



## Auto Insure Pte. Ltd.

6 Marsiling Lane  
Singapore (739145)  
E: claims@autoinsure.com.sg  
W: www.autoinsure.com.sg  
T: 3157 2626 F: 6368 0081  
GST No.: 201437380M

Our Ref: SLM8928K  
Your Ref: SGT8602Y  
Accident Date: 13-Jun-18

**WITHOUT PREJUDICE**

**25-Sep-18**

**ATTENTION: MOTOR CLAIMS DEPT**

Email: mt\_claim@lonpac.com

Lonpac Insurance BHD  
300 Beach Road,  
#17-04/07 The Concourse,  
Singapore 199555

**CLAIMANT: LCRF PTE LTD**

**ACCIDENT INVOLVING SLM8928K & SGT8602Y ALONG PIE TWDS TUAS BEFORE KPE EXIT ON 13/06/2018.**

We are instructed by **LCRF PTE LTD** to claim damages against your insured in connection with a road accident ON involving our client's motor registration number and motor vehicle registration number driven by you or your authorised driver at the material time.

We are instructed that your negligent driving and/or management of your vehicle caused the accident. As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair (with GST) after surveyor final esti.	\$ 1,625.54
2) Loss of Rental (Includes loss of PRS and loss of Sun & PHs ) (6 days x \$120)	\$ 720.00
3) LTA/GIA Search Fees	\$ 31.00
4) Other incidentals	\$ 200.00
5) Towing	\$ -
6) Loss of Income (6 days x \$200)	\$ 1,200.00
<b>TOTAL:</b>	<b><u>\$ 3,776.54</u></b>

A copy of each of the following supporting documents is enclosed:

- 1) GIA report of our Insured
- 2) Repairer's Invoice
- 3) Letter of Authorization
- 4) LTA/GIA Search Receipt
- 5) Hiring Agreement

Please note that if you are insured and wish to claim under your insurance policy, you should immediately pass this letter to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within **14 days** of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within **8 weeks** of your receipt of this letter.

For any further enquiry, kindly contact us via email to claims01@autoinsure.com.sg or call Sam at 3157 2628 directly.

Yours Faithfully,

Jason Heng  
Auto Insure Pte Ltd  
Claims Director



Auto Insure Pte. Ltd.  
6 Marsiling Lane  
Singapore (739145)  
E: [claims@autoinsure.com.sg](mailto:claims@autoinsure.com.sg)  
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GST No.: 201437380M

**TAX INVOICE**

Invoice No.: **AI-3288-2191**  
Date: **24/09/2018**  
Terms: **30 DAYS**  
Ref: **C2961**

BILLING DETAILS	
NAME	LION CITY RENTALS PTE LTD
VEH REG. NO.	SLM8928K
ADDRESS	
ATTENTION TO	LONPAC INSURANCE BHD
TEL	
EMAIL	

S/N	DATE	CODE	DESCRIPTION	PRICE w/o GST	GST AMT	AMOUNT (\$)
1	13-Jun-18		Lump Sum Repair Cost: To supply and replace parts, labour charges for repair, panel beating, welding and respary painting.	\$1,519.20	\$ 106.34	\$1,625.54

**Autoinsure**

*Cheque Payment should be crossed and issued in favour of  
AUTO INSURE PTE. LTD.  
No Receipt will be issued.  
Thank you for your patronage.*

SUBTOTAL	\$1,519.20
ADD GST 7.00 %	\$ 106.34
<b>TOTAL AMOUNT (\$)</b>	<b>\$ 1,625.54</b>

*This is a computerized document. No signature is required.*



RECORDS MANAGEMENT CENTRE

**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

**Third Party Insurer Enquiry**

Our Ref No: GR-18-090542

Date of Request: 13/06/2018

Your Ref No: Online Purchase

Auto Insure Pte Ltd  
6 Marsiling Lane  
Singapore 739145

Dear Sir/Madam,

Enquiry Date 13/06/2018  
Enquiry By Ngiew Jie Ling  
TP Vehicle No. SGT8602Y  
Accident Date 13/06/2018

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGT8602Y	Lonpac Insurance Bhd	30/11/2017-20/12/2018	+65 62507388

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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**TAX INVOICE**

Our Ref No: GR-18-090542

Date of Request: 13/06/2018

Your Ref No: Online Purchase

Auto Insure Pte Ltd  
6 Marsiling Lane  
Singapore 739145

Dear Sir/Madam,

Enquiry Date 13/06/2018  
Enquiry By Ngiaw Jie Ling  
TP Vehicle No. SGT8602Y  
Accident Date 13/06/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

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For GIARMC Official use:

Date:

☒ [X] GIRO ☐ [ ] Cash ☐ [ ] Cheque



6/14/2018

Invoice



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RECORDS MANAGEMENT CENTRE**

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RECORDS MANAGEMENT CENTRE

**SEARCH RESULTS**

Our Ref No: GR-18-091211  
Date of Request: 14/06/2018  
Your Ref No: Online Purchase

Auto Insure Pte Ltd  
6 Marsiling Lane  
Singapore 739145

Dear Sir/Madam,

**Your Search Criteria:**

Date of Accident: 13/06/2018  
Place of Accident: ALONG PIE TWDS TUAS BEFORE KPE  
Client Vehicle No: SLM8928K

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

REQ. VEHICLE	ACCIDENT LOCATION	ACCIDENT DATE
SGT8602Y	PIE TWDS LORNIE	13/06/2018 09:40

Thank You.

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6 Raffles Quay #18-00, Singapore 048580  
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GST Registration No: M400017735

RECORDS MANAGEMENT CENTRE

**TAX INVOICE**

Our Ref No: GR-18-091211  
Date of Request: 14/06/2018

Your Ref No: Online Purchase

Auto Insure Pte Ltd  
6 Marsiling Lane  
Singapore 739145

Dear Sir/Madam,

**Your Search Criteria:**

Date of Accident: 13/06/2018  
Place of Accident: ALONG PIE TWDS TUAS BEFORE KPE  
Client Vehicle No: SLM8928K

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

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Date:

☒ GIRO ☐ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**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-18-091213  
Date of Request: 14/06/2018  
Your Ref No: Online Purchase

Auto Insure Pte Ltd  
6 Marsiling Lane  
Singapore 739145

Dear Sir/Madam,

Date of Accident: 13/06/2018  
Vehicle No: SLM8928K  
Place of Accident: ALONG PIE TWDS TUAS BEFORE KPE EXIT  
Involving Vehicle No: SGT8602Y

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SGT8602Y	ALONG PIE TWDS TUAS BEFORE KPE EXIT		14.00 1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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For GIARMC Official use:

Date:

[X] GIRO [ ] Cash [ ] Cheque



#### SCHEDULE 1A

1. **Rental Plan**

**6 Month Rates**

2. **Deposit**

Please refer to your deposit invoice

3. **Rental Fee & Charges**

- (a) The Rental Fee per week is S\$ 497.
- (b) Weekly Payment Fee: All weekly rental payments are due the following Wednesday at 17:00hrs and if the Wednesday falls on a Public Holiday, then the due date will be the next working day at 17:00hrs.
- (c) Late Payment Fee: All outstanding payments after the above mentioned day will be subject to a late payment fee of S\$60.
- (d) Cleaning Fee: S\$300. Not limited to Cigarette odour.
- (e) Vehicle Damage Fee: In cases where the Vehicle has been involved in an accident requiring repairs to the Vehicle, the Hirer will be responsible for the actual cost of repair to the Vehicle up to a maximum of S\$2,200 per accident.

4. **Insurance Excess**

In the event of an accident resulting in a claim made against or reported to LCR's insurers for damage to third party property (including other vehicles), the Hirer will be liable for any insurance excess\* ("Insurance Excess") payable as a result.

The Insurance Excess is payable in addition to any other amounts that may be applicable under this Agreement.

\* S\$2,140 or such other amount as notified to the Hirer by LCR from time to time



## LETTER OF AUTHORISATION

To: M/S AUTO INSURE PTE. LTD.

RE: ACCIDENT ON 13/06/2018 10:00 INVOLVING VEHICLE NOS:

SLM8928K & SGT8602Y ALONG PIE TWDS TUAS BEFORE  
KPE EXIT

I/We, LCRF PTE. LTD., NRIC/Reg No: 201624597K , owner of vehicle No.

SLM8928K hereby authorise you to commence repair to the said vehicle forthwith.

1. I/We hereby irrevocably authorise you to demand claims settle receive whatever amount settled/payable by the insurance and/or third party or to commence proceeding, if necessary, in my name for the costs of repair and loss of use, etc and to you appointing any Workshop to act for me in respect of the accident claims and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third-party claims to you and my/our Workshops (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Workshop & Client basis. I/We undertake to co-operate fully with you and my/our Workshops to see the claims to as successful conclusion.
2. I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claims in my/our absence. I/We irrevocable authorise you to appoint such a firm of workshop on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.
3. I/We undertake to inform you and/or the Workshops appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally and in writing and I/We further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.
4. My vehicle is repaired by the repairer on my own will without any inducement, threat or promise.
5. Upon settlement of the third-party claims and in case the settlement monies were sent to me/us by the third party's insurers, I/We undertake to pay you and my/our Workshops the cost of repairs settled and related expenses and disbursement incurred.



Owner's Signature  
(Company's Stamp If applicable)



Witness Signature/Name

## SCHEDULE 1

## 1. Hirer's Details

NG ZHONG WEI S8718587G  
 (Hirer's Name) (\*NRIC/ Passport No.) (Nationality)  
 125 PENDING RD #08-30 SINGAPORE 670125  
 (Address)  
 (Mailing address, if different from above)  
 (Email address)  
 16/06/87  
 (Telephone No.) (Mobile No.) (Date of Birth dd/mm/yy)  
 (Driver's Licence No.) (Expiration Date) (Class(es) of Driver's Licence)

\*Please delete where applicable.

## 2. Vehicle Description

Make & Model	Colour	Registration No.
KIA K3	GREY	SLM8928K

## 3. Commencement Date and Minimum Rental Period

The **Minimum Rental Period** is for **26 Weeks** and commences on **30/01/18** the (being the date of collection of the Vehicle from LCR by the Hirer).

For the avoidance of doubt, the Minimum Rental Period is exclusive of any period where the Vehicle is being repaired due to an accident and the Hirer is not offered a Replacement Vehicle by LCR during such period. For example, if a Hirer has completed 2 weeks of the Minimum Rental Period, and the Vehicle is sent for repair for 2 weeks due to an accident, then only 2 weeks of the Minimum Rental Period has been fulfilled. As a result, the Hirer must still fulfill an additional 2 weeks to complete the Minimum Rental Period.