# 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/ASM18018912/Ghb3

Our ref: GY3991E

14/11/2018 WITHOUT PREJUDICE

Attn: Motor Claim Dept

AXA INSURANCE SINGAPORE PTE LTD NO. 8 SHENTON WAY AXA TOWER SINGAPORE 068811

Dear Sir/Mdm,

#### Accident involving GY3991E and SMC6754Z on 13/10/2018

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Repair tax invoice
- Letter of authorization
- GIA search receipt

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

 Cost of Repair
 :
 S\$ 432.38

 Loss of use (3 Days x \$100.00)
 :
 S\$ 300.00

 LTA Search Fee
 :
 S\$ 7.45

 S\$ 739.83

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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#### **AXA INSURANCE SINGAPORE PTE LTD**

SHENTON WAY **AXA TOWER** SINGAPORE 068811

Attention: Motor Claim Department

Contact: 6338 7288 Fax No.: 6880 4838

#### **TAX INVOICE**

Tax Invoice: I2018-007759 Date: 01/11/2018

Vehicle No.: GY3991E

Make / Model: NISSAN CABSTAR G

Mileage (km): 0

Chassis No.: JN1SF4F23Z0853910

Accident Date: 13/10/2018

Claim No.: CC4/ASM18018912/Ghb3

Reference: JO201810-0468 Policy No.: 18-MX007730-R04

S/No.	Particular	Quantity	Unit Price	Amount
			<u>S\$</u>	<u>S\$</u>
	LIST ITEMS:			
1	RH taillamp	1.0	148.70	148.70
	List Total :			148.70
	30% Discount S\$:			44.61
				104.09
	LABOUR:			
	-To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts		120.00	120.00
	- Spray painting on affected & replace parts		180.00	180.00
	LABOUR Total S\$:			300.00

Total S\$: 404.09 GST @ 7% S\$: 28.29 432.38

Grand Total S\$:

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

- 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.



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### RE: LETTER OF AUTHORIZATION

Name of	owner	:_H	2 1	ENGIL	IEERIN	6 0	HSTRUCT	IOH	NRIC:_	532	45106J		
Address:				·								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name of	Driver	HEN	DRIK	QUEK	HONG	KHAI			NRIC:	5100	3793Z		
Address:	APT	BLK	62	LURON	9 4	TOA	PAYOLI	#	09-103	SIN	GAPORE	31006	2.
Accident	on	13/10/2	013		_Invol	ving_	smo	675	4 Z	<del></del>			
At/along_	AT	SEMBA	IWAH	G ROA	D. LP	160	MEAR	KHAT	IZ CA	MP			12 27
In consider at my/our them to do or to commuse/rental accident/authorize	reque emand mence d, etc a claim them eby au	est I/Work I claim I claim I legal Ind to a I and all I to give I thorize	e the as, sett proce my of amoust an also City	above of the and reding if there appropriate claim of the Auto Propriet and Auto Pro	wner of eccivers necess ppointed or discharte Ltd,	f Moto d whate sary in ed solic settled ge on r	r Vehicle ever amo my/our r itors to a I shall be ny/our b r repairer	No: _ unt pa ame f ct for belon chalf. to giv	yable by or the come/us in g to there	the Ins st or rep respect absolu	do urance Co pair and the of the sai utely. I/W ction on m	authoriz or Thire ne loss of id e further	i Party
My/Our r valid disc me/us.	epaire												
I/We fur to prosec									ng that a	e neces	sary and s	subject	•
I/We fur therewith		gree to	under	take to	indemr	ify the	m agains	t my/o	our claim	for the	cost which	ch arises	
In the ev repairs to					ful clai	m, I/W	e undert	ake to	pay the 1	epairer	for the co	ost of	
Owner S	ignati	ıre:	(0)	MOIS	)		W	iness	_	Blk 8 S	JTO PTI	oad	
Name: _						- N	N	ame: _	#01	-58/60/6 Singa 6453 12	35 Fax: 6	g Ind Est 43 453 7944	ES
Date: _	15	-10		2018	)		D	ate: _			ms Section		



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 15 Oct 2018 / 16:56:16

Receipt Date/Time: 15 Oct 2018 / 16:56:15

#### Tax Invoice/Receipt

Receipt No.: ITNET-00000-181015-001912

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMC6754Z As at 13 Oct 2018/14:00:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SMC6754Z Enquiry Fee		7.00	0.49	7.49
20181015165445389522		7.00	0.43	7.45
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	xxxxxxxxxxx3749	Credit Card /MasterC		7.45
	Total			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.