



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/III18010147/Kha3

Our ref: SJQ662G

21/12/2018

WITHOUT PREJUDICE

Attn: Motor Claim Dept

INDIA INTERNATIONAL INSURANCE PTE LTD

NO. 64

CECIL ST

IOB BLDG

SINGAPORE 049711

Dear Sir/Mdm,

Accident involving SJQ662G and SHC8434T on 01/06/2018

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Repair tax invoice
- Letter of authorization

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

Cost of Repair	:	S\$ 1,712.00
Loss of use (5 Days x \$100.00)	:	S\$ 500.00
		<u>S\$ 2,212.00</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



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TAX INVOICE

Tax Invoice : I2018-008959

Date : 21/12/2018

Vehicle No. : SJQ662G

Make / Model : TOYOTA VIOS E AUTO

Mileage (km) : 97227

Chassis No. : MR053HY9305110653

Accident Date : 01/06/2018

Claim No. : CC4/III18010147/Kha3

Reference : JO201806-0055

Policy No. : 5077974438-02

INDIA INTERNATIONAL INSURANCE PTE LTD

NO. 64

CECIL ST

IOB BLDG

SINGAPORE 049711

Attention: Motor Claim Department

Contact : 6347 6100

Fax No. : 6225 7743

S/No. Particular	Amount
* Lumpsum repair	<u>S\$</u> 1,600.00

Total S\$: 1,600.00

GST @ 7% S\$: 112.00

Grand Total S\$: 1,712.00

CASH / NETS / CREDIT CARD PAYMENT ONLY

Customer's Signature/Co. Stamp


for CITY AUTO PTE LTD

Please note all works performed by City Auto Pte Ltd as performed in this invoice is subjected to the following Warranty conditions:

- 1) Any replacement of electrical components will carry 1 month warranty period from date of this invoice.
- 2) Any replacement of mechanical components will carry 3 months warranty period.

Please note that all warranty does not cover wear and tear conditions regardless of any components.

City Auto Pte Ltd reserves the right to determine any warranty conditions.

Thank You For Your Business !



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24hrs Towing Services Tel: 9823 9898
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RE: LETTER OF AUTHORIZATION

Name of owner: TAN YIK KIM GREGORY NRIC: S75310431

Address: 44 CHEMPAKA AVENUE SINGAPORE 349657

Name of Driver: CAROLYN TAN PHEK GEK NRIC: S73295311

Address: 44 CHEMPAKA AVENUE SINGAPORE 349657

Accident on 01/06/2018 Involving SHC 8434 T AND SJQ 6626.

At/along UPP SERANGUON RD TOWARDS BEAUMEER RD

In consideration of City Auto Pte Ltd, repair my/our Motor Vehicle TOYOTA VIOS
at my/our request I/We the above owner of Motor Vehicle No: SJQ 6626 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: 

Name: _____

Date: _____

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)

Witness Signature: _____

Name: _____

Date: _____