

ELITE AUTOMOTIVE PTE LTD

280 Woodlands Industrial Park E5, #01-17 Harvest @ Woodlands (S) 757322

Tel : 63397378/ 86606722 Fax: 63397475

Reg No: 201700196D GST Reg No: 201700196D

Date : 17/10/2019

OUR REF : TP/SDA 6020A/19

M/S : INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET
#05-01 IOB BUILDING
SINGAPORE 049711

Statement Of Claim On Veh No : SDA 6020A
MODEL : BMW 520I

LUMP SUM OF REPAIR

INCLUDING SUPPLY OF PARTS & LABOUR

PANEL BEATING & SPRAY PAINTING		\$10,800.00
	7%GST	<u>\$756.00</u>
		<u>\$11,556.00</u>

LOSS OF USE (\$180 X 16DAYS)		\$2,880.00
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*PRE-REPAIR INSPECTION

*INCLU WEEKEND

*POST REPAIR

TP REPORT		<u>\$29.00</u>
		<u>\$14,465.00</u>

Date: _____

To: _____

LETTER OF AUTHORITY & INDEMNITY

I/We, KOH JIA HAO NRIC / Company Registration No. S91112801 of (address) BLK 141 YISHUN RING ROAD #10-08 s(7601A1) the registered owner (or his/ her/ their/ agent) of motor vehicle SDA6020A, hereby authorise M/ Elite Automotive Pte Ltd ("the Repairer") to commence repairs to my / our vehicle and to forward the claim for among other things, the cost of repairs to the owner/ insured of the Third Party responsible for the said accident on (date) 30/11/18 involving motor vehicle nos. SHB4014D & SJV657X along FARVEY ROAD TOWARDS QUEENSWAY. I further authorise M/ Elite Automotive Pte Ltd to sign and execute all documents in my name, including but not limited to the Discharge Voucher in connection with the claim against the Third Party.

I will also render full co-operation to M/ Elite Automotive Pte Ltd in the following situations:

1. Present my car for pre-inspection, post-inspection and/ or re-inspection, should it be requested for by the insurance company.
2. I will sign the Discharge Voucher when presented by the Repairer, upon final confirmation of liability and quantum, accepted by the Repairer.
3. In the event where I were to receive any cheques from the third parties' insurance company for the payment of the repairs, I will forward the said payment to M/ Elite Automotive Pte Ltd.

I / We hereby also confirm that I was involved in the said above mentioned accident and that it was not a false or staged accident. I / We are fully aware and advised that if the above accident was proven to be a false or fraudulent accident, I / We will be liable to pay for all your damages, expenses and other incidental charges. I / We will also have to bear your legal costs incurred on an indemnity basis for any legal action which may arise against me/ us with regards

to the above incident.

My / Our vehicle is repaired by the Repairer on my/ our own free will and without any threat, inducement and/ or promise.

A handwritten signature in black ink, consisting of a vertical stroke with a small horizontal tick at the bottom.

Signature / Company Stamp

Name:

DIRECT CREDIT AUTHORISATION FORM

Insurance Pte Ltd

This form is to be completed by the Supplier of India International. Payment will be credited directly
(Name of Paying Organisation)

into the Supplier's bank account stated below through Interbank Giro. The Supplier has to complete Part I of the form, obtain his banker's certification in Part II and return the duly completed form to
India International Insurance Pte Ltd
(Name of Paying Organisation)

Part I (To Be Completed By Supplier)

(A) To: India International Insurance Pte Ltd
(Name of Paying Organisation)

Supplier's Particulars:

Name: Elite Automotive Pte Ltd
Address: 280 Woodlands Industrial Park ES, # 01-17 Harvest @ Woodlands (S) 757322
Telephone Number: 93882885 Fax Number: _____
Name of Bank: OCBC Name of Branch: North Branch
Account Number To Be Credited: 712063999001

I We hereby authorise India International Insurance Pte Ltd to credit payments due to me/us to the above account
(Name of Paying Organisation)

This authorisation shall continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivered to my/our address last known to you

In the event of a change of bank account, I/we shall inform you in writing 2 weeks in advance before the change.

(B) To: OCBC
(Name of Supplier's Bank)

I We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in this document.

[Signature]
Signatures and Company's stamp As In Bank Account

17/12/19
Date

Part II (To Be Completed By Supplier's Bank)

To: _____
(Name of Paying Organisation)

Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that in our files. The account number to be presented in the Interbank Giro format is as follows:

Bank: 71339 Branch: A12 Account Number: 063999001

[Signature]
Name & Signature of Authorised Bank Officer



17/12/19
Date



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-0078806-X
64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
Office (65) 63476100 Email insure@iii.com.sg
Fax (65) 62244174 Website www.iii.com.sg

EXPRESS SETTLEMENT

Signed without prejudice for any claim for personal injury

DISCHARGE VOUCHER
III-Direct Settlement (PODS)

India Ref: MCT18110916
Claimant Ref : SDA 6020A

We/I, ELITE AUTOMOTIVE PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 11,556.00 (repair cost), S\$ 1,280.00 (loss of use/rental), S\$ 29.00 (search fee), vehicle no. SDA 6020A that was damaged pursuant to the accident which occurred on 30/11/2018 (date) at FARRER ROAD TWDS QUEENSWAY (location) involving vehicle no. SHB 4014D (insured vehicle). This is pursuant to the inspection conducted on 03/12/2018 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner KOH JIA HAO ("the third party claimant") of vehicle no. SDA 6020A to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SDA 6020A (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 12,865.00 to ELITE AUTOMOTIVE PTE LTD

Dated this 17 day of Dec 2019

CLAIMANT:

Signature:

Christy

Signed by "the workshop" (with chop)

Name:

Hang Pek Chin

NRIC:

S 8369022D

Address:

280 Woodlands Industrial Park E5, # 01-17 Harvest @ Woodlands (S) 757322.

Nationality:

Occupation:

Manager

WITNESS:

Signature:

Signed by appointed Surveyor

Name:

LKK Auto Consultants Pte Ltd

NRIC:

199607198R

Address:

51 Ubi Avenue 1

#01-25 Paya Ubi Ind. Park S(408933)

Nationality:

Occupation:





Elite Automotive Pte Ltd

23HRS SERVICES

Co.Regn No: 201700196D

GST.Reg.No: 201700196D

280 Woodlands Industrial Park E5 #01-17 Harvest@Woodlands (S) 757322

Hotline: 8660 6722 Tel: 6339 7378 Fax: 6339 7475 Email: elite.automotive13@gmail.com

TAX INVOICE NO : EA1912-614

Messrs : INDIA INTERNATIONAL INSURANCE PTE LTD

Date : 17/12/2019

Address : 64 CECIL STREET #05-01 IOB BUILDING
SINGAPORE 049711

Email : _____ Mobile : _____ Home/Office Tel : _____

No	Description	Qty	Amount
	<u>OUR REF : TP/SDA 6020A/19</u>		
	<u>ACCIDENT INVOLVING SDA 6020A AND SHB 4014D ON 30/11/18</u>		
	<u>VEHICLE NO: SDA 6020A (BMW 520I)</u>		
	<u>YOUR REF : MCT18110916</u>		
1	COST OF REPAIR	1	\$ 10,800.00
			\$ 10,800.00
		GST 7%	\$ 756.00
		Total	\$ 11,556.00



Elite Automotive Pte Ltd

Customer Signature & Company Stamp



**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-18-187701
Date of Request: 04/12/2018

Your Ref No: Online Purchase

Elite Automotive Pte Ltd
280 Woodlands Industrial Park E5
#01-17, Harvest@Woodlands
Singapore 757322

Dear Sir/Madam,

Date of Accident: 30/11/2018
Vehicle No: SDA6020A
Location of Accident: FARRER ROAD TWDS QUEENSWAY
Involving Vehicle No: SHB4014D

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\$)
SHB4014D	FARRER ROAD TWDS QUEENSWAY	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Mode:

GIRO Cash Cheque



**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-18-187666
Date of Request: 04/12/2018

Your Ref No: Online Purchase

Elite Automotive Pte Ltd
280 Woodlands Industrial Park E5
#01-17. Harvest@Woodlands
Singapore 757322

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 30/11/2018
Place of Accident: FARRER ROAD TWDS QUEENSWAY
Client Vehicle No: SDA6020A

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

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

GIRO Cash Cheque