

Poh Kin (LKKAUTO)

From: ONG LI LI <llong@lonpac.com>
Sent: Tuesday, 11 June 2019 12:24 PM
To: Poh Kin (LKKAUTO)
Cc: MT_Claim_SG; Admin A
Subject: RE: RE-SEEK MANDATE approval; ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. SFZ 580J (OI) AND SKE 9980E (TP) ON 02-12-2018; LKK ref : CC4/LPC18022739/Afa3; Lonpac ref:18/18/18/VP05/021188 [External General]

Lonpac External - General

Dear Poh Kin

Please proceed.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



Lonpac External - General data is for internal / external use.

From: Poh Kin (LKKAUTO) [mailto:pohkin@lkkauto.com]
Sent: Saturday, 8 June, 2019 2:22 PM
To: ONG LI LI
Cc: MT_Claim_SG; Admin A
Subject: RE-SEEK MANDATE approval; ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. SFZ 580J (OI) AND SKE 9980E (TP) ON 02-12-2018; LKK ref : CC4/LPC18022739/Afa3; Lonpac ref:18/18/18/VP05/021188 [External General]
Importance: High

Without Prejudice

Our Ref: CC4/LPC18022739/Afa3
Your Ref: 18/18/18/VP05/021188

Dear Li Li,

We refer to the above matter and your mandate approval.

We hereby re-seek mandate approval as third party claimant rejected our offer for loss of use and proposed loss of use at \$150.00 per day and given a point of view that claimant vehicle model is Mercedes and 3000cc.

Summary to offer to third party repairer, Dynamic Autowork Pte Ltd is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair	\$ 11,992.80	\$ 3,317.00 (\$3,100.00 +7%gst)

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Attachments: TP counter proposal.pdf
Importance: High

Without Prejudice

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Summary to offer to third party repairer, Dynamic Autowork Pte Ltd is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair	\$ 11,992.80	\$ 3,317.00 (\$3,100.00 +7%gst)
2. Loss of Use	\$ 1,250.00 (\$250.00 x 5 days)	\$ 700.00 (\$140.00 x 5 days)
3. LTA search fee	\$ 7.45	\$ 7.45
4. GIA search and report	\$ 29.00	\$ 29.00
Total	\$ 13,279.25	\$ 4,053.45

The above is for your approval/ Instruction on this matter

Best Regards,

Poh Kin, Chong (Mr) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2132 | email: pohkin@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Letter of Demand

Re : Accident involving my vehicle no. SKE9980E and vehicle no. SFZ 580J on 02/12/2018 at 14:00 HRS PM/AM along NO 74 CASUARINA ROAD

We refer to the above matter.

Attach copies of the following for your kind perusal :

Vehicle Repair cost / Excess	\$ 3317.00
Vehicle Rental Fee for <u>—</u> days @	
\$ <u>—</u> per day	\$ —
Loss of use for <u>5</u> days @	
\$ <u>250.00</u> per day	\$ 1250.00
Police search fee/police report fee/LTA search fees	\$ 7.45
Others <u>3rd Party Report</u>	\$ 29.00
Total :	\$ 4603.45

Yours faithfully,

ABBY



ABBY

HP : 9856 4815

E-mail: dynamicautowork@gmail.com

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Letter of Authorisation & Indemnity

Accident Involving Vehicle no. SKE9980E and SFZ580J On 02/12/2018

At NO 74 Casuarina Road

1. I/We, the owner of vehicle no. SKE9980E hereby instruct and authorize Dynamic Autowork Pte. Ltd. ("the workshop") to commence repairs to the said vehicle. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in court in my/our name against the third party.
3. You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit.
4. Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional costs and disbursement for acting for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account. In the event that my/our claim or legal costs of the third party as well as the professional costs and disbursements of my/our solicitors notwithstanding that my/our solicitors were appointed by you on our behalf.
5. I/we also hereby instruct and authorise you deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
6. In the event that I/we am/are required to attend at my/our solicitors office or to attend court in connection with my/our claim, I/we shall render full co-operation.
7. In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party, I/we authorise you to revert the claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respect, I/we understand and accept that the excess amount applicable under policy of insurance shall be borne by me/us.
8. If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
9. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 17 day of 12 2018

Signature of vehicle owner Jeong

Name - Jeong Chang Sub

IC No : 57084498B

(Company stamp, if applicable)

Address : 74 Casuarina Road

Singapore 579462

Tel : 9239 8780

Witnessed by :

Ahmy

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Authorization To Act

I, Jeong Chung Sub ("the third party claimant") of
74 Casuarina Road, Singapore 579462
(address), owner of SKE 9980E (vehicle no.) hereby
authorize Dynamic Autowork Pte. Ltd.
("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. SKE 9980E that was damaged pursuant to the accident which
occurred on 02/12/2018 (date) along No 74 Casuarina
Road (location) involving
vehicle no/s SFZ 580J
("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 in so far as the
driver/owner/insurers of the other vehicle/s is concerned.

Dated this 17 day of 12 (month) 20 18 (year)



Jeong

Signed by "the third party claimant"

R



Signed by "the workshop"



LONPAC INSURANCE BHD

CLAIM NO : 18/18/18/VP05/021188

DATE : 11/06/2019

"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

DISCHARGE VOUCHER

I/We, JEONG CHANG SUB confirmed acceptance from **M/s LONPAC INSURANCE BHD** and/or the owner of SFZ 580J the sum of Singapore Dollars Four Thousand Fifty Only (**\$4,050.00**) 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, SKE 9980E on 2nd December 2018 along/at Casuarina Road.

I /We hereby agree to indemnify and keep indemnify (**WONG MUM MUN/ 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 DYNAMIC AUTOWORK PTE LTD.**

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.

Jeong 13/06/19
Signature of vehicle owner/Date

Jeong Chang Sub 13/06/19
Name of vehicle owner/Date

Dynamic Autowork Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09, Premier@Kaki Bukit

Singapore 415875

Tel : 6341 6789

Fax : 6341 6778

ROC / GST REG NO.: 201436361C

Email : dynamicautowork@gmail.com



TAX INVOICE

Invoice # : 00000855

Date : 12.04.19

Vehicle No : SKE9980E

Bill To:

LONPAC INSURANCE BHD

NO.100 BEACH ROAD

#19-00 SHAW TOWER

SINGAPORE 189702

	DESCRIPTION	AMOUNT
	Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 3,100.00
Sub Total		\$ 3,100.00
Add GST 7%		\$ 217.00
Total Amount		\$ 3,317.00

PAYMENT BY CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO
' DYNAMIC AUTOWORK PTE.LTD. '

PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

Issued By :

ABBY

Authorised Signature



RECORDS MANAGEMENT CENTRE

**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-18-196082

Date of Request: 20/12/2018

Your Ref No: WALK IN WANG TH

DYNAMIC AUTOWORK PTE. LTD
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No: SKE9980E

Date of Accident: 02/12/2018

Place of Accident: NO 74 CASUARINA ROAD

Involving Vehicle No: SFZ580J

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

TAX INVOICE

Our Ref No: GR-18-196083

Date of Request: 20/12/2018

Your Ref No: WALK IN WANG TH

DYNAMIC AUTOWORK PTE. LTD
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Date of Accident: 02/12/2018

Vehicle No: SKE9980E

Place of Accident: no 74 casuarina road

Involving Vehicle No: SFZ580J

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\$)
SFZ580J	no 74 casuarina road	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:

Date:

☐ GIRO ☒ Cash ☐ Cheque



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

Print Date/Time : 17 Dec 2018 / 12:25:42

Receipt Date/Time : 17 Dec 2018 / 12:25:42

Tax Invoice/Receipt

Receipt No. : ITNET-00000-181217-001364

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 - SFZ580J As at 02 Dec 2018/14:00:00 Insurance Co: LONPAC INSURANCE BHD				
1	Insurance Enquiry - SFZ580J Enquiry Fee 20181217122520731840	7.00	0.49	7.49
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				
	xxxxxxxxxxxx0238	Credit Card: Visa/MasterCard		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.