

#### LETTER OF DEMAND

Your Ref: XD65135		
Our Ref: Smf 7319/	4	
To: Lon pac		
Dear Sirs,		4.1
ACCIDENT INVOLVING	SM77319A & XD65135 ON	28 11 2018
We are claiming on behal	fofourclient Lawrence Con Chee	tigng.
owner of vehicle number	SM17319A involved in accident	8100 1186 nc
with vehicle × D 6 5	335 along/at BIK 339 Hougaing	AUE7.
Description of claims:		
Cost of Repairs	\$_8,004.45.	(incl 7% GST)
Loss of Use/Rental	$\frac{100}{x}$ X 5 Days = $\frac{6}{x}$	<u>oo</u> . (incl 7% GST)
Search Fee	\$\$	(incl 7% GST)
Miscellaneous Fee	\$	(incl 7% GST)
TOTAL	\$ 8,696.43	(incl 7% GST)
We are claiming in full an payable to <b>Volkswagen G</b>	d final settlement of \$ 6,696.45.	

Kindly send us a written acknowledgement within 14 days from receipt of this document. Please note that finalization/settlement offer of this claim should be within 8 weeks from the date of this document. Please email all settlement offers to <a href="mailto:shushi.tang@vw.com.sg">shushi.tang@vw.com.sg</a>





#### Service Tax Invoice No. SV19P00252

Biz Reg. No. 53103069E GST No. M20098505-2

SERVICE ORDER NO: 18IP3202

SERVICE CUSTOMER NO.: F05635C

SERVICE CUSTOMER NAME.: Lonpac Insurance BHD

TELEPHONE NO .:

ADDRESS:

101 Thomson Road

#18-01 United Square

Singapore

DESCRIPTION

Post Code:

No.

307591

VEH NO .:

**SMF7319A** 

Pickup:

DATE: VIN NO.:

TMBBP7NE2J0357912

KM:

2,882

GEARBOX CODE:

SST

03/01/19

Engine No.:

MODEL:

Octavia 1.0 85kW Amb

SA:

UOM

STEVEN CHEE

Next Appointment Date:

UNIT PRICE

Next Appointment Mileage :

AMOUNT

LONPAC DIRECT SETTLEMENT

DOA: 28/11/2018 T/P VEH: XD6513S

	VEH : XD6513S EVEY BY : GUOQIANG (LKK)				
	Labor				
1	LABOUR	2.00	UNIT	840.00	1,680.00
2	SPRAY PAINT	2.00	LAB	800.00	1,600.00
3	Tow SVC- Quality Recovery Services	1.00	UNIT		
4	Tow SVC- Quality Recovery Services	1.00	UNIT		
5	PROGRAMMING & CALIBRATION NETT	1.00	TU	480.00	480.00
6	CHECK WIRE HARNESS, ECU, SENSOR, LIGHT	1.00	TU	280.00	280.00
	Item				
7	GUIDE PROFILE LEFT	1.00	PCS	31.59	31.59
8	FRT BUMPER	1.00	PCS	1,268.86	1,268.86
9	FRONT LHS WHEEL HOUSING	1.00	PCS	98.98	98.98
10	FRONT LHS FENDER	1.00	PCS	647.76	647.76
11	FENDER BRACKET LH	1.00	PCS	127.25	127.25
12	SENSOR BRACKET	1.00	PCS	104.58	104.58
13	SENSOR BRACKET	1.00	PCS	104.58	104.58
14	SENSOR BRACKET	1.00	PCS	104.58	104.58



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SERVICE ORDER NO: 18IP3202

SERVICE CUSTOMER NO .:

SERVICE CUSTOMER NAME.: Lonpac Insurance BHD

TELEPHONE NO .:

ADDRESS:

101 Thomson Road

#18-01 United Square

Singapore

Post Code:

307591

VEH NO.:

**SMF7319A** 

DATE:

03/01/19

Pickup:

VIN NO.:

TMBBP7NE2J0357912

KM:

GEARBOX CODE:

SST

Engine No.:

MODEL:

Octavia 1.0 85kW Amb

2,882

SA:

STEVEN CHEE

Next Appointment Date :

Next Appointment Mileage: 0

No.	DESCRIPTION	QTY	<u>UOM</u>	UNIT PRICE	AMOUNT
15	SENSOR BRACKET	1.00	PCS	104.58	104.58
16	HEADLAMP LH	1.00	PCS	775.74	775.74
17	2KADHESIVE	1.00	PCS	89.84	89.84
18	BONDAGENT	1.00	PCS	64.27	64.27
19	NUT	2.00	PCS	1.15	2.30

GST (7%) AMOUNT:

529.54

TOTAL AMOUNT:

8,094.45

For Volkswagen Group Singapore Pte Ltd

VOLKSWAGEN GROUP

uthorised Signatory

81030002

Customer

NOTICE

1. All fund transfer payments should be made payable to Volkswagen Group Singapore Pte Ltd Bank Account: 2528214002 Swift Code: DEUTSGSG Please indicate Customer Name and Invoice Number in the payment

# SKYWAY MOTOR PTE LTD

400 ORCHARD ROAD #15-06 ORCHARD TOWER, SINGAPORE 238875 Tel: 6333 6333 Fax: 6416 8555

#### TAX INVOICE

RCB: 199904194N GST: 199904194N

LAWRENCE KOH CHEE KIANG

339 HOUGANG AVENUE 7 #10-413

SINGAPORE 530339

INVOICE

AR201812-000918

DATE

26/12/2018

**TERMS** 

SALESMAN:

C.O.D

**JENNIFER** 

PO NO

RA03436

NO.	DESCRIPTION	UNIT	AMOUNT (S\$)
1	Rental Billing From 26/12/2018 To 31/12/2018 (SLJ9635P)	5 Day(s)	600.00
	Your Ref : SMF7319A		
	Make and Model: VOLKSWAGEN JETTA 1.4 TSI (DSG)		
	DECEIVE DECEIVE		
	2 6 DEC 2018 3 1 DEC 2018		
	BY: 40B CC 9360  BY: 40B CC \$340		
	JNT:S\$	SUB TOTAL :	560

SIX HUNDRED AND DOLLARS AND ZERO CENTS ONLY

Please issue cheque payable to SKYWAY MOTOR PTE LTD and send us a copy of cheque image then bank in to our DBS Bank Ltd. Current A/C No. 003-947-267-6.

SUB TOTAL 560.75 **GST 7%** 39.25 TOTAL S\$ 600.00



SKYWAY MOTOR PTE LTD 400 Orchard Road #15-06 Singapore 238875

Tel: 6333 6333 Email: rental@skyway.com.sg Company Reg. No. 199904194N GST Reg. No. 199904194N

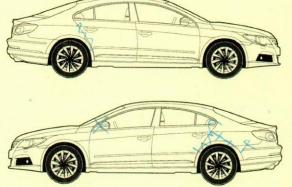
#### **RENTAL AGREEMENT**

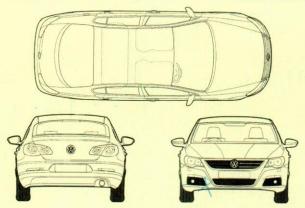
NO. 03436



## **BILLING COPY**

	ARTICULARS	TELLITE VEHICLE LANGE					
Owner's Vehicle No.: 5 m +	7319 A	Rental Vehicle N	No.:	5	179635	Palada	
Model: Octavia		Model: DeH	la.	in son ten	kata da mandaran	geta in mult	
Name: Lawrence koh	Chec Iciang.			Date	& Time	Mileage	Out
Address: PLIC 339 Hough		Collection Ou	ut	26/12/18	@ 8.30am.	3641	0.
#10-413 5(3	30339)	Return In		Date	& Time	Mileage	In
i sa	na attract a squarge or another design	Return in	31	33/13/18	@ npm	36671	
Office Tel:	Residence Tel:	1/4	1 1/2	Petro	ol Level	1/2	22115
Occupation	Hp/Pgr No: 96640478.	OVET (		Tai		KC	
P.P/I.C No.: 376/0494 4	Nationality:	OUT E		F	E	Total	F IN
Date of Birth: 12/4/1976	Place of Birth:			RENTAL	CHARGES	Malaysia D	1
Dr. Licence No.	*						
Date of Issue:	Country of Issue:	Months	@\$		per month		
ADDITIONAL DRIV	ER'S PARTICULARS	Weeks	@\$	150	per week	3601	
Name:		Days	@\$	120	per day	300	
Address:		Hours + 2 day	@\$ \\$17	Didas	per hour	240/-	
				1	CHARGES		
å,		PETROL	TOP-U	JP CHARGES	3		
Office Tel:	Residence Tel:	MISC					
Occupation	Hp / Pgr No:						
P.P / I.C No.:	Nationality:	TOTAL					
Date of Birth:	Place of Birth:			RGES (in	nel 7% GST)	600	00
Dr. Licence No.		PAYMENT MODI	E				
Date of Issue:	Country of Issue:	☐ Master : ☐ VISA :					
IMPORTANT: The vehicle will not be insured a accident the Hirer will be liable for all consequen	fter the expiry of the hire period and in case of any ces.	☐ Cash : ☐ Others :				E III	
			- 9		-		





Remarks:			

CHECKED OUT BY

CHECKED IN BY



### 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-18-185784

Date of Request:

30/11/2018

Your Ref No:

Online Purchase

Volkswagen Centre Singapore 247 Alexandra Road Singapore 159934

Dear Sir/Madam,

**Enquiry Date** 

30/11/2018

**Enquiry By** 

Edmund Goh Hui Huang

TP Vehicle No.

XD6513S

Accident Date

28/11/2018

**Enquiry Result** 

Enquiry Result			Insurer Tel. No.
TP Vehicle No.	Insurer	Period of Insurance	Illisulei Tel. 140.
		15/10/2018-14/10/2019	+65 62507388
XD6513S	Lonpac Insurance Bhd	13/10/2010-14/10/2013	

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.





Biz Reg. No. 53103069E GST No. M20098505-2

#### **DISCHARGE VOUCHER**

I/We LAWrence Icoh Chee king (Passport No. 3761049+H) the
owner of vehicle number SMF7319A hereby accept from
(Insurance Company) the sum of
(total repair cost) in full and final settlement for the cost of repairs
arising from the loss damage of property as a result of the accident involving
Sm77319A & ×D65135 along BIK 339 Hougay AVE 7 on >8/11/18.
on > (1   8 .
Please pay to Volkswagen Group Singapore Pte Ltd who is authorized to receive
only on the total cost of repair on my/our behalf.
The lost of use (transport allowance / rental receipts) to be payable to
VOLKSWAGEN GROUP SINGAPORE PTE LTD.
Dated this on 31 12 18 (DD/MM/YYYY)
1 1/4

(Signature of owner / Company stamp)

Name : Lawrence ton Chee King.

NRIC No.: 376104944.

Date : 31/12/18



# 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-18-185784

Date of Request:

30/11/2018

Your Ref No:

Online Purchase

Volkswagen Centre Singapore 247 Alexandra Road Singapore 159934

Dear Sir/Madam,

**Enquiry Date** 

30/11/2018

Enquiry By

Edmund Goh Hui Huang

TP Vehicle No.

XD6513S

Accident Date

28/11/2018

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



CLAIM NO : 18/18/18/VP05/021167

DATE

#### **DISCHARGE VOUCHER**

I/We, LAWRENCE KOH CHEE KIANG confirmed acceptance from M/s LONPAC INSURANCE BHD and/or the owner of XD 6513S the sum of Singapore Dollars Eight Thousand Six Hundred Thirty-One and Cents Forty-Five Only (\$8,631.45) in full and final satisfaction, liquidation and discharge of property claim competent to me/us upon the said M/s LONPAC INSURANCE BHD in respect of property claim sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident to my vehicle, SMF 7319A on 28<sup>th</sup> November 2018 along/at Hougang Avenue 7.

I /We hereby agree to indemnify and keep indemnify (SHIN KHAI CONSTRUCTION PTE LTD/ LONPAC INSURANCE BHD) 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 M/s VOLKSWAGEN CENTRE SINGAPORE.

I/We hereby acknowledge 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

Lawrence Kih Chee King 9/3/19

Name of vehicle owner/Date



Biz Reg. No. 53103069E GST No. M20098505-2

### **LETTER OF AUTHORITY**

	ACCIDENT INVOLVING SMF 73 19 A and Solve vehicle's number on Solve 13 S Other vehicle's number on Date of accident
	ACCIDENT INVOLVING SMF 7319 A  Own vehicle's number of Six Six Six Other vehicle's number of abcident
	Accident location
	BY THE LETTER OF AUTHORITY, I/we, Lawrence kon once I gione
	of S 76 104A4 H  Name of Policy Holder & IC / Passport number  owner of Vehicle Registration
	of the second of
	Own vehicle's number
	(hereinafter refer to VGS), a company incorporated in Singapore and having its registered office at <b>247 Alexandra Road, Singapore 159934</b> , its agents of any person authorized by VGS to be *my / our Attorney and in * my / our name(s) 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 numbertaken up by *me/us and pay the compulsory excess in respect of the cost repairs suffered by *me/us arising from the Accident (loss and damage)/.
2.	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 favour of <b>Volkswagen Centre Singapore</b> and give a valid receipt and discharge therefore.
3.	For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
4.	Generally do all such acts as it shall deem necessary for the purpose of settling such claim.
	*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on *my/our behalf by the Attorney, its agents or any person authorized by VGS in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if 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 letter of authority hereby conferred shall remain irrevocable.
	*I/We further confirm that the acceptance by VGS 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 sign this of the month
	Year
	Signed & Delivered By:
	Lower leh x
	Policy Holder Witness By:
	VOLKSWAGEN
	GROUP
	81030002