



# CITY AUTO PTE LTD

*One Stop Automotive Solution*

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643

TEL: 6453 1235, 6452 0850 FAX: 6453 7944

24hrs Towing Services Tel: 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Your ref: CC4/AIG18007977/Kmb3

Our ref: SGA9338D

01/10/2018

WITHOUT PREJUDICE

Attn: Motor Claim Dept

AIG ASIA PACIFIC INSURANCE PTE. LTD

NO. 78

SHENTON WAY #07-16

SINGAPORE 079120

Dear Sir/Mdm,

**Accident involving SGA9338D and SKX3344G on 28/04/2018**

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Letter of authorization

As instructed, we are claiming the following as stated below:-

Cost of Repair	:	S\$ 1,765.50
Loss of use (5 Days x \$100.00)	:	S\$ 500.00
		<u>S\$ 2,265.50</u>

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to hear from you soonest.

Thanks & regards

Vronica Law (Claim dept.)

Tel: 6453 1235

Fax: 64537944

Email: [cityauto@singnet.com.sg](mailto:cityauto@singnet.com.sg)



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### RE: LETTER OF AUTHORIZATION

Name of owner: YEO LEE NAH NRIC: ST1006366

Address: APT BLK 31 LORONG CHUAN # 06-05 SINGAPORE 556320

Name of Driver: YEO LEE NAH NRIC: ST1006366

Address: APT BLK 31 LORONG CHUAN # 06-05 SINGAPORE 556320

Accident on 23/04/2013 Involving SKX 3344 G and SGA 9338 D

At/along MIDDLE ROAD and VICTORIA STREET

In consideration of City Auto Pte Ltd, repair my/our Motor Vehicle MAZDA 3 at my/our request I/We the above owner of Motor Vehicle No: SGA 9338 D do authorize them to demand claims, settle and received whatever amount payable by the Insurance Co or Third Party or to commence legal proceeding if necessary in my/our name for the cost or repair and the loss of use/rental, etc and to any of there appointed solicitors to act for me/us in respect of the said accident/claim and all amounts claimed or settled shall be belong to them absolutely. I/We further authorize them to give an absolute discharge on my/our behalf.

I/We hereby authorize City Auto Pte Ltd, my/our repairer to give further instruction on my/our behalf concerning the said claim and such, all future correspondence should be addressed to the said firm/co.

My/Our repairer authorize to receive on my/our behalf monies claims, correspondence and give a valid discharge voucher or any other documents in connection with this on my/our behalf and for me/us.

I/We further agree to fully co-operate and attend all court hearing that are necessary and subject to prosecution and claim maintained by City Auto Pte Ltd.

I/We further agree to undertake to indemnify them against my/our claim for the cost which arises therewith.

In the event that my/our unsuccessful claim, I/We undertake to pay the repairer for the cost of repairs to my motor vehicle.

Owner Signature: [Signature]

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Witness Signature: CITY AUTO PTE LTD  
Blk 8 Sin Ming Road  
#01-58/60/62 Sin Ming Ind Est  
Singapore 575643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

Name: \_\_\_\_\_

Date: \_\_\_\_\_