## KUM CHEW MOTOR WORKSHOP

160 SIN MING DRIVE #05-08 SIN MING AUTOCITY SINGAPORE 575722

TEL: 6456 3715, 6453 6256 FAX: 6455 7754 EMAIL: <u>KUMCHEW1@SINGNET.COM.SG</u>

Our Ref: SKZ 5781D

4th March 2020

M/s Lonpac Insurance Bhd 300 Beach Road #17-04/07 The Concourse Singapore 199555

Attn: Gerald Poh (Motor Claims Dept)

Dear Sir/Madam,

### ACCIDENT INVOLVING SKZ 5781D & GBC 36H ON 28/01/2019

We act for Mr Ng Aik Lee, the owner of motor vehicle SKZ 5781D in the abovementioned matter.

We are instructed that you are the insurer of motor vehicle GBC 36H at the material time. We are further instructed that the accident was caused by your insured driver's negligence in the driving, control and/or management of your insured vehicle. As a result of the accident, our clients' vehicle was damaged and our clients have been put to loss and expense, particulars of which are as follow:

1. Cost of repair

\$3,424.00

2. Rental charge (\$100.00 per day for 7 days)

\$ 700.00(include 1 sunday)

Total: -

\$4,124.00

A copy of each of the following supporting documents is enclosed herewith:-

- 1) Tax invoice from Kum Chew Motor Workshop;
- 2) Rental agreement from Acepac Rental

Yours Faithfully,

Mdm Lim

## **LETTER OF AUTHORITY & INDEMENITY**

То :	Kum Chew Motor Workshop 160, Sin Ming Drive #05-08 Sin Ming Autocity Singapore 575722.
	ACCIDENT INVOLVING VEHICLE NO. SKZ 5781) AND 68 C 36 H AT CLEMENTI AVE 6 (AYE) ON 28/12019.
	I/We, the owner of vehicle no SICZ 5781D hereby instruct and authorize you to commence repairs to the said vehicle.
	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.
)	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.
	Upon resolving my/our claim, you are authorized to agree with my/our solicitors on amount of their professional costs and disbursements for action 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 suit is not successful or is dismissed for whatever reason, I/We understand and agree that I/We shall be personally liable to bear the 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 my/our behalf.
	In the event that I/We am/are required to attend at my/our solicitor's office or to attend Court in connection with my/our claim, I/We shall render full co-operation.
	In the event that my/our claim against the third party and/or his insurers is not successful or can not be proceeded with and/or if any Judgment or settlement is not honored or satisfied by the third party, 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.
)	I/We undertake to inform you in the event the third party's insurance company communicates with me/us directly by telephone 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 communication with you.
	I/We irrevocably authorize Mis Kum cull MUTON of the Repairers to sign all discharge voucher/ Indemnity forms and all necessary documents in connection with and arising out of the claim.
	Dated this $28$ day of $1$ 20 $19$
	— (Company stamp if applicable)
	Name NG AIK LEE
	UC No 86935000 C
	Address BIK 154, Yung Ho Road # 12-69, S'pore 610154
	#12-69, S'pore 610154



## LONPAC INSURANCE BHD

CLAIM NO : 19/19/19/VC05/021377

DATE : 20 JULY 2020

## DISCHARGE VOUCHER

I/We, NG AIK LEE confirmed acceptance from M/s LONPAC INSURANCE BHD and/or owner of GBC 36H the sum of Singapore Dollar Four Thousand One Hundred and Twenty Four Only (\$4,124.00) in full and final satisfaction, liquidation and discharge of all property/injury losses competent to me/us upon the said M/s LONPAC INSURANCE BHD in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving SKZ 5781D on 28 January 2019 along CLEMENTI AVENUE 6.

I /We hereby agree to indemnify and keep indemnify (LONPAC INSURANCE BHD/ QING FENG CONSTRUCTION PTE LTD) 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 **KUM CHEW MOTOR WORKSHOP**.

I/We hereby acknowledged 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

NG AIK LER 23/7/2020
Name of vehicle owner /Date

## **KUM CHEW MOTOR WORKSHOP**

160, SIN MING DRIVE #05-08

SIN MING AUTOCITY, SINGAPORE 575722.

Tel No.: 64536256/64563715 Fax No.: 64557754

E-Mail: kumchew1@singnet.com.sg

GST Reg.No.: M90367665T Buss. Reg. No.: 52865130K

LONPAC INSURANCE BHD 300 BEACH ROAD, #17-04/07

THE CONCOURSE, SINGAPORE 199555

PRI EMAIL: mt\_claim@lonpac.com

Attention: Motor Claim Department

Contact: 62507388 Fax No.: 62962706

Tax Invoice: TP001973

Date: 23/07/2020

Vehicle Num. : SKZ 5781 D Make/Model : NISSAN SYLPHY-2015 Chassis/Eng#: MNTBBAB17Z0026666

Accident Date: 28/01/2020

Claim No. :

Reference: KC/TP5781/1802-02

Policy No.:

Amount S\$

3,200.00

LUMP SUM REPAIR

SingDollars: Three Thousand Four Hundred Twenty-Four Only

Total S\$:

3,200.00

GST@7% S\$:

224.00

Amount Due S\$:

3,424.00

KUM CHEW MOTOR WORKSHOP

# CEPAC RENTAL

160 Sin Ming Drive #07-08 Sin Ming Auto City Singapore 575722

Tel: 6453 6256 Fax: 6455 7754

SKZ 5781D

INV NO: 16296

**RENTAL AGREEMENT** 

COMPANY'S STAMP / HIRER'S SIGNATURE

Reg	No.	:	529	16	36	15	A
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Reg No. : 52916615A	
VEHICL	
	INDAI ELANTRA GROUP:
CHANGE OVER 1 : DATE :	INITIAL :
CHANGE OVER 2 : DATE :	INITIAL :
CORPORATE	HIRER
NAME :	1111611
ADDRESS :	
CONTACT PERSON :	TEL :
PERSONAL HIRER / N	IAMED DRIVER
NAME: MR AG AIK LER	\$12-69 SCB(0/54)
ADDRESS : PALL 154, YUNG HO ROAD  OFFICE TEL : GOR 21/20 RESIDENCE TEL :	
OFFICE TEL : 9082/170 RESIDENCE TEL :  NATIONALITY : PLACE / DATE OF BIRTH :	PASSPORT / NRIC NO : 3693 5000 C  DRIVING EXPERIENCE :
DRIVING LICENSE NO : COUNTRY OF ISSUE :	EXPIRY DATE :
DRIVING LICENSE NO . COUNTRY OF 1880E .	EAFINI DATE .
ADDITIONAL NAI	ME DRIVER
NAME :	
ADDRESS :	
OFFICE TEL : RESIDENCE TEL :	PASSPORT / NRIC NO :
NATIONALITY : PLACE / DATE OF BIRTH :	DRIVING EXPERIENCE :
DRIVING LICENSE NO : COUNTRY OF ISSUE :	EXPIRY DATE :
CHECK OUT / C	HECK IN
DATE OUT : 28/2/19 TIME (	DUT 12:45pm KMOUT
PETROL LEVEL OUT :	E 1/4 1/2 3/4 F
AGREED DATE OF RETURN:	\(\frac{1}{2}\)
DATE IN : 7/3/2019 TIME I	N /22/5pm KMIN
PETROL LEVEL IN : / / /	E 1/4 1/2. 3/4 F
<del>-</del> ,	
CHARGES	FRONT FRONT
CHARGES	
Hours @\$ per hour	
Days 7 @\$ 100 per day 700 - 00	ال ال الله الله الله الله الله الله الل
Weeks @\$ per week	
Months @\$ per month	NDICATE: A - ACCIDENT
SUB - TOTAL	
Discount	LEFT TOP REAR RIGHT
TOTAL RENTAL 700-00	IMPORTANT NOTES: Restricted to Singapore use only
Petrol	No refund will be given for petrol left in vehicle.  Hirer is liable to pay first \$ 2000 - under section in any accident
Excess	<ul> <li>plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses.</li> </ul>
Delivery / Collection Fees	Vehicles return during office hour only.  No Service on Public Holiday and Sunday.
Deposit	Driver must be above 26 years and 2 years driving experience.
Total	<ul> <li>HIRER'S DECLARATION</li> <li>I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF</li> <li>THIS RENTAL AGREEMENT AND AGREE THERE TO</li> </ul>
Remarks: Strictly For Hirer Personal / Usage. Not For Reward Usage (eg Uber, Grab Car)	/ /

## **Jasper Chua (LKK Auto)**

**Sent:** Monday, 20 July 2020 10:36 AM

**To:** Jasper Chua (LKK Auto)

**Cc:** MT\_Claim\_SG

Subject: RE: Your ref: 19/19/19/VC05/021377 / Accident involving SKZ 5781D and GBC 36H

on the 28/01/2019. [External Confidential]

## **Lonpac External - Confidential**

Dear Jasper,

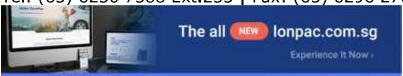
Kindly proceed as proposed.

Best Regards Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706



We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

Lonpac External - Confidential data is for use by authorised external parties only.

From: Jasper Chua (LKK Auto) [mailto:jasperchua@lkkauto.com]

**Sent:** Monday, 20 July 2020 9:54 am

To: GERALD POH WEE BIN < geraldpoh@lonpac.com>

Cc: MT Claim SG <mt claim@lonpac.com>; Admin A <admin-a@lkkauto.com>

Subject: Your ref: 19/19/19/VC05/021377 / Accident involving SKZ 5781D and GBC 36H on the

28/01/2019.

Dear Sir/Madam.

We refer to the subject matter.

It was reported that Insured driver rear-ended third party.

Summary to offer to repairer **KUM CHEW MOTOR WORKSHOP** is as follows:

TP CLAIMED	REVISED - TO OFFER		
Cost of Repair (w/gst)	\$ 9,010.38	\$ 3,424.00	
Loss of Rental (\$100 x 7 days)	\$ 700.00	\$ 700.00	
TOTAL	\$ 9,710.38	\$ 4,124.00	

#### Breakdown of days is as follows:

Recommended days	5 Days
Weekend / Downtime	2 Days
Total Total	7 Days

For your approval and/or further instruction please.

Thank you.

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2928 | email: jasperchua@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)