



SPEEDWERKZ PTE LTD

ROC: 202127390C

Email: info@speedwerkz.biz

Add: 1 Kaki Bukit Avenue 6 #01-73 Autobay@Kaki Bukit Singapore 417883
+65 96195936

Letter Of Demand

Date : 2nd September 2024

Ref No.: SMR 6641L

To : **India International Insurance Pte Ltd**
6 Raffles Quay,
#22-00,
Singapore 048580

Thru : **LKK AUTO CONSULTANTS PTE LTD**

Attention: Motor-Claims Dept

Dear Officer-in-Charge

Case: Accident claim for vehicle GV 1607U & SMR 6641L DOA ON 18.07.2024

With reference to the above case.

Please find attached copies.

Invoice Reference SWIV24-0900242	S\$ 4,360.00
Loss Of Use (\$100.00 x 05 days)	S\$ 500.00
Authorization Letter	
Towing Fee	S\$
LTA Search Fee	S\$
Total Cost	S\$ 4,860.00

Your Faithfully,

Julie

E-mail: info@speedwerkz.biz



LETTER OF AUTHORISATION

To: **SPEEDWERKZ PRIVATE LIMITED**

RE: ACCIDENT INVOLVING VEHICLE NOS. SV 1607U & SMP 6641L
ALONG Pioneer Nath Rd ON
18.07.24.

I/We Koon Lian Trading Co NRIC / Passport No.: 24813700W
the owner of vehicle no. SV 1607U 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.

My/Our insurer is/are

Policy No. _____ Expiry Date: _____

Date: _____ Excess: _____



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



Witness Signature/Name

Date: _____

Attn: Motor Claims Department

Indica

Dear Sir Madam,

RE: ACCIDENT INVOLVING VEHICLE NOS. 6V 1607U & SMR 6641L ALONG
Pioneer North Rd ON
18.07.24.

I/We, the registered owner of vehicle registration no. 6V 1607U which was
involved in the above accident with vehicle no. SMR 6641L insured by
III hereby authorize that any payment due
to me/us from the above said claim be paid to **SPEEDWERKZ PRIVATE LIMITED**.

I/we hereby indemnify **SPEEDWERKZ PRIVATE LIMITED** against all claims and/or damages
which may arise from all actions taken for or on my/our behalf.

Yours faithfully



A handwritten signature in blue ink, appearing to be "Koon Lang", written over the company stamp.

Owner Signature (company stamp if applicable)

Name in Full: Koon Lang Trading Co

NRIC / FIN / UEN No: 24813700W

Address: 1001 Jalan Bukit Merah #05-18 s(159455)

LETTER OF AUTHORITY

To : III

Dear Sir,

RE : ACCIDENT INVOLVING VEHICLE NOS. 6V1657U & SMR6641L
along Pioneer North Rd on
18.07.24.

I hereby authorize you to release the sum SGD _____ being settlement
sum for my property damage claim only to my (solicitors, workshop)
_____.

Yours faithfully,



A handwritten signature in blue ink, consisting of stylized cursive letters.

Claimant's signature / company stamp (if applicable)