

Our Ref

: SLS5947T / T421018

Your Ref

: TO BE ADVICED

Date

: 28 March 2019

LONPAC INSURANCE BERHAD 300 Beach Road #17-04/07 The Concourse Singapore 199555.

ATTN: MOTOR CLAIMS DEPT

Dear Sir/Mdm

ACCIDENT INVOLVING: SLS5947T & YL6332T DATE OF ACCIDENT: 11 OCTORBER 2018

ALONG: BLK 523 JURONG WEST ST 52 CARPARK

We refer to the above.

We are claiming as per below:

Grand Total	\$ 2,281.10		
Loss of Income (\$ _ x _ days)	\$		
E-Day License	\$		
LTA /GIA Search Fee	\$ 2.00		
Medical Fee	\$		
Towing Fees (20.00)	\$		
Loss of Rental (\$ <u>140.00</u> x <u>01</u> days) + 7%	\$ 513.60		
Loss of Use (\$ x days) 4	\$		
Cost of Repairs	\$ 1,765.50		

Documents enclosed:

Car date in: 22.10.2018 Car date out: 25.10.2018

Authorized Repair Days: 04 (TP/OD/WS/Recovery of Incidental Costs)

Invoice		Certificate of Insurance
Excess invoice	X	LTA/GIA Search Bill
Power of Attorney		Taxi Bill
Police Investigation Report/GIA		Medical Bill (photocopy)
Copies of NRIC/License of Owner/Driver		Income Statement
Rental Bill/Rental Agreement		E-Day License receipt (photocopy)
Survey Report with Photographs		Towing Fee (photocopy)
		Witness Statement
Letter from Supplier		Traffic Police Investigation Result
	Excess invoice Power of Attorney Police Investigation Report/GIA Copies of NRIC/License of Owner/Driver Rental Bill/Rental Agreement Survey Report with Photographs Vehicle Registration Card/COE	Excess invoice X Power of Attorney Police Investigation Report/GIA Copies of NRIC/License of Owner/Driver Rental Bill/Rental Agreement Survey Report with Photographs Vehicle Registration Card/COE

Main Office:

Mova Building

No. 22. Jalan Kilang, Singapore 159419

WITHOUT PREJUDICE Tel: (65) 6476 3333

Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept:

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

^{*} This is a computer generated letter and does not need a signature.



Please issue the payment of \$\$ 2,281.10 in favor of MOVA AUTOMOTIVE PTE LTD.

If you have any enquires, please call or email Suann Chiu - suann@mova.com.sg

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Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892

Thank you. Yours faithfully, For Claims Manager Claims Department

NOTE: # Please note that the Loss of Use/Rental will be paid based on negotiation and on the Fax: (65) 6270 8314 NIMA Protocol (Court Guideline).

As of 01.06.08 all claims scenario will be based on the BOLA, Barometer Of Liability, GST Reg. M2-0088864-2 set by GIA, General Insurance Association of Singapore.

^{*} This is a computer generated letter and does not need a signature.





*delete as appropriate.

Main Office: Mova Building, No. 22 Jalan Kilang, Singapore 159419. Tel: (65) 6476 3333 Fax: (65) 6271 5891 Website: www.mova.com.sg Workshop: Block 1008, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722 Tel: (65) 6272 3892 Fax: (65) 6270 8314

POWER OF ATTORNEY

a company incorporate in Singapore and having its registered office at owner of Vehicle Registered No. Address)* a company incorporate in Singapore and having its registered office at owner of Vehicle Registered No. All YAMY To hereby irrevocably appoint MOVAAUTOMOTIVE PTE LTD. MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bulkit Merahama and 3 #01-04/06/08 its agents or any person authorized by MOVA to be "my/our Attorney and in "my/our ame(s) and on "my/our behalf to do all or any of the following: 1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings which "t/we may have against the other "party/parties or alternatively under Insurance Policy No. (A) **A **SiD** **D** **I respect to the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by "me/us arising from the Accident (loss and damage). 2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on "my/our behalf as "my/our Attorney shall in MOVA absolute discretion, deem fit. 3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of MOVA AUTOMOTIVE PTE LTD and to give a valid receip and discharge thereof. 4. For any of the purposes aforesaid, to execute, sign, seal and deliver all documents whatsoever in relation thereto. 5. Generally do all such acts as it shall deem necessary for the purpose of settling such claim(s) and the relation thereto. 6. To agree to any settlement at the absolute discretion of MOVA. **I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney in "my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good and the purpose whatsoever as it is the same had been done or executed by "me/us in "my/our claim(s) in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage. **I/We hereby fur	ACCIDENT INVOLVING (Owner's Vehicle No.	SLSS949T	and (Third
**INTIC/Passport No	49(50 SP 1)	to high and C	along
*NRIC/Passport No	Blk 523 Jurong West Street	52 Caypark	
a company incorporate in Singapore and having its registered office at owner of Vehicle Registered No. Address)* ——————————————————————————————————	BY THIS POWER OF ATTORNEY, *I/We,	Shaffle bin Alan Bakar	
a company incorporate in Singapore and having its registered office at owner of Vehicle Registered No. 3 (% \$744 \$1			(Address)*
Address)*	ZII		
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"my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by " me/u in "my/our own proper person(s) and "I/we hereby ratify and confirm, all acts, instruments and documents done of executed by virtue of the authority and powers hereby conferred. *I/We hereby further declare that the powers and authority hereby conferred shall remain irrevocable. *I/We further comfirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage. *IN WITNESS WHEREOF. *I/We have hereunto to set *my/our hand and seal this day of the mont of, Year Two Thousand (20). Signed, Sealed & Delivered By	 Generally do all such acts as it shall To agree to any settlement at the a 	I deem necessary for the purpose of settling bsolute discretion of MOVA.	such claim(s) and
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Aught *	*IN WITNESS WHEREOF. *I/We have hereu of, Year Two Thousa	unto to set *my/our hand and seal this day	of the month
And A	Signed, Sealed & Delivered By		
Aught ×			
	Lhuh		

Insurer's copy

Co's Rubber Stamp, where applicable.

The acceptance of this offer is Without prejudice to any personal Injury claim/insure's claim/expenses



LONPAC INSURANCE BHD

CLAIM NO : 18/18/18/VC05/021020

DATE

: 07 MAY 2019

DISCHARGE VOUCHER

I/We, SHAFIE BIN ABU BAKAR confirmed acceptance from M/s LONPAC INSURANCE BHD and/or owner of YL 6332T the sum of Singapore Dollar One Thousand Eight Hundred Only (\$1,800.00) in full and final satisfaction, liquidation and discharge of all property losses competent to me/us upon the said M/s LONPAC INSURANCE BHD in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving YL 6332T and SLS 5947T on 11 October 2018 along BLK 523 JURONG WEST ST 52 CARPARK.

I /We hereby agree to indemnify and keep indemnify (LONPAC INSURANCE BHD/ ONG HONG GHEE) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to MOVA AUTOMOTIVE PTE LTD.

I/We hereby acknowledged that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.

Signature of vehicle owner/Date

Name of vehicle owner /Date



Main Office:

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www.mova.com.sg

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Singapore 159722

Tel: (65) 6272 3892

Fax: (65) 6270 8314

Co. Reg. 198904033G

GST Reg. M2-0088864-2

132886 Page # Performa Invoice

27/03/2019

LONPAC INSURANCE BHD

300 BEACH ROAD

#17-04/07 The Concourse

SINGAPORE 199555.

Attention :- XA025

Description No.

Lump Sum Amount

Veh# - SLS5947T

Veh Model :- MAZDA MAZDA2 AT R

Performa# :- CK508107

JOB# :- T421018

ACC. Date :- 11/10/18

Qty

:- C.O.D Terms

Remarks :-

U.Price

Amounts S\$

1,650.00

E. & O.E

AMOUNT S\$

1,650.00 115.50

GST @ 7 %

AMOUNT DUE S\$

1,765.50

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD



AUTOMOTIVE PTE LTD

Website: www.mova.com.sg

Automotive Pte Ltd RENTAL AGREEMENT

Main Office: No. 22 Jalan Kilang, Singapore 159419 Bukit Merah Branch: Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122

RANO.: I 1204

Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792
Tel: (65) 6476 3333 Fax: (65) 6270 8314
24 Hours Breakdown Service: (65) 9799 8888
Bedok Branch: 219 Bedok Central #01-138, Singapore 460219

RENTAL DETAILS			INSU	INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	JETTA	Vehicle No:5 KN 5123 S	Singapore	Malaysia	Signature	
Date/Time Out:	22/10/18	10.30	S\$	S\$	10	
Petrol Level Out:	E 1/8 1/4 3/8 1/	2 5/8 3/4 7/8 F	Per Accident	Per Accident		
Date/ Time In:	25 - 10. 2018	17.30	Charges			
Petrol Level In:	E 1/8 1/4 3/8 1/	2 5/8 3/4 7/8 F	Months @\$ Per Month Weeks @\$ Per Week U Days @\$120.00 Per Day Hours @\$ Per Hour		or the late set.	
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Change Over 2:	Date:	Initial:			480.00	
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Named Hirer			Less Discount	%		
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Address:	BLK 275B JUYON	275B Jurona West Street 25 CDW@\$ perday/ week/ month		Carrier St. Landson St. Landson	Company of the Company	
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Priving License:		period so roller	VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS	White and the second	
Country of Issue:			Pre-P	ayment		
Tel:	(HP) 98890341 (O)		Downpayment and Deposit		en all distribution	
Nationality:			Amount Refunded/ Due Signature of Refund			
Effective Date:	The second second	he his most of a greated an			all alternative of	
Additional Hirer	THE PROPERTY OF THE PARTY OF TH	r determing resign wheyer, wante with biggreening out not with a	Remarks:	v intrincti anoli incalura		
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Country of Issue:	- Tan 4 march 201 (1)		Past 3 years accidents YES NO			
Tel:	(HP)	(0)	Lucythia econtes bine t			
Nationality:		Ded Princes and United the se	TO ANNUAL VIEW AND A			
Effective Date:	selection for elegander	no had been been always	one between stantes and			

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
 All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
 The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered as a day rental.
- 5. All traffic infringements and summons (if any) are the responsibility of the Hirer.



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-18-157997

Date of Request:

11/10/2018

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd Blk 1008, #01-04/06/08/94 Bukit Merah Lane 3 Singapore 159722

Dear Sir/Madam,

Enquiry Date

11/10/2018

Enquiry By

Goh Jia Yu YL6332T

TP Vehicle No. Accident Date

11/10/2018

Enquiry Result

TP Vehicle No. Insurer Period of Insurance Insurer Tel. No. YL6332T Lonpac Insurance Bhd 12/09/2018-11/09/2019 +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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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-18-157997

Date of Request:

11/10/2018

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd Blk 1008, #01-04/06/08/94 Bukit Merah Lane 3 Singapore 159722

Dear Sir/Madam,

Enquiry Date

11/10/2018

Enquiry By

Goh Jia Yu

TP Vehicle No. Accident Date YL6332T 11/10/2018

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

Thank You,

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque