

Volkswagen Centre Singapore



Service Tax Invoice No. SV19P01382

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

SERVICE ORDER NO: 18IP3326

SERVICE CUSTOMER NO.: F01089R

SERVICE CUSTOMER NAME.: AIG ASIA PACIFIC INSURANCE P/L

TELEPHONE NO.:

ADDRESS: 78 Shenton Way
#07-16 AIG Building
Singapore

Post Code: 079120

VEH NO.: SLC8657U

DATE: 10/01/19 Pickup:
VIN NO.: WVVZZZ7NZDV034549 KM : 55,438
GEARBOX CODE: Engine No.:
MODEL: Sharan NF 2.0 TSI (DSG6) MY
SA : Kong Charmaine

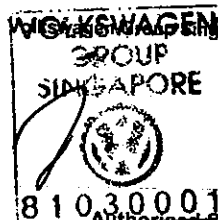
Next Appointment Date :

Next Appointment Mileage : 0

No.	DESCRIPTION	QTY	UOM	UNIT PRICE	AMOUNT
AIG DIRECT SETTLEMENT					
DOA: 11.12.18					
SURVEYOR LKK					
AIG/LKK REF: CC3/AIG18022391/R1hb3					
	Labor				
1	LABOUR	1.00	LAB	840.00	840.00
2	SPRAY PAINT	1.00	LAB	800.00	800.00
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, SOCKET	1.00	TU	280.00	280.00
	Item				
7	REAR BUMPER	1.00	PCS	1,024.10	1,024.10
8	SPOILER	1.00	PCS	284.01	284.01

GST (7%) AMOUNT: 259.57
TOTAL AMOUNT: 3,967.68

For Volkswagen Group Singapore Pte Ltd



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

PAYMENT ADVICE

Your ref: AIG Insurance Vehicle No. SJN4847 E

Claimant's Vehicle No. SLM86574

Accident on 11-12-18 involving vehicle/s No. _____

_____ along/at YUAN CHING RD

BREAKDOWN OF PAYMENT/S

1. Repair Cost S\$ 3967.68 Payable to Volkswagen Centre Singapore

2. ~~Loss-of-Use/~~ Car Rental S\$ _____ Payable to BKW

3. ~~Medical and~~ Search Fees S\$ 7.48 Payable to Volkswagen Centre Singapore

Remarks : _____

Service Adviser _____

Contact No.H/P. _____

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident

AUTHORIZATION TO ACT


(AIG Asia Pacific - Express Third Party Claim)

I, SEAH KWEE KANH (the third party claimant") of 2 TAO CHIN ROAD #18-02 (address), owner of SLC86574 (vehicle no.) hereby authorize Volkswagen Centre Singapore ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no SLC86574 that was damaged pursuant to the accident which occurred on 11/12/2018 (date) along YUAN CHIN ROAD TOWARDS AYE (location) involving vehicle no/s SNJ4847E ("the accident").


I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

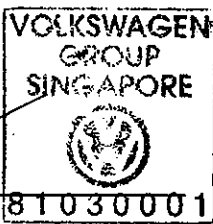
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 10th (day) of JAN (month) 2019 (year)



Signed by "the third party claimant"
(with chop if applicable)




Signed by "the workshop"
(with chop)



Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident

RELEASE VOUCHER
(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

"We/I, _____ ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd. _____ ("name of surveyor") with respect to the amount claimed for S\$ _____ (repair costs), S\$ _____ (loss of use/rental) S\$ _____ (search fees) for vehicle no. _____ that was damaged pursuant to the accident which occurred on _____ (date) along _____ (location) involving vehicle no/s _____.

This is pursuant to the inspection conducted on _____ (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner _____ ("third party claimant") of vehicle no. _____ 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 AIG Asia Pacific 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 costs of repairs and/or rental and/or loss of use pursuant to the damage to _____ (vehicle no.) as a result of the accident.

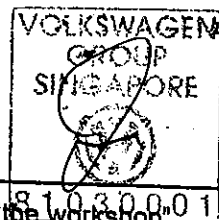
We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

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.

Dated this _____ day of _____ (month) 20 _____ (year)

Signed by AIG appointed surveyor

Chopped & Signed by "the workshop"



> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 11 Dec 2018 / 17:51:41

Receipt Date/Time : 11 Dec 2018 / 17:51:41

Tax Invoice/Receipt

Receipt No. : ITNET-00000-181211-002884

Previous Receipt No. :

**S/N Item Description/
Business Transaction Reference
No.**

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SJN4847E

As at 11 Dec 2018/08:15:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SJN4847E
Enquiry Fee
20181211174953957111

7.00	0.49	7.49
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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

xxxxxxxxxxxx5945	Credit Card: Visa/MasterCard	7.45
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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.

Print Receipt

OK

Save as PDF