

聯成汽車維修

SUCCESS UNITED PTE LTD

2 Kaki Bukit Ave 2, #01-33 / #02-29 Kaki Bukit AutoHub Singapore 417921 Tel: 6746 1515 / 6747 1787 Fax: 6748 5015

www.successunited.com.sg

Co. / GST Reg: 200402570G

Your Ref: SHC 5212L

21st May 2019

M/s. AXA Insurance Singapore Pte Ltd

8 Shenton Way B1-01 AXA Tower Singapore 068811

Attn: Motor Claims

Dear Sir

Re: Acc Invlg SLV 2756G & SHC 5212L on 15.01.19

We refer to the above accident which was caused due to the negligence of your insured driver of Veh No. SHC 5212L

We are claiming for the following costs and losses incurred:

	Total:	\$ 2,086.24
3)	Search Fees	\$ 7.45
2)	Loss of Use (\$100 x 4 days)	\$ 400.00
1)	Cost of Repairs (Inc. 7% GST)	\$ 1,678.79

Enclosed herein the following documents for your perusal.

1) Tax Invoice No. \$1905024

2) LTA Search Fee

3) Letter of Authorisation

We appreciate your prompt attention and response.

Yours faithfully



JCCESS UNITED PTE LTD

2 Kaki Bukit Ave 2, #01-33 / #02-29 Kaki Bukit AutoHub Singapore 417921 Tel: 6746 1515 / 6747 1787 Fax: 6748 5015 www.successunited.com.sg Co. / GST Reg: 200402570G

AXA Insurance Singapore Pte Ltd 8 Shenton Way B1-01 AXA Tower Singapore 068811

Attention: Motor Claim Department Contact: 63387288 Fax No.: 68804838 Tax Invoice: S1905024

Date: 15/05/2019

Vehicle Num. : SLV2756G Make/Model : Honda Odyssey-2017 Chassis/Eng#: RC41031127/LFA1531275

Accident Date: 15/01/2019

Claim No.: Reference:

Policy No.: (26/12/2019)

S/N	Quantity	Particular	Unit Price	Amount S\$
1. 2. 3. 4.	1 10 1	LIST ITEMS : Rear Lower Bumper Assy Rear Lower Bumper Clips Rear Lower Bumper Side Holder LH Rear Bumper Lower Chrome Moulding LH	3.90	798.00 39.00 28.00 183.70
		List TotalS\$: 20.00% Discount S\$:		1,048.70 209.74
				838.96
		LABOUR : To remove, rearrange electrical wirings, check lighting .		30.00
		To remove, repair and replaced damaged bodyparts, realign bodyworks & where consistent to the accident		300.00
		To putty and respray painting on affected area.		400.00
		Labour Total S\$:		730.00

Total S\$:

1,568.96

GST @ 7% S\$:

109.83

Amount Due S\$:

1,678.79

========



SUCCESS UNITED PTE LTD

> Back to OneMotoring

Land Transport

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

16 Jan 2019 / 17:59:03

Receipt Date/Time: 16 Jan 2019 / 17:59:03

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190116-003060

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 - SHC5212L As at 15 Jan 2019/20:15:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SHC5212L				
Enquiry Fee 20190116175657347968		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
SLY 2756G	Total Amount Payable			7.45
	Paid By			
	20190116175734628	Direct Debit: eNE (Internet Banking)		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.

Print Receipt

OK

Save as PDF

LETTER OF AUTHORISATION

To: Success United Pte Ltd

Singapore

RE: ACCIDENT INVOLVING VEHICLE NOS:

SLV 2756G & SHC5212L

ALONG

West Coast Drive

ON 15.01.19

I/We, Lim Tee Leong

Co's Rgn/NRIC No. **\$7602944Z**

of 58 West Coast Lane

Singapore 127788

the owner of vehicle no. SLV 2756G

hereby authorise you to commence repair to the said

vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request:

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident claim and all and any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is indequate, I/we underake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are

AXA Insurance Pte Ltd

Policy No. GA309154/1

Expiry Date:

Excess

26.12.19

Date:

Owner's Signature/Co's stamp

Lim Tee Leong

NRIC No: \$7602944Z

Witness Signature/Name