

# T K LEE AUTOMOTIVE PTE.LTD.

NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY  
SINGAPORE 417883 Co.Reg. No. : 201210266Z  
TEL: 6509 5521 / 6509 5524 FAX: 6509 5523

Attn: The Motor Claims Department  
INDIA INTERNATIONAL INSURANCE PTE LTD  
64 CECIL STREET#05-00  
IOB BUILDING  
SINGAPORE 049711

Yrs Ref.: SHA5983E  
Our Ref.: TKL0119-2576  
Date.: 03.04.2019

Accident involving SKG6127L And SHA5983E On 31.12.2018 At 13:15hrs Along Bukit Batok West Ave 5

We refer to the above matter. We are instructed that above accident was caused solely and completely by the negligence of your insured, as a result of which, our client have suffered loss and expenses.

We are instructed by our client to make a property damages claims as:-

	<u>Amount</u>
1. Cost of repair	SS 1,800.00
2. Loss of Rental (03days @ S\$120Per day )	SS 360.00
3. Survey fee	SS -
4. LTA Search Fee	SS 7.45
5. E-File Search Fee	SS 29.00
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Claim Amount	<b>SS 2,196.45</b>

Enclosed are the following documents for your perusal.

<input checked="" type="checkbox"/> Original Final repair Bill	<input checked="" type="checkbox"/> Letter of Authority
<input type="checkbox"/> Original Survey Report & Inv	<input checked="" type="checkbox"/> Rental Agreement / Receipt
<input type="checkbox"/> Original Photographs of [SKG6127L ]	<input checked="" type="checkbox"/> E-File Serach Fee/ LTA Receipt
<input checked="" type="checkbox"/> GIAS Reports of [SKG6127L ]	<input checked="" type="checkbox"/> Vehicle Registration Card
<input checked="" type="checkbox"/> Certificate of Insurance	<input checked="" type="checkbox"/> Driver's Driving License / Identity Card
<input type="checkbox"/> Report Of A Traffic Accident	

Your prompt action will be greatly appreciated.

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,  
T K Lee Automotive Pte. Ltd.



tklee0247@gmail.com

# T K LEE AUTOMOTIVE PTE LTD

1 Kaki Bukit Avenue 6, #02-47 Autobay, Singapore 417883

Tel : (65) 6509 5521 Fax : (65) 6509 5523

Co. Reg. : 201200623R

## INVOICE

**0678**

Messrs : **INDIA INTERNATIONAL INSURANCE PTE LTD** Claim No. : TKL0119-2576  
64 CECIL STREET Acc. Date : 31/12/2018  
#05-00 IOB BUILDING  
SINGAPORE 049711

Veh. No./Model : SKG 6127L VOLKS POLO

Date : 22/03/2019

QTY	DESCRIPTIONS	AMOUNT
	<b>Repair Cost :</b> Inclusive of supply parts, panel beating, spray painting and labour.	1,800.00
		1,800.00

E. & O.E.

\* Please make all payments to " T K Lee Automotive Pte Ltd "

\* All service and repairing are in good order & conditions.



Customer Sign & Chop

T K Lee Automotive Pte Ltd

> **Back to OneMotoring**



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

Print Date/Time : 02 Jan 2019 / 11:47:05

Receipt Date/Time : 02 Jan 2019 / 11:47:05

## Tax Invoice/Receipt

Receipt No. : ITNET-00000-190102-002405

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 - SHA5983E As at 31 Dec 2018/13:15:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SHA5983E Enquiry Fee 20190102114603014571	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
	<b>Paid By</b>			
	20190102114617936		Direct Debit: eNETS Debit (Internet Banking)	7.45
	<b>Total</b>			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.



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-19-000467  
Date of Request: 02/01/2019

Your Ref No: WALK IN JASON

TK LEE AUTOMOTIVE PTE LTD  
1 KAKI BUKIT AVE 6, #02-14 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Your Vehicle No: SKG6127L  
Date of Accident: 31/12/2018  
Place of Accident: BT BATOK WEST AVE 5  
Involving Vehicle No: SHA5983E

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.

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For GIARMC Official use:  
Date:  
 GIRO  Cash  Cheque

**TAX INVOICE**

Our Ref No: GR-19-000468  
Date of Request: 02/01/2019

Your Ref No: WALK IN JASON

TK LEE AUTOMOTIVE PTE LTD  
1 KAKI BUKIT AVE 6, #02-14 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Date of Accident: 31/12/2018  
Vehicle No: SKG6127L  
Place of Accident: BUKIT BATOK WEST AVE 5  
Involving Vehicle No: SHA5983E

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\$)
SHA5983E	BUKIT BATOK WEST AVE 5	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.

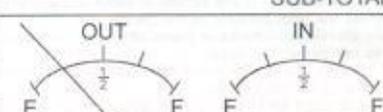
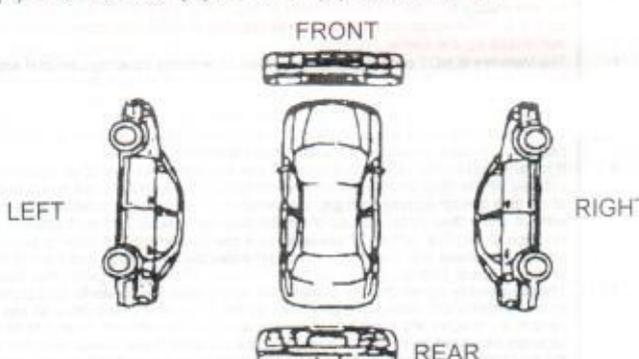
For GIARMC Official use:

Date:

GIRO  Cash  Cheque

## VEHICLE RENTAL AGREEMENT

No. RA **3330**

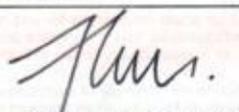
<b>HIRER'S PARTICULARS</b>		Vehicle No: <u>SP8920D</u> Replace Veh No:	
Name: <u>Arman Bin Suri</u>		Mileage Out: _____ Mileage Out: _____	
Address: <u>B1380 Anchoke Crescent</u>		Make & Model: _____ Make & Model: _____	
<u>#04-25</u>		Auto / Manual _____ Auto / Manual _____	
<u>sc 544338</u>		OUT: Date <u>21/11/19</u> OUT: Time _____	
Contact Person: <u>9770 9036</u> Tel: _____		HIRE EXPIRY <u>21/11/19</u> TIME EXPIRY <u>1340PM</u>	
<b>DRIVER'S PARTICULARS</b>		<b>RENTAL CHARGES</b>	
Name: _____		Daily <u>3day</u> @\$ <u>120</u> <u>360.00</u>	
Address: _____		Weekly @\$ _____	
_____		Monthly @\$ _____	
_____		Hours @\$ _____	
Tel No: _____ H/P No: _____		Others @\$ _____	
P.P. / I.C. No.: _____ D/L. NO: _____		CDW @\$ _____	
Date of Birth: _____ Date of Issue / Expiry: _____		PAI @\$ _____	
Nationality: _____ Pl. Of Issue: _____		Delivery Service _____	
Occupation: _____ Driving Exp: _____		<b>SUB-TOTAL \$</b>	
Refundable Deposits: _____			
Cash/Nets/Cheque/VISA/MC Cards No.: _____		EXTENSION _____	
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		Collection Service _____	
<p>FRONT</p>  <p>LEFT _____ RIGHT _____</p> <p>REAR</p>		Misc. _____	
ACCESSORIES CHECK		<b>ESTIMATED TOTAL RENTAL \$</b> <u>360.00</u>	
<input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S / Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD / Cartridges <input type="checkbox"/> S / RIM		Sales Person Code: _____	
_____		Hirer is responsible for the first \$ <u>3,500</u> excess for collision / damage to first party. (i.e) ULTIMATE CAR RENTAL Vehicles (including windscreen) and also first	
_____		\$ <u>2,500</u> excess for collision/damage to third party's vehicles for each and every accident / damage	
_____		*Additional Excess load by \$3,500	
_____		HIRER's Signature _____	
_____		Additional Driver's Signature <u>[Signature]</u>	

I/We agree to the terms and conditions above, overleaf and that all information given is true and correct in all respect. My/Our Driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

**IMPORTANT**

1. ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. VEHICLES IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY ULTIMATE CAR RENTAL.
3. IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORISED DRIVER:
  - (i) shall report all accidents involving the said vehicle to the Owner immediately
  - (ii) shall take immediate steps to complete and sign Form Mar 1 (Motor Accident Report form) and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is reported to the owner)
  - (iii) shall report to the police within 24 hours from the occurrence, the following types of accidents -
    - (a) injury case;
    - (b) non-injury case involving a Government vehicles or damage to Government property;
    - (c) non-injury case involving a foreign vehicle (to obtain their motor insurance, policy, Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax informational);
    - (d) non-injury case involving a pedestrian or cyclist.

RETURN OF VEHICLE - THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER/DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO ULTIMATE CAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	DEPOSIT REFUND	
<u>21/11/19</u>	<u>1340</u>					 SIGNATURE OF HIRER/DRIVER

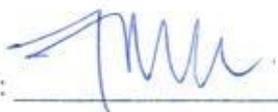
Date:

To: India International Insurance Pte Ltd

RE: ACCIDENT INVOLVING VEHICLE NO.: SKG6127L and SHA5983E  
AT/ALONG Bukit Batok West Ave 5  
ON 31.12.2018

I/We, Firman Bin Suri of (NRIC No./ROC NO.)  
S8731457Z of Blk 338D Anchorvale Crescent #04-25 S'544338  
owner of vehicle no. SKG6127L in consideration of M/S **T K Lee Automotive Pte. Ltd**  
repairing my/our vehicle SKG6127L at my/our instruction and hereby authorise  
M/S **T K Lee Automotive Pte. Ltd** to demand claim settle receive whatever  
amount settled / payable by the Insurance Company and/or third party or to commence legal  
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,  
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and  
all claimed and/or settled shall belong to them absolutely.

I further agree and undertake to indemnify them against the above mentioned claim costs  
which my arisen therewith.

Signature of Owner : 



Date: \_\_\_\_\_