200 + GST \$288	S\$ 3,488.00
Pre-Inspection Days – 2 Days	S\$ 400.00
Rental Agreement / Loss of Use - 3 Days	S\$ 600.00
LTA Search	S\$ 27.25
Total	S\$ 4,515.25
	Pre-Inspection Days – 2 Days Rental Agreement / Loss of Use – 3 Days LTA Search

In compliance with the protocol, we have engaged your panel of surveyor for the damages claim to the said amount. Do refer to attachment and we hope to have an amicable settlement reply soon.

5. You may acknowledge receipt of this letter by email to: claims@carsmith.biz

Yours faithfully CARSMITH PTE LTD



CARSMITH PRIVATE LIMITED

PREMIER
8 KAKI BUKIT AVE 4 #04-34/35
Singapore 415875
+65 90910000
info@carsmith.biz

GST Registration No.: 201910097E

Tax Invoice

BILL TO

A2407-002-SMH8621J

INVOICE

5365

DATE TERMS

288.00

09/07/2024

DUE DATE

Due on receipt 09/07/2024

3,200.00

DATE	ACTIVITY	DESCRIPTION		QTY	RATE	AMOUNT
	LUMP SUM FOR REPAIR			1	3,200.00	3,200.00
THANK YOU			SUBTOTAL			3,200.00
			GST TOTAL			288.00
			TOTAL			3,488.00
COT CLIMMADY			BALANCE DUE			S\$3,488.00
GST SUMMARY		RATE		GST		NET

GST @ 9%

Company Registration No. 201910097E

Bank Account Details: DBS Bank: 07-2009261-9

PayNow:201910097E

All payments are transacted in Singapore dollars only.

All payments are non-refundable or exchangeable.

Thanks for your patronage.

Page 1 of 1

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 02 Jul 2024 / 14:38:25

Receipt Date/Time: 02 Jul 2024 / 14:38:25

Tax Invoice/Receipt

Receipt No.: ITNET-00000-240702-002551

Previous Receipt No.:

Previo	us Receipt No. :				
S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at Insura 1	t of Insurance Enquiry - GBM3323G 01 Jul 2024/18:05:00 ance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - GBM3323G				
	Enquiry Fee 20240702143718993332		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			
		20240702143733243	Direct Debit: eNETS Debit (Internet Banking)		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.

LETTER OF AUTHORISATION

To: CARSMITH PRIVATE LIMITED

RE: ACCID	ENT INVOLV	ING VEH	CLE NOS	- BWH 86 212	&	GBM 3323 G	
ALONG	Towards	Queen	Street	Junction			ON
F0.10_	2024.						

NRIC / Passport No.: 53387089 the owner of vehicle no SMH 86313
hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my / our request: -

- 1. I/We hereby irrevocably authorise you to demand, claim, settle (in any manner you deem fit), receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceedings, if necessary, in my/our name for the cost of repair and loss of use, etc and to appoint any solicitor to act for me/us in respect of the claim and all or 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 directly to you after deduction of their costs on a solicitor and client basis. I/We undertake to co-operate fully with you and my/our solicitors to see the claim to a successful conclusion.
- 2. If the third-party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim directly 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/our behalf.

3. 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.

4. I undertake to pay you the cost of repair of my vehicle and all costs, fees and expenses incurred by you in pursuing the claim on my/our behalf, in the event the contents of my accident report is untrue or inaccurate or not believed by the court.

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 is sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repair settled and related expenses, costs and disbursement incurred.

Date:	
Owner's Signature/Co's Stamp (if applicable)	Witness Signature/Name
Reg No. 7 A 53387089E S S S S S S S S S S S S S S S S S S S	
Date: Excess:	
Policy No. <u>DMHCSHA000244123</u> 00 Expiry Date:	
My/Our insurer is/are China Taiping Insura	ance (lingapore) Pte Ltd.

Attn: Motor Claims Department
Dear Sir / Madam,
RE: ACCIDENT INVOLVING VEHICLE NOS. SMH 86213 & GBM3333 G ALONG
Towards Queen Street Junction ON
01.07.2014.
I/We, the registered owner of vehicle registration no <u>GMH 86215</u> _ which was
involved in the above accident with vehicle no. <u>GBM 3323G</u> insured by
hereby authorize that any payment due to me/us from the above
said claim be paid to CARSMITH PRIVATE LIMITED.
I/we hereby indemnify CARSMITH PRIVATE LIMITED against all claims and/or damages
which may arise from all actions taken for or on my/our behalf.
Yours faithfully
O CE AUA O CO
Owner Signature (company stamp if applicable)
Name in Full:
NRIC / FIN / UEN No:
Address:

LETTER OF AUTHORITY

To:				
Dear Sirs,		×		
	VOLVING VEHICLE een Street Jun			ALONG
I hereby authorize for my property de Caromith Private	you to release the amage claim only to Limited	sum of \$ my (solicitor s, wo	being th	e settlement sum
Yours faithfully,	CE AUAOO CE SINIS			

Claimant's signature / company stamp (if applicable)