

Your Ref:  
Our Ref: AC18010027

06/03/2018

AIG ASIA PACIFIC INSURANCE PTE LTD  
78 SHENTON WAY  
#07-16 AIG BUILDING  
SINGAPORE 079120  
Attn: Motor Claims Department

Dear Sirs,

**ACCIDENT ON 19/01/2018 INVOLVING GBD- 199-R & SKN-7731-Z 2 JALAN KUKOH OPEN CARPARK**

We are authorised repair workshop for the owner of vehicle, GBD- 199-R, 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, SKN-7731-Z, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Cost of Repair	\$2,514.50
2. 0 days Car Rental x \$0.00	-
3. Loss of Use (7 x \$200.00)	\$1,400.00
4. Survey Fees	-
5. LTA Fees	-
6. TP/GIA Fees	\$2.00
7. Medical Fees	-
8. Others	-
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(E&OE)	<b>\$3,916.50</b>

We enclose the following documents to support the claims:-

<input checked="" type="checkbox"/> Repair/Excess Bill	<input type="checkbox"/> GIA/Police Report(s)	<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Medical Bill
<input type="checkbox"/> Surveyor Report	<input checked="" type="checkbox"/> GIA/TP Search	<input type="checkbox"/> Car Rental Bill	<input type="checkbox"/> Witness Statement
<input type="checkbox"/> Coloured Photographs	<input type="checkbox"/> Insurance Certificate	<input type="checkbox"/> Others: _____	

Kindly look into the matter and let us hear from you on the settlement of our client's claim as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/driver/claimant.

Yours faithfully,  
**ABWIN SERVICE PTE LTD**



LINDA LIAO

Claims Department

E-mail: lindaliao@abwin.com.sg

DID: 67139417



AUTHORIZATION TO ACT  
(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

I, Goodmen Global Private Limited ("the third party claimant")  
of 7 kaki Bukit Road 1, Eunos Technolink #02-12 5415937 (address),  
owner of GBD199R (vehicle no.) hereby authorize  
ABWIN SERVICE PTE LTD  
("the workshop") to act for me with respect to my claim for repair costs and/or  
rental and/or loss of use ("claim") for my vehicle no. GBD199R that was  
damaged pursuant to the accident which occurred on 19/01/18 (date) along  
2 Jalan Kukuloh Open Carpark (location)  
involving vehicle no/s SKN77312 ("the accident").

I further authorize the workshop to settle the above mentioned claim in a  
manner that they deem fit and the workshop is further authorized to receive  
payment further to settlement of my claim with payment cheque/s being made in  
favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my  
behalf is on a without prejudice and without admission of liability basis insofar  
as the driver/owner/insurers of the other vehicle/s is concerned.

Date this 6<sup>th</sup> day of March (month) 2018 (year)



Signed by "the third party claimant"



Signed by "the workshop"

**TAX INVOICE****INV18030003****To:** GOODMAN GLOBAL PRIVATE LIMITED  
23 SALAM WALK  
#02-02 CASA FLORA  
SINGAPORE 467171**Date:** 06/03/2018  
**Vehicle No.:** GBD- 199-R  
**Make:** TOYOTA  
**Model:** DYNA 150 MANUAL 3SEATER**Attention:****Date of Accident:** 19/01/2018

S/N	DESCRIPTION	QTY	AMOUNT (\$\$)
1	BEING LUMP SUM REPAIR COST FOR THE ABOVE VEHICLE	1.000	\$2,350.00

**SUB TOTAL** \$2,350.00  
**7% GST** \$164.50  
**TOTAL** \$2,514.50

Remarks:

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

For ABWIN SERVICE PTE LTD

Date: 27/02/19From: GOODMEN GLOBAL PRIVATE LIMITED (Name of Policyholder)My Vehicle No.: GBD-199-ROther Vehicles: SKN-7731-ZAccident Date: 19/01/2018Location: 2 JALAN KUKOH OPEN CARPARK**LETTER OF AUTHORISATION**To: AIG ASIA PACIFIC INSURANCE PTE LTD (Third Party and/or Third Party Insurer)

I have authorised ABWIN SERVICE PTE LTD to proceed with the repairs to my accident damaged vehicle and to proceed with 3rd Party Insurance Claims against Third Party and / or its Insurer on my behalf for property damages, costs, and expenses, including loss of use, loss of rental, medical fees and legal costs.

To have absolute discretion to agree to any settlement of compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).

As ABWIN SERVICE PTE LTD will be handling the entire 3rd Party Claims, which includes signing / submission of all relevant documents and negotiation of my claims on my behalf, kindly forward and make payable all proceeds of my claims to **ABWIN SERVICE PTE LTD**.

I confirm that the payment of any negotiated settlement with and accepted by ABWIN SERVICE PTE LTD will serve as an effectual discharge of my claims against the Third Party and / or its Insurer for the damage caused.



Policyholder's Signature / Company's Stamp (if applicable)

Name: DAMIAN KWIANRIC No./ROC No.: 589205851Designation: DIRECTOR

Witness's Signature

Name: Chua Soon Nee JoyNRIC No.: 58508583H