

KUM CHEW MOTOR WORKSHOP

160, Sin Ming Drive
Sin Ming Autocity #05-08, Singapore 575722.
TEL: 6453 6256, 6456 3715 FAX: 6455 7754
Email:kumchew1@singnet.com.sg

Date : 15/03/2021

M/s. Lonpac Insurance Bhd
300, Beach Road #17-04/07
The Concourse
Singapore 038986.

Dear Sir/Madam,

ACCIDENT INVOLVING SJP 5630 X & SCX 1308 U ON 16/04/2018.

We act for Mr Ler Sia Quain Adrain, the owner of motor vehicle No.
SJP 5630 X in the abovementioned matter.

We are instructed that you are the insurer of motor vehicle SCX 1308 U at the material time. We are further instructed that the accident caused by your insured driver's negligence in the driving, control and/or management of your insured vehicle. As a result of the accident, our client's vehicle was damaged and our clients have been put to loss and expense, particulars of which are as follow:-

We quantify our client's claim as follows:-

Cost of Repair (inclusive of GST)	: \$6687.50
Rental charge (17 Days x \$200.00)	: <u>\$3400.00</u>
	<u>\$10087.50</u>

The following supporting documents are enclosed herewith:-

1. Invoice from Kum Chew Motor Workshop;
2. Rental Agreement from Acepac Rental;

Thank you.

Yours faithfully,

.....
Mdm Lim

KUM CHEW MOTOR WORKSHOP

160, SIN MING DRIVE #05-08

SIN MING AUTOCITY, SINGAPORE 575722.

Tel No. : 64536256/64563715 Fax No. : 64557754

E-Mail : kumchew1@singnet.com.sg

GST Reg.No. : M90367665T Buss. Reg. No. : 52865130K

LONPAC INSURANCE BHD

300 BEACH ROAD, #17-04/07

THE CONCOURSE, SINGAPORE 199555

PRI EMAIL : mt_claim@lonpac.com

Attention : Motor Claim Department

Contact : 62507388 Fax No. : 62962706

Tax Invoice : TP002046

Date : 15/03/2021

Vehicle Num. : SJP 5630 X

Make/Model : HONDA ODYSSEY-2009

Chassis/Eng# : JHMRB38509C200703/K24Z21300709

Accident Date : 16/04/2018

Claim No. :

Reference : KC/TP5630/1804-07

Policy No. :

Amount S\$

LUMP SUM REPAIR

6,250.00

SingDollars : Six Thousand Six Hundred Eighty-Seven & Cents Fifty Only

Total S\$: 6,250.00
GST@7% S\$: 437.50
Amount Due S\$: 6,687.50
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KUM CHEW MOTOR WORKSHOP

ACEPAC RENTAL

160 Sin Ming Drive #07-08 Sin Ming Auto City Singapore 575722
Tel : 6453 6256 Fax : 6455 7754

STP 5630X
INV NO : 16112

RENTAL AGREEMENT

Reg No. : 52916615A

VEHICLE			
VEHICLE NO :	STP 83034	MODEL :	TOYOTA PICNIC
CHANGE OVER 1 :		DATE :	
CHANGE OVER 2 :		DATE :	

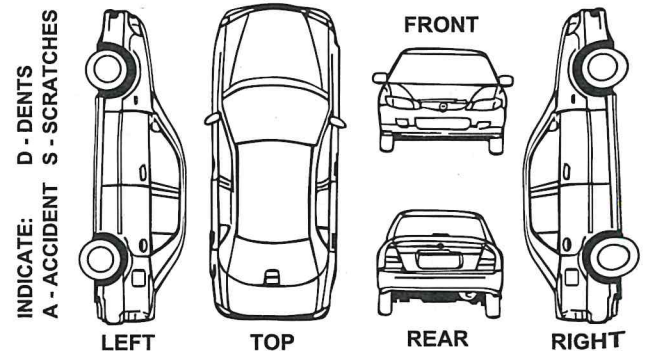
CORPORATE HIRER	
NAME :	
ADDRESS :	
CONTACT PERSON :	TEL :

PERSONAL HIRER / NAMED DRIVER			
NAME :	MR LER SIA RUAIN ADRAIN		
ADDRESS :	2, BRAEMAR DRIVE, SC559406		
OFFICE TEL :	96636694	RESIDENCE TEL :	
NATIONALITY :		PLACE / DATE OF BIRTH :	
DRIVING LICENSE NO :		COUNTRY OF ISSUE :	

ADDITIONAL NAME DRIVER			
NAME :			
ADDRESS :			
OFFICE TEL :		RESIDENCE TEL :	
NATIONALITY :		PLACE / DATE OF BIRTH :	
DRIVING LICENSE NO :		COUNTRY OF ISSUE :	

CHECK OUT / CHECK IN			
DATE OUT :	17/4/2018	TIME OUT :	12:05 pm
PETROL LEVEL OUT :		E 1/4 1/2 3/4 F	
AGREED DATE OF RETURN :			
DATE IN :	4/5/2018	TIME IN :	5:30 pm
PETROL LEVEL IN :		E 1/4 1/2 3/4 F	

CHARGES			
Hours	@ \$	per hour	
Days	17 @ \$200.-	per day	3400.-
Weeks	@ \$	per week	
Months	@ \$	per month	
SUB - TOTAL			
Discount			
TOTAL RENTAL			
Petrol			
Excess			
Delivery / Collection Fees			
Deposit			
Total			
Remarks : Strictly For Hirer Personal / Usage. Not For Reward Usage (eg Uber, Grab Car)			



IMPORTANT NOTES : Restricted to Singapore use only

No refund will be given for petrol left in vehicle.
Hirer is liable to pay first \$2000.- under section I & II in any accident plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses.

Vehicles return during office hour only.
No Service on Public Holiday and Sunday.
Driver must be above 26 years and 2 years driving experience.

HIRER'S DECLARATION
I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THERE TO

COMPANY'S STAMP / HIRER'S SIGNATURE

LETTER OF AUTHORITY & INDEMNITY

To: Kum Chew Motor Workshop
160, Sin Ming Drive #05-08
Sin Ming Autocity
Singapore 575722.

ACCIDENT INVOLVING VEHICLE NO. SJP 5630X AND SCX 13084
AT TOL PLAZA LOR 6 INFRONT BUC 52 ON 16/04/2018.

I/We, the owner of vehicle no SJP 5630X hereby instruct and authorize you to commence repairs to the said vehicle.

You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in court in my/our name against the third party.

You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit.

Upon resolving my/our claim, you are authorized to agree with my/our solicitors on amount of their professional costs and disbursements for action for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account. In the event that my/our claim or legal suit is not successful or is dismissed for whatever reason, I/We understand and agree that I/We shall be personally liable to bear the legal costs of the third party as well as the professional costs and disbursements of my/our solicitors notwithstanding that my/our solicitors were appointed by you on my/our behalf.

In the event that I/We am/are required to attend at my/our solicitor's office or to attend Court in connection with my/our claim, I/We shall render full co-operation.

In the event that my/our claim against the third party and/or his insurers is not successful or can not be proceeded with and/or if any Judgment or settlement is not honored or satisfied by the third party, I/We agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.

I/We undertake to inform you in the event the third party's insurance company communicates with me/us directly by telephone 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 communication with you.

I/We irrevocably authorize Mrs Kum Chew Motor Workshop of the Repairers to sign all discharge voucher/ Indemnity forms and all necessary documents in connection with and arising out of the claim.

Dated this 17 day of APRIL 20 18


(Company stamp if applicable)

Name LER SIA QUAIN ADRAIN

I/C No S7010325-6

Address 2, BRAEMAR DRIVE
SINGAPORE 559406