#### Yan (LKK Auto)

From: anna@falconair.com.sg

Sent: Tuesday, August 13, 2024 2:25 PM

Yan (LKK Auto) To:

LOD - TPC/SLE6228C/T1413 (YR REF:GBJ5708H) Subject:

Attachments: 20240813143530.pdf

"Without Any prejudice to any Personal Injuries"

Dear Sirs

We would like to submit our Letter of Demand as follows:-

COR : \$ 5,232.00

**RENTAL** 545.00 : \$

(incl W/END)

SEARCH FEE : \$ 2.18

Attached herewith are all the supporting documents for your Perusal and awaiting for your offer.

Thanks and regards, Anna Ng Falcon-Air Auto Services Pte Ltd (Tampines) Tel:67897997

#### FALCON-AIR AUTO SERVICES PTE LTD

CO. REG. NO.: 1995-01140-D GST REG. NO.: 19-9501140-D

FALCON-AIR

LONPAC INSURANCE BHD

300 BEACH ROAD #17-04 THE CONCOURSE

SINGAPORE 199555

Attn: MOTOR CLAIMS DEPT

Tel: 02-62507388

Tax Invoice

: TI800179

Date

13/08/2024

Vehicle No.

SLE6228C

Vehicle Model

AUDI Q2

Chassis/Eng#

.

Accident Date

18/07/2024

Claim No

Reference

Policy

10/0//2027

ItemQtyDescriptionUnit Price S\$Amount S\$1.1BEING LUMP SUM REPAIR<br/>(INCLUSIVE OF PARTS, PANEL BEATING, LABOUR AND SPRAY<br/>PAINTING)4,800.00

SINGAPORE DOLLAR FIVE THOUSAND TWO HUNDRED THIRTY TWO ONLY

 Sub Total
 S\$
 4,800.00

 GST @ 9%
 S\$
 432.00

 Total
 S\$
 5,232.00

Term

: 30

for FALCON-AIR AUTO SERVICES PTE LTD

#### **FALCON-AIR AUTO SERVICES PTE LTD**

(a subsidiary of Falcon-Air Holdings Pte Ltd)

Head Office: 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880/6458-0880 Fax: 6454-7862

**Branch :** Tampines St 93 Blk 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997

Website: www.falconair.com.sg E-mail: email@falconair.com.sg



### **TAX INVOICE**

**FA INVOICE: TP** 14599

Please quote full invoice number when making payment

V. A. Nr:	Vehicle Reg. Nr. 695	E	Model Type	Vios	Co. Reg. No.: 1988-04 GST Reg. No.: M2-008	
Rates/Remarks SLE 6228C	☐ Inc. GST ☐ exc. GST	Rental Perio		Agreed Return D	ate	
\$ Per Day \$ Per Month Plus First Km Free Per	\$ Per Week \$ , thereafter,	KM OUT		Date In O Ho Time/ Date Out Ho	050108	20,24
Chargeable at \$ Per Km  Hirer's Name		DRVN	Collision Damage Exces	s Reduction	☐ Accept	☐ Decline
Chua Jun	1: Benjam	in	\$ Per Day \$	Per Mth		D Scanic
Hirer's Address 249 Pa	sir Ris St	21	Personal Accident Insur \$ Per Day \$	rance Per Mth	☐ Accept	☐ Decline
# 09-12	S 1 210049	/	Rental Charge Computa	Rental Charge Computation		Cents
Co.Reg. No.  Tel. No (Res/HP/Pgr)  Fax. No.			Vehicle Hire			
Reference Contact	Tel. No	o. (Ofc)	5days	1	500	00
Driver's Name	D.O.B	01/95				
Driver's Address	1	1	CDER			
Tel. No. (Res/HP/Pgr)	Passport/I.C. Nr./Country	8930	PAI			
Driving Licence Nr. Ex	plry / Pass Date Issued		Delivery / Collection Fe	e		
Additional Driver's Name	D,b,B.	iy	Petrol			
Additional Driver's Address						
Tel. No. (Res/HP/Pgr)	Passport/I.C. Nr./Country		Sub-Total		500	00
Driving Licence Nr. Exp	olry / Pass Date Issued I	Ву	Add GST @ 9 %		45	00
Method Of Payment	☐ Cheque ☐ Card	☐ Bill Co	Total Net Charges	Incl. GST)	545	00
Details of Payment	Amount \$ Date	Rec'd by	*Less Total Prepayment/D	Deposit Rec'd		
			Balance Amount Du			next next to
			Refund Acknowledgeme		☐ By Credit Card	O Ry Cheque
			Received \$	3 <b>2, cas</b>	_	B by cheque
* Total Payment Received		***	Out By		By Hirer X	
Hirer is responsible for the first \$			Check In Station Computed By			
			Extension 1. 2. 3.			
			Remarks: Vehicle Out Remarks: Vehicle In			
				Δ		
- An			E 1/4 1/2 3/4 Indicate petrol level when vehicle is checked out			
Hirer's signature signifies acceptance additional terms and conditions).	of agreement. (Please read ove	erleaf for	FA RENTAL AGE	EEMENT NO	:TP 145	99

#### FALCON-AIR AUTO SERVICES PTE LTD

FALCON-AIR

CO. REG. NO.: 1995-01140-D GST REG. NO.: 19-9501140-D

LONPAC INSURANCE BHD

300 BEACH ROAD

#17-04 THE CONCOURSE

SINGAPORE 199555

Attn: MOTOR CLAIMS DEPT

Tel: 02-62507388

Tax Invoice

1 TP801176

Date

13/08/2024

Vehicle No.

SLE6228C

Vehicle Model

Mileage (Km)

PO/WO/RO#

Reference

Item	Qty	Description	Unit Price S\$	Dics S\$	Amount S\$
1.	1	BEING SEARCH FEE	2.00	0.00	2.00
		FOR VEHICLE GBJ5708H			
		DOA 18.07.2024			

SINGAPORE DOLLAR TWO AND CENTS EIGHTEEN ONLY

PAYNOW UEN 199501140DTP1

Customer's Signature/Co. Stamp

 Sub Total
 S\$
 2.00

 GST @ 9%
 S\$
 0.18

 Total
 S\$
 2.18

Term :

: C.O.D.

for FALCON-AIR AUTO SERVICES PTE LTD

#### **FALCON-AIR AUTO SERVICES PTE LTD**

(a subsidiary of Falcon-Air Holdings Pte Ltd)

Head Office: 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880/6458-0880 Fax: 6454-7862

**Branch**: Tampines St 93 Blk 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997

Website: www.falconair.com.sg E-mail: email@falconair.com.sg

#### INSURER ENQUIRY

# Find insurer

Vehicle reg. no.

GBJ5708H

#### **Date of Accident**

18/07/2024 🛗

Reset

#### % RESULT & RECEIPT

TP Insurer Enquiry
Insurance Lonpac Insurance Bhd
Period of Insurance01/06/2024 - 31/05/2025
Requested By Janet Lim (FALCON-AIR AUTO
Requested Date 18/07/2024 14:16

**Payment details** 

Request Amount: **\$\$2** GST Amount: **\$\$0.18** 

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

**General Insurance Association** 

Records Management Centre GST Registration No: **M400017735** 

https://www.gears.com.sg/insurer-enquiry



# AUTHORISATION TO ACT CUM DISCHARGE VOUCHER

## THIRD PARTY CLAIM

ywa, Chua Jun y	i Benjamin	the third party claimant") of 249
Pasir Ris St 2	1 # 09-127 8(5102	the third party claimant") of 249  (49) address), owner of SLE 6228C (vehicle No.)
		shop") to act for me/us with respect to my
		laim") for my vehicle No. SLE 6228C that
		(date) along BIL 822
Tampines St 8		(location)
involving Vehicle No/s GBJ	5708H ("the accident").	
I/we further authorize the work	shop to settle my/our above mention	oned claim in a manner that they deem fit and th
		ettlement of my claim with cheque's payment
being made in favour to the wor	rkshop ["FALCON-AIR AUTO SERVIC	ES PTE LTD").
I/we further acknowledge that a	iny settlement the workshop may re	each on my/our behalf is on a without prejudice
and without admission of liabilit	y basis insofar as the driver/owner/	insurers of the other vehicle/s is concerned.
Date this(&(day) of	July (Month) 20	24(Year)
Signed by "the third party"	"WITHOUT PREJUDICE to any	Signed by "the workshop"
CLAIMANT:	PERSONAL INJURIES"	WITNESS:
Signature:		Signature: TAMPINES
Name: Chua Jun Yi Address: 249 Pasiv Ri	Benjamin	Name:
Address: $\frac{249 \text{ Polity Res}}{409 - 127 \text{ S/s}}$	15721	Address: c/o BLK 9006 TAMPINES ST 93
		#01-200 S(528840)
NRIC No: \$950089.	3 (	NRIC No: