

Our Ref : SLS5947T / T421018
Your Ref : TO BE ADVISED
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:

Cost of Repairs	\$ 1,765.50
Loss of Use (\$ __ x __ days)	\$
Loss of Rental (\$ 140.00 x ⁴ 01 days) + 7%	\$ 513.60
Towing Fees _{120.00}	\$
Medical Fee	\$
LTA /GIA Search Fee	\$ 2.00
E-Day License	\$
Loss of Income (\$ __ x __ days)	\$
Grand Total	\$ 2,281.10

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)

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

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

If you have any enquires, please call or email **Suann Chiu** – suann@moval.com.sg

Thank you.
Yours faithfully,
For Claims Manager
Claims Department

Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
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

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

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

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

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



Automotive Pte Ltd



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

ACCIDENT INVOLVING (Owner's Vehicle No.) SL55947T and (Third
Party's Vehicle No.) YL6332T on 11/10/2018 along
Blk 523 Jurong West Street 52 carpark

BY THIS POWER OF ATTORNEY, *I/We, Shafie bin Abu Bakar
NRIC/Passport No. S7528243E (Address)
Blk 275B Jurong West Street 25 # 04-107 S(142275)

a company incorporate in Singapore and having its registered office at
(Address)*
SL55947T hereby irrevocably appoint MOVA AUTOMOTIVE PTE LTD,
(MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah
Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be *my/our Attorney and in *my/our
name(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 *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. GA 875403/1 taken up by *me/us (subject to approval by my Insurance Company) in respect of 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 receipt 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
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 on *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/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or 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 confirm 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 02 of the month of Oct, Year Two Thousand - 2018 (20 18).

Signed, Sealed & Delivered By


Customer's Name: Shafie bin Abu Bakar
NRIC No: S7528243E
Co's Rubber Stamp, where applicable.

Insurer's copy

*delete as appropriate.



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

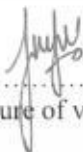
DISCHARGE VOUCHER

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

SHAFIE Bin Abu Bakar
.....
Name of vehicle owner /Date

Performa Invoice

27/03/2019

LONPAC INSURANCE BHD
 300 BEACH ROAD
 #17-04/07 The Concourse
 SINGAPORE 199555.

Attention :- XA025

Page # :- 1 132886

Veh # :- SLS5947T

Veh Model :- MAZDA MAZDA2 AT R

Performa# :- CK508107

JOB # :- T421018

ACC. Date :- 11/10/18

Terms :- C.O.D

Remarks :-

Main Office:
 Mova Building
 No. 22, Jalan Kilang,
 Singapore 159419
 Tel : (65) 6476 3333
 Fax : (65) 6274 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

No.	Description	Qty	U.Price	Amounts S\$
	Lump Sum Amount			1,650.00

E. & O.E

AMOUNT S\$	1,650.00
GST @ 7 %	115.50
AMOUNT DUE S\$	1,765.50

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

**MOVA**

AUTOMOTIVE PTE LTD

Website: www.mova.com.sg

Co. Reg. No.: 198904033G

Automotive Pte Ltd

Main Office: No. 22 Jalan Kilang, Singapore 159419

Bukit Merah Branch:

Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122

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

Tel: (65) 6604 7877

RENTAL AGREEMENT

RANO.: I 12041

RENTAL DETAILS			INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	JETTA	Vehicle No: SKN 51235	Singapore	Malaysia	Signature
Date/Time Out:	22/10/18	10.30	S\$	S\$	
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F				
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	
Change Over 1:	Date:	Initial:	Weeks @\$	Per Week	
Change Over 2:	Date:	Initial:	4 Days @\$120.00	Per Day	480.00
KM Out:	KM In: 2659		Hours @\$	Per Hour	
HIRER DETAILS			Sub-Total		
Named Hirer			Less Discount %		
Name:	Shafie Bin Abu Bakar		Rental Charges		
Address:	BLK 25B Jurong West Street 25		CDW @\$	per day / week / month	
	#04-107		PAI @\$	per day / week / month	
	S(64225)		Petrol Top-Up		
Identity Card No:	57528243E		Misc Charges		
Date of Birth:	15/9/1975		GST 7%		32.60
Driving License:			Total		
Country of Issue:			413.60		
Tel:	(HP) 98890341	(O)	VISA / MASTER CARD / AMEX CASH / COMPANY BILLING / OTHERS		
Nationality:			Pre-Payment		
Effective Date:			Downpayment and Deposit		
Additional Hirer			Amount Refunded/ Due		
Name:			Signature of Refund		
Address:			Remarks:		
Identity Card No:			Invoice No: Ref. No:		
Date of Birth:			Checked Out By: Checked In By: Checked By:		
Driving License:			Sales-In Charge:		
Country of Issue:			Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/>		
Tel:	(HP)	(O)			
Nationality:					
Effective Date:					

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/ credit card voucher given above. All above information given by me are true in connection to this agreement.

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.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.

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

TP Vehicle No. YL6332T

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.

This is a computer generated document and requires no signature.

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.: YL6332T
Accident Date: 11/10/2018

DESCRIPTION	AMOUNT (\$\$)
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:

☒ GIRO ☐ Cash ☐ Cheque