Mailing Address: 1 Kaki Bukit Ave 6 #01-47 AutoBay@Kaki Bukit Singapore HotLine: 9619 5936

Letter Of Demand

:18th February 2025

Ref No.: GBG 8637A

To

: AIG ASIA PACIFIC INSURANCE PTE LTD

78 Shenton Way

#07-16 AIG Building

Singapore 079120

: LKK AUTO CONSULTANTS PTE LTD

Attention: Motor-Claims Dept

Dear Officer-in-Charge

Case: Accident claim for vehicle GBA 5793H & GBG 8637A DOA ON 31.07.2024

With reference to the above case.

Please find attached copies.

Invoice Reference SWIV25-0200021	S\$ 2,398.00
Loss Of Use (\$100.00 x 3 days)	S\$ 300.00
Authorization Letter	
Towing Fee	S\$
LTA Search Fee	S\$ 27.25
Total Cost	S\$ 2,725.25

Your Faithfully,

Julie

E-mail: info@speedwerkz.biz



Tax Invoice

SPEEDWERKZ PRIVATE LIMITED (202127390C)

1 Kaki Bukit Avenue 6 #01-47 Autobay@Kaki Bukit Singapore 417883

Hp: 9619 5936 email: info@speedwerkz.biz

Date: 18.02.2025

Invoice #: SWIV25-0200021

AIG ASIA PACIFIC INSURANCE PTE LTD

78 Shenton Way #07-16 AIG Building Singapore 079120 Vehicle Number: GBA 5793H

Vehicle Make/Model : TOYOTA DYNA 150 M Chassis/Eng : JTFAT35Y403001329

Claim Number:

D.O.A: 31.07.2024

Mileage:

Remark: TP / GBG 8637A

ATT: MOTOR CLAIM DEPARTMENT

Q		Amount
*	LUMPSUM REPAIR	\$ 2,200.00
)		
	9%	198.00
	Total	\$ 2,398.00

Thank you for your business!

Make all checks payable to "SPEEDWERKZ PRIVATE LIMITED"

Paynow UEN to: 202127390C / UOB ACCOUNT NUMBER: 388-322602-8



LETTER OF AUTHORISATION

To: SPEEDWERKZ PRIVATE LIMITED

RE: ACCIDENT INVOLVING VEHICLE NOS. 6BA 5793H & 6BG 8637A ALONG OPEN SPALL CP & BLK44 TUBAN GARDING Rd 31.07.24	– ON
I/We <u>VUMNCERLED</u> NRIC / Passport No.: <u>1890029766</u> the owner of vehicle no. <u>6BA 5793H</u> hereby authorise you to commenter to the said vehicle forthwith. In consideration of you repairing my/our vehicle at many said vehicles.	nce
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 cooperate 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

Date:

Policy No. ______Expiry Date: _____

Date: _____Excess: _____

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

Witness Signature/Name

Attn: Motor Claims Department
Ale
Dear Sir Madam,
RE: ACCIDENT INVOLVING VEHICLE NOS. 68A 57954 & 6B6 8637A ALONG
Dan Space CPC BLK44 Chan ON
31-07-24
1 BN 57924
I/We, the registered owner of vehicle registration no. 684 57434 which was
involved in the above accident with vehicle no. SB6 86377 insured by
hereby authorize that any payment due
to me/us from the above said claim be paid to SPEEDWERKZ PRIVATE LIMTED.
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 Control
Owner Signature (company stamp if applicable)
Name in Full: Technocrafe Rutt
NRIC / FIN / UEN No: 1990038766
Address: 999 184 North *06-25 5(3/8993)

LETTER OF AUTHORITY

To: Alt
Dear Sir,
RE: ACCIDENT INVOLVING VEHICLE NOS. 684 5743H & 6136 8637A along Offn Space of BLK44 Worm 6 ardens Rd on 31.54.24.
I hereby authorize you to release the sum SGD being settlement sum for my property damage claim only to my (solicitors, workshop)
Yours faithfully,
BIN MULTING CRETTE OF THE STATE

Claimant's signature / company stamp (if applicable)

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

01 Aug 2024 / 11:13:26

Receipt Date/Time: 01 Aug 2024 / 11:13:26

Tax Invoice/Receipt

Receipt No.: ITNET-00000-240801-001337

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBG8637A As at 31 Jul 2024/16:00:00 Insurance Co: AIG ASIA PACIFIC INSURAN 1 Insurance Enquiry - GBG8637A	ICE PTE. LTD.			
Enquiry Fee 20240801111222856645		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			
	20240801111230206	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.