### Asher Sng (LKKAuto)

**From:** People Vehicle <peoplevehicle@gmail.com>

Sent: Thursday, 21 March 2019 4:07 PM

**To:** Asher Sng (LKKAuto)

**Subject:** Fwd: Direct settlement for TP claim vehicle No:SKD 595 Z -Your ref: SHD 9725 S **Attachments:** SKD 595 Z Tax Invoice09112018.pdf; SKD 595 Z GIA09112018.pdf; SKD 595 Z LTA

Search09112018.pdf; SKD 595 Z LOA09112018.pdf

Follow Up Flag: Follow up Flag Status: Flagged

### **Forwarded Conversation**

Subject: Direct settlement for TP claim vehicle No:SKD 595 Z -Your ref: SHD 9725 S

\_\_\_\_\_

From: People Vehicle < peoplevehicle@gmail.com >

Date: Fri, Nov 9, 2018 at 6:40 PM

To: Thin Thin (LKK Auto) < <a href="mailto:thinmolkkauto.com">thinthin@lkkauto.com</a>>

## PEOPLE'S VEHICLE RECOVERY SERVICE

BLK 3023A #01-60 UBI ROAD 1 (S) 408717

TEL: 6743 3246 FAX: 6743 0013

Co Regn No: 31800200X, GST Regn No: M90001895E

Email: peoplevehicle@gmail.com

Date: 09-11-2018

#### **AXA INSURANCE SINGAPORE PL**

8 Shenton Way #24-01 AXA Tower (S) 068811

Your Ref . SHD 9725 S Officer-in-charge – Thin Thin

### Accident involving SKD 595 Z AND SHD 9725 S ON 03-10-2018

We act on behalf of our client SKD 595 Z on above claim

COR per your appointed surveyor recommendation (inclusive GST)

\$2,461.00

### Loss of Use @120 X 4 Days

\$480.00

LTA search \$7.45

Total \$2,948.45

Kindly revert back to us within 14 days from date of above if you wish to settle with us under direct settlement

Yours sincerely

Enclosure Original Tax Invocie  $\,$  , GIA report of our client .LTA Search Receipt  ${\bf LOA}$ 

People's Vehicle Recovery Service Computer Generated document . No signature is required

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From: People Vehicle < peoplevehicle@gmail.com >

Date: Fri, Nov 9, 2018 at 6:41 PM

To: Thin Thin (LKK Auto) < <a href="mailto:thin@lkkauto.com">thinthin@lkkauto.com</a>>

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From: People Vehicle < peoplevehicle@gmail.com >

Date: Thu, Mar 21, 2019 at 3:43 PM

To: Asher Sng (LKKAuto) <ashersng@lkkauto.com>

Hi Asher

per spoken, thin thin case re-forward for your retention

Kindly expediate

tks Janet

tel:6743 3246

# PEOPLE'S VEHICLE RECOVERY SERVICE

BLK 3023-A UBI ROAD 1 #01-60 SINGAPORE 408717 Tel No. : 67433246/ 67438552 Fax No. : 67430013

E-Mail: peoplevehicle@gmail.com

Tax Reg. No.: M90001895E Buss. Reg. No.: 31800200X

AXA INSURANCE SINGAPORE PTE LTD 8 Shenton Way #27-01 AXA Tower (S) 068807

Attention: Motor Claim Department
Contact: 63387288 Fax No.: 62004838

Tax Invoice: TT18037

Date: 08/11/2018 Vehicle Num: SKD 595 Z

Make/Model: VOLKSWAGEN GOLF

Chassis/Eng#:

Accident Date : 03/10/2018 Claim No. : TP 314-18 Reference : SHD 9725 S

Policy No.: AXA VA1/GA068862

Amount S\$

2,300.00

LUMPSUM REPAIR

SingDollars: Two Thousand Four Hundred Sixty-One Only

E. & O.E.

Total S\$ :

2,300.00

GST 7% S\$: Amount Due S\$: 161.00

2,461.00

for PEOPLE'S VEHICLE RECOVERY SERVICE Computer Generated Invoice. No Signature Required.

# LETTER OF AUTHORITY

| Date: 9-11-2018   |                     |                              |                                   |                                 |
|---|---------------------|------------------------------|-----------------------------------|---------------------------------|
| То:   | ×.                  |                              |                                   |                                 |
| ARA Emurane P.  |                     |                              |                                   |                                 |
|   |                     | 300<br>Ž                     |                                   |                                 |
|   |                     |                              | ,                                 |                                 |
|   |                     |                              |                                   |                                 |
|   |                     |                              | , .                               |                                 |
| Attn: Motor Claim Dept  |                     |                              |                                   |                                 |
|   |                     |                              |                                   |                                 |
| Your Ref:   |                     |                              |                                   |                                 |
| Re: Accident involving vehicle No:  | 5 KD 595            | Zand                         | SHP                               | 97255                           |
| I/We Duminic Loung Year I to act for me/us with respect to my/ vehicle No: SICD 595 | our above claim of  | place People<br>repair costs | s Vehicle Rec<br>, rental/loss of | overy Service<br>use for my/our |
| Kindly issue cheque directly to Peop  | ple's Vehicle Recov | ery Service fo               | or above claim                    | ١.                              |
|   |                     |                              |                                   |                                 |
| Yours faithfully  |                     |                              |                                   |                                 |
|   |                     |                              |                                   |                                 |
| Signed By Name: Dominic Levy  | Yero Ka,            |                              | . •                               |                                 |
| Nric No: 57926908   | ٤                   |                              |                                   |                                 |

### > Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

03 Oct 2018 / 11:28:17

Receipt Date/Time: 03 Oct 2018 / 11:28:17

### Tax Invoice/Receipt

Receipt No.: ITNET-00000-181003-000804

| Previo | us Receipt No. :                                 | =                        |                   |               |                     |
|--------|--|--------------------------|-------------------|---------------|---------------------|
| S/N    | Item Description/ Business Transaction Reference |                          | Amount<br>Before  | GST<br>Amount | Amount<br>After GST |
| No.    |  |                          | GST (S\$)         | (S\$)         | (S\$)               |
|        | lt of Insurance Enquiry - SHD9725S               |                          |                   |               |                     |
|        | 03 Oct 2018/09:10:00                             |                          | ****              |               |                     |
| Insur  | ance Co: AXA INSURANCE PTE LTD                   |                          |                   |               |                     |
| 1      | Insurance Enquiry - SHD9725S Enquiry Fee         |                          | 7.00              | 0.49          | 7.49                |
|        | 20181003112721183218                             |                          |                   |               |                     |
|        |  | Sub-Total                | 7.00              | 0.49          | 7.49                |
|        |  | Total Before Rounding    | 7.00              | 0.49          | 7.49                |
|        |  | Rounding Difference      |                   |               | 0.04                |
|        |  | Total Amount Payable     | di                |               | 7.45                |
|        |  | Paid By                  |                   |               |                     |
|        |  | 20181003112733508        | Direct Debit: eNE |               | 7.45                |
|        |  | Total                    | 24.4              |               | 7.45                |
|        | Cash Change                                      |                          |                   | 0.00          |                     |
|        | Tendered Amount                                  |                          |                   | 7.45          |                     |
|        |  | Excess Refundable Amount |                   |               | 0.00                |
|        |  |                          |                   |               |                     |

#### THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF