

Our Ref : SKB9800H / T310118  
 Your Ref : CC4/EQI18001042/T1pb3  
 Date : 29 September 2018

**Main Office:**

Mova Building  
 No. 22, Jalan Kilang,  
 Singapore 159419

**WITHOUT PREJUDICE** 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

**EQ INSURANCE CO LTD**  
**5 Maxwell Road**  
**#17-00 Tower Block MND Complex**  
**Singapore 069110.**

**ATTN : MOTOR CLAIMS DEPT**

Dear Sir/Mdm

**ACCIDENT INVOLVING: SKB9800H & SFL6080U**

**DATE OF ACCIDENT: 13 JANUARY 2018**

**ALONG: PIE TOWARDS TUAS**

**We refer to the above.**

We are claiming as per below:

Cost of Repairs	\$ 15,729.00
Loss of Use (\$ __ x __ days)	\$
Loss of Rental (\$ <u>120.00</u> x <u>17</u> days) + 7% GST	\$ 2,182.80
Towing Fees	\$
Medical Fee	\$
LTA /GIA Search Fee	\$ 2.00
E-Day License	\$
Others	\$

<b>Grand Total</b>	<b>\$ 17,913.80</b>
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Documents enclosed:

Car date in: 13.01.2018 Car date out: 31.01.2018

Authorized Repair Days: 10 (TP/OD/WS/Recovery of Incidental Costs)

<input checked="" type="checkbox"/>	Invoice	<input type="checkbox"/>	Certificate of Insurance
<input type="checkbox"/>	Excess Invoice	<input checked="" type="checkbox"/>	LTA/GIA Search Bill
<input type="checkbox"/>	Power of Attorney	<input type="checkbox"/>	Taxi Bill
<input checked="" type="checkbox"/>	Police Investigation Report/GIA	<input type="checkbox"/>	Medical Bill (photocopy)
<input type="checkbox"/>	Copies of NRIC/License of Owner/Driver	<input type="checkbox"/>	Others Receipt
<input checked="" type="checkbox"/>	Rental Bill/Rental Agreement	<input type="checkbox"/>	E-Day License receipt (photocopy)
<input type="checkbox"/>	Survey Report with Photographs	<input type="checkbox"/>	Towing Fee (photocopy)
<input type="checkbox"/>	Vehicle Registration Card/COE	<input type="checkbox"/>	Witness Statement
<input type="checkbox"/>	Letter from Supplier	<input type="checkbox"/>	Traffic Police Investigation Result

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

Please issue the cheque of **S\$ 17,913.80** in favor of **MOVA AUTOMOTIVE PTE LTD.**

If you have any enquires, please call or email **Suann Chiu – [suann@moval.com.sg](mailto:suann@moval.com.sg)**

Thank you.  
Yours faithfully,  
For Claims Manager  
Claims Department

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**NOTE:** # Please note that the Loss of Use/Rental will be paid based on negotiation and on the NIMA Protocol (Court Guideline).  
# As of 01.06.08 all claims scenario will be based on the BOLA, Barometer Of Liability,  
set by GIA, General Insurance Association of Singapore.

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





Automotive Pte Ltd



**Main Office:** Mova Building, No. 22 Jalan Kilang, Singapore 159419. Tel : (65) 6476 3333 Fax : (65) 6271 5891 Website: www.mova.com.sg  
**Workshop:** Block 1008, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722 Tel : (65) 6272 3892 Fax : (65) 6270 8314

### POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SKB9800H and (Third Party's Vehicle No.) SFL6080U on 13 Jan 18 along PIC towards TUAS

BY THIS POWER OF ATTORNEY, \*I/We, Ong kong wee  
\*NRIC/Passport No. S7711790C (Address)\*  
Bik 3 Pandan Valley #14-304 S(597627) /

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 15 of the month of Jan, Year Two Thousand - 18 (20 18).

Signed, Sealed & Delivered By

Customer's Name: Ong kong wee  
NRIC No: S7711790C  
Co's Rubber Stamp, where applicable.

Insurer's copy

\*delete as appropriate.



# Performa Invoice

28/09/2018

EQ INSURANCE CO LTD  
5 MAXWELL ROAD  
#17-00 TOWER BLOCK MND COMPLEX  
SINGAPORE 069110

Attention :- XA039

Page # :- 1 130519

Veh # :- SKB9800H

Veh Model :- BMW 523I

Performa# :- CK507677

JOB # :- T310118

ACC. Date :- 13/01/18

Terms :- C.O.D

Remarks :-

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No.	Description	Qty	U.Price	Amounts S\$
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Lump Sum Amount

14,700.00

E. &amp; O.E



AMOUNT S\$ 14,700.00

GST @ 7 % 1,029.00

AMOUNT DUE S\$ 15,729.00

Customer's Signature/Co. Stamp 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 11579

13499

RENTAL DETAILS				INSURANCE EXCESS AMOUNT			
Vehicle Make/Model:	V/W JETTA	Vehicle No:	SLL4572J	Singapore	Malaysia	Signature	
Date/Time Out:	15/01/18	12:05 hr		S\$ 3000	S\$ 4000		
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Per Accident	Per Accident	104	
Date/Time In:	31/01/18	1800 pm		Charges			
Petrol Level In:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Months @ \$	Per Month		
Change Over 1:	Date:	Initial:		2 Weeks @ \$	840.00	Per Week	1680.00
Change Over 2:	Date:	Initial:		3 Days @ \$	120.00	Per Day	360.00
KM Out:	KM In:			Hours @ \$		Per Hour	
HIRER DETAILS				Sub-Total			
Named Hirer				Less Discount %			
Address:				Rental Charges			
Identity Card No:				CDW @ \$ per day / week / month			
Date of Birth:				PAI @ \$ per day / week / month			
Driving License:				Petrol Top-Up			
Country of Issue:				Misc Charges			
Tel: (HP)				GST 7%			
Nationality:				Total			
Effective Date:				2182.80			
Additional Hirer				Remarks:			
Name:				Invoice No:			
Address:				Ref. No:			
Identity Card No:				Checked Out By:		Checked In By:	
Date of Birth:				Checked By:			
Driving License:				Sales-In Charge:			
Country of Issue:				Past 3 years accidents YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
Tel: (HP)							
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 &amp; 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.



## Third Party Insurer Enquiry

Our Ref No: GR-18-007097

Date of Request: 15/01/2018

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd  
No. 22 Jalan Kilang, #03-01  
Mova Building  
Singapore 159419

Dear Sir/Madam,

Enquiry Date 15/01/2018

Enquiry By Enny

TP Vehicle No. SFL6080U

Accident Date 13/01/2018

### Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SFL6080U	EQ Insurance Company Ltd	08/03/2017-07/03/2018	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.

This is a computer generated document and requires no signature.

**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-18-007097  
Date of Request: 15/01/2018

Your Ref No: Online Purchase

Mova Automotive Pte Ltd  
No. 22 Jalan Kilang, #03-01  
Mova Building  
Singapore 159419

Dear Sir/Madam,

Enquiry Date 15/01/2018  
Enquiry By Enny  
TP Vehicle No. SFL6080U  
Accident Date 13/01/2018

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.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque