

Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: **(65) 6476 3333**
Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:

Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722

Tel: **(65) 6272 3892**
Fax: (65) 6270 8314

Co. Reg. 198904033G
GST Reg. M2-0088864-2

Our Ref : SKF8769B / T300724
Your Ref : CD/LPC24070088/Rma3
Date : 30 August 2024

Lonpac Insurance Bhd
300 Beach Road
#17-04/06 The Concourse
Singapore 199555
Attn: Motor Claims Department

BY EMAIL
WITHOUT PREJUDICE

Dear Sir/Mdm

ACCIDENT INVOLVING: **SKF8769B & SML1840T**
DATE OF ACCIDENT: **27 June 2024**
ALONG: **BOON LAY WAY**

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$	4,360.00
#Loss of Use (\$ x days)	\$	-
Loss of Rental (\$ 120.00 x 07 days) + 9% GST	\$	915.60
Loss of Income (\$ x days)	\$	-
LTA Fees	\$	-
Towing Fee	\$	-
Medical Fee	\$	-
Excess	\$	-
Grand Total	\$	5,275.60

Car date in: 2024-07-16
Car date out: 2024-07-23

Authorized Repair Days: **(TP/OD/WS/Recovery of Incidental Costs)**

Please pay the amount of **\$ 5,275.60** in favour of **MOVA AUTOMOTIVE PTE LTD.**
If you have any enquiries, please call Ms Suann @ 6262 3377 EXIT 0 or
email suann@moval.com.sg

Yours faithfully,
MOVA AUTOMOTIVE PTE LTD
For Claims Manager

Note: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

* This is a computer generated letter and does not need a signature.

To:

LONPAC INSURANCE BHD

SKF8769B, B.M.W., 216I GRAN TOURER
300 BEACH ROAD
#17-04/07 The Concourse
199555
Singapore

Job Site:

Work Order

Job No. : CBMW24070161

Date : 03/07/2024

Type : Accident Claim -
TP

Advisor : Junior

Time in : 23/07/2024 16:58

Time out :

Created : 23/07/2024 16:58

T	Job Description	Quantity	UOM	Unit Price	Amt
	Ad hoc				
M	COST OF REPAIR	1.00		4,000.00	4,000.00

Remarks:

ACCIDENT INVOLVING SKF8769B & SML1840T ON 27/06/24
TP - LONPAC

Subtotal	4,000.00
GST 9.0%	360.00
Total	4,360.00

TAX Invoice

31-Jul-24

Veh : SMM8131E
Prof : RK510082
RA : I15160
From : 16/7/2024
To : 23/7/2024

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LILY TANG SIEW HIE

Attention : Mova - claims Dept

Description	Qty	U.Price	Amount S\$
RENTAL CHARGES FROM 16/7/2024 TO 23/7/2024 HYUNDAI AVANTE SMM8131E RENTAL AGREEMENT : I15160 DRIVEN BY: LILY TANG SIEW HIE YOUR REF : SKF8769B	7	\$120	\$840.00



Non - GST amount \$840.00
GST 9% \$75.60
Total Amount \$915.60

Mova Automotive Pte Ltd

**MOVA**

AUTOMOTIVE PTE LTD

Website: www.mova.com.sg
Co. Reg. No.: 198904033G**Automotive Pte Ltd**

Main Office: No. 22 Jalan Kilang, Singapore 159419

Bukit Merah Branch:

Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122

Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792

Tel: (65) 6476 3333 Fax: (65) 6270 8314

24 Hours Breakdown Service: (65) 9799 8888

Bedok Branch: 219 Bedok Central #01-138, Singapore 460219

Tel: (65) 6604 7877

RENTAL AGREEMENT**RA NO.: I 15160**RK510082
No Malaysia

RENTAL DETAILS			INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	Avante	Vehicle No: SMM831E	Singapore	Malaysia	Signature
Date/Time Out:	16/7/24	11:00	S\$ 2500	S\$	C/S
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		Per Accident	Per Accident	
Date/Time In:	23/7/24	12:11	Charges		
Petrol Level In:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		Months @\$	Per Month	\$840.00
Change Over 1:	Date:	Initial:	Weeks @\$	Per Week	
Change Over 2:	Date:	Initial:	7 Days @\$120.00	Per Day	
KM Out: 925.79	KM In:		Hours @\$	Per Hour	
HIRER DETAILS			Sub-Total		
Named Hirer			Less Discount	%	
Name:	Lily Tan Siew Hie		Rental Charges		
Address:			CDW @\$	per day / week / month	
			PAI @\$	per day / week / month	
			Petrol Top-Up		
			Misc Charges		
Identity Card No:	S7873484A		GST	9%	\$75.60
Date of Birth:			Total		
Driving License:			\$915.60		
Country of Issue:			VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS	
Tel:	(HP) 9139 7351	(O)	Pre-Payment		
Nationality:			Downpayment and Deposit		
Effective Date:			Amount Refunded/ Due		
Additional Hirer			Signature of Refund		
Name:			Remarks:		
Address:			SKF8769B		
			Invoice No:	Kee	Ref. No:
Identity Card No:			Checked Out By:	Checked In By:	Checked By:
Date of Birth:					
Driving License:			Sales-In Charge:		
Country of Issue:			Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/>		
Tel:	(HP)	(O)			
Nationality:					
Effective Date:					

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/ credit card voucher given above. All above information given by me are true in connection to this agreement.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered as a day rental.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.

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POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SKF 8769 B and (Third Party's Vehicle No.) SML 1840 T on 27/6/24 along Boon Lay Way

BY THIS POWER OF ATTORNEY, *I/We, Wong Ling Chye
 _____ *NRIC/Passport No. S 7578970Z (Address)*
 _____ / _____

_____ a company incorporate in Singapore and having its registered office at (Address)* _____ owner of Vehicle Registered No. _____

_____ hereby irrevocably appoint MOVA AUTOMOTIVE PTE LTD, (MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be *my/our Attorney and in *my/our name(s) and on *my/our behalf to do all or any of the following :

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. _____ taken up by *me/us (subject to approval by my Insurance Company) in respect of the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by *me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as *my/our Attorney shall in MOVA absolute **discretion, deem fit.**
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of **MOVA AUTOMOTIVE PTE LTD** and to give a valid receipt and discharge thereof.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of MOVA.**

*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

*I/We further confirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

***IN WITNESS WHEREOF.** *I/We have hereunto to set *my/our hand and seal this day 16 of the month of 7, Year Two Thousand - 2024 (20 24).

Signed, Sealed & Delivered By

Wong Ling Chye x
 Customer's Name:
 NRIC No: S7578970Z
 Co's Rubber Stamp, where applicable.

MOVA's copy

*delete as appropriate.