



Your Ref:

Our Ref: AC17110026

25/01/2018

EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX SINGAPORE 069110 Attn: Motor Claims Department

Dear Sirs,

ACCIDENT ON 21/11/2017 INVOLVING SJW-3217-H & GBD-1138-K 114 LAVENDER STREET CT HUB 2 LEVEL 1

We are authorised repair workshop for the owner of vehicle, SJW-3217-H, which was involved in the captioned accident with your insured's vehicle. The vehicle owner has requested and authorised us to assist him/her in presenting his claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured, GBD-1138-K, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

	(E&OE)	\$5,715.80
8. Others		~
7. Medical Fees		1=1
6. TP/GIA Fees		\$2.00
5. LTA Fees		(-
4. Survey Fees		
3. Loss of Use (0 x \$0.00)		-
2. 8 days Car Rental x \$180.00		\$1,540.80
1. Cost of Repair		\$4,173.00

8. Others		-	
	(E&OE)	\$5,715.80	
We enclose the following documents to support the o	claims:-		
Repair/Excess Bill GIA/Police Re	port(s)	Power of Attorney	Medical Bill
Surveyor Report GIA/TP Search	1 /	Car Rental Bill	Witness Statement
Coloured Photographs Insurance Cer	tificate	Others:	
Kindly look into the matter and let us hear from	you on the settler	ment of our client's cla	aim as soon as possible.
Please note that it is a condition of any settleme (if any) of the owner/driver/claimant.	nt reached that it	shall be without preju	udice to any personal injury claim
Yours faithfully, ABWIN SERVICE PTE LTD	7617		
IVAN TEO	7		

Claims Department

E-mail: ivanteo@abwin.com.sg

DID: 67139416



PROFORMA INVOICE

To:

XU BING

ABWIN SERVICE PTE LTD 8 KAKI BUKIT AVENUE 4 - GATE 2 #07-48 PREMIER @ KAKI BUKIT SINGAPORE 415875

Tel: 67139400, Fax: 67138415

Co. Reg. No.: 201318685G, GST No.: 201318685G

Invoice No.: PAC17110026

Invoice Date: 25/01/2018

Our Ref.: AC17110026

Date of Accident: 21/11/2017

Vehicle No.: SJW-3217-H

Make: TOYOTA

Model: WISH 1.8 X (A) W/SUNROOF

S/N	DESCRIPTION	QTY	AMOUNT (S\$)
1	BEING COST OF REPAIR TO ABOVEMENTIONED VEHICLE FOR ACCIDENT ON 21/11/2017 AT 114 LAVENDER STREET CT HUB 2 LEVEL 1	1	\$3,900.00
Rema	rks:		

SUB TOTAL

\$3,900.00

7% GST

\$273.00

TOTAL

\$4,173.00

Payment by cheque should be crossed and made payable to **ABWIN SERVICE PTE LTD**.

Co. Mag. No. m

Authorised Signature

Date: _	21/11/2017	ĸ	e		X.
	KU BING			(Name of	Policyholder)
My Veh	icle No.:SJW3217H	Other Vehicles:	GBD1138K		
	t Date:	Location:	LAVENDER STREET CT	HUB 2 LEVEL	1
			×		
		LETTER OF	AUTHORISATION		
то:Е	Q Insurance Com	pany Ltd		(Third Party a	and/or Third Party Insurer)
3rd Part	uthorized ABWIN SERVICE PTE LT y Insurance Claims against Third g loss of use, loss of rental, medic	Party and / or its	Insurer on my behalf for		
	absolute discretion to agree to a xcept personal injuries and medic		compensation amount ir	n respect of m	y/our claim against third
relevant	IN SERVICE PTE LTD will be handled documents and negotiation of ractions in SERVICE PTE LTD.				
	n that the payment of any negotia I discharge of my claims against t				
I further	confirmed and accept that:				
i)	i) I will indemnify & keep Abwin Service Pte Ltd indemnified in connection with or arising from the claim and under no circumstances that will hold Abwin Service Pte Ltd liable for any losses or damages of whatever nature arising from or in connection with the claim;				
ii)	ii) Abwin Service Pte Ltd does not guarantee and never represented that the Insurer & or Third Party will fully indemnify me for the damage and/or the repair costs and that I shall continue to be liable to Abwin Service for the whole repair costs.				
	Files			(
Policyho Name:	older ⁱ s Signature / Company's Star	mp (if applicable)		Witne	eds's Signature
	XV Bug				
NRIC No./ROC No.: 527138422 NRIC No.:					
Designa	tion:			Ŀ	ABWIN 論
				Pre Sin	BWIN SERVICE PTE LTD (aki Bukit Avenue 4 #07-48 emier @ Kaki Bukit Gate 2 gapore 415875 (67139400 Fax: 65 67139415



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-17-174419

Date of Request:

21/11/2017

Your Ref No:

Online Purchase

Abwin Service Pte Ltd No. 8 Kaki Bukit Avenue 4 #07-48 Premier@Kaki Bukit Gate 2 Singapore 415875

Dear Sir/Madam,

Enquiry Date

21/11/2017

Enquiry By

Ivan Teo

TP Vehicle No.

GBD1138K

Accident Date

21/11/2017

DESCRIPTION	AMOUNT (S\$)	
TP Insurer Enquiry	1.87	
GST Amount	0.13	
Total Amount Due (GST Inclusive)	2.00	

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-17-174419

Date of Request:

21/11/2017

Your Ref No:

Online Purchase

Abwin Service Pte Ltd No. 8 Kaki Bukit Avenue 4 #07-48 Premier@Kaki Bukit Gate 2 Singapore 415875

Dear Sir/Madam,

Enquiry Date

21/11/2017

Enquiry By

Ivan Teo

TP Vehicle No.

GBD1138K

Accident Date

21/11/2017

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GBD1138K	EQ Insurance Company Ltd	11/08/2017-10/08/2018	6223 9433

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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