

Your Ref:
Our Ref: AC18020017

08/05/2018

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

Dear Sirs,

ACCIDENT ON 23/02/2018 INVOLVING GBF-4488-U & GX - 941-A 2 HILLSIDE DRIVE

We are authorised repair workshop for the owner of vehicle, GBF-4488-U, 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, GX - 941-A, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Cost of Repair	\$2,140.00
2. 0 days Car Rental x \$0.00	-
3. Loss of Use (8 x \$120.00)	\$960.00
4. Survey Fees	-
5. LTA Fees	-
6. TP/GIA Fees	\$2.00
7. Medical Fees	-
8. Others	-
<hr/>	
(E&OE)	\$3,102.00

We enclose the following documents to support the claims:-

<input checked="" type="checkbox"/> Repair/Excess Bill	<input type="checkbox"/> GIA/Police Report(s)	<input checked="" 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

IVAN TEO

Claims Department

E-mail: ivanteo@abwin.com.sg

DID: 67139416

ABWIN 諭輝

ABWIN SERVICE PTE LTD
8 Kaki Bukit Avenue 4 #07-48
Premier @ Kaki Bukit Gate 2
Singapore 415875
Tel: 67139400 Fax: 65 67139415

TAX INVOICE**INV18050007****To:** AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16 AIG BUILDING
SINGAPORE 079120**Date:** 08/05/2018
Vehicle No.: GBF-4488-U
Make: TOYOTA
Model: HIACE 3.0 DX M**Attention:****Date of Accident:** 23/02/2018

S/N	DESCRIPTION	QTY	AMOUNT (\$S)
1	BEING CLAIM FOR VEHICLE NO. GBF-4488-U ACCIDENT ON 23/02/2018 AS FOLLOWS :-		
2	REPAIR COSTS	1.000	\$2,000.00

SUB TOTAL	\$2,000.00
7% GST	\$140.00
TOTAL	\$2,140.00

Remarks:

ABWIN 諭輝ABWIN SERVICE PTE LTD
8 Kaki Bukit Avenue 4 #07-48
Premier @ Kaki Bukit Gate 2
Singapore 415875
Tel: 67139400 Fax: 65 67139415Payment by cheque should be crossed and made payable to **ABWIN SERVICE PTE LTD.**

For ABWIN SERVICE PTE LTD

Date: 15/3/2018From: SAPHAD SERVICES (Name of Policyholder)My Vehicle No.: GBF-4488-UOther Vehicles: GX - 941-AAccident Date: 23/02/2018Location: 2 HILLSIDE DRIVE**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: SAPHAD SERVICESNRIC No./ROC No.: 53287997W

Designation: _____

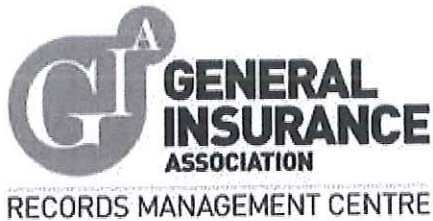
Witness's Signature

Name: _____

NRIC No.: _____

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ABWIN SERVICE PTE LTD
8 Kaki Bukit Avenue 4 #07-48
Premier @ Kaki Bukit Gate 2
Singapore 415875
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**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-18-028382

Date of Request: 23/02/2018

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 23/02/2018

Enquiry By Ivan Teo

TP Vehicle No. GX941A

Accident Date 16/02/2018

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.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
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Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-028382

Date of Request: 23/02/2018

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 23/02/2018
Enquiry By Ivan Teo
TP Vehicle No. GX941A
Accident Date 16/02/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GX941A	AIG Asia Pacific Insurance Pte. Ltd.	29/12/2017-28/12/2018	65-6419-3000

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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