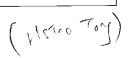
Workshop Address: Blk 1008, Bukit Merah Lane 3 # 01-04/06/08

Singapore 159722





"WITHOUT PREJUDICE"

Your Ref

: CC4/FWD19003108/T1pa3

Our Ref

: SKH3048X / T220319

Date

: 12 September 2019

LKK AUTO CONSULTANT PTE LTD

51, Ubi Avenue 1

#01-25 Paya Ubi Industrial Park

Singapore 408933.

ATTN: MOTOR CLAIMS DEPT

Dear Sir / Madam,

ACCIDENT INVOLVING SKH3048X & SKC6802S ON 15/02/2019 ALONG PIE TOWARDS TUAS

We refer to the above.

Enclosed herewith are documents for your attention and actions.

Please issue payment in favor of **MOVA AUTOMOTIVE PTE LTD**.

If you have any enquiries, please contact us at 6272 3892 or alternatively:

- 1. Ms Enny, enny@mova.com.sg for feedback, workshop & claims matters, Lawyer Cases and all Own Damages & Windscreen matters.
- 2. Ms Suanne Chiu, suann@mova.com.sg for all Third Party matters.

Thank you.

Note: Enclosed tax invoice & discharge voucher.

Yours faithfully For Claims Manager Claims Department

Tel: 62723892 Fax: 627083149

^{*}This is a computer generated letter and does not require a signature.

RELEASE

Claim Reference:	1201900004648	
Surveyor's Reference:	CC4/FWD19003108/T1pa3	
TP Reference:	SKH 3048X	

We, MOVA AUTOMOTIVE PTE LTD ("Workshop") hereby agree and confirm that we are authorized by the owner ("Claimant") of motor vehicle SKH 3048X ("Vehicle") to accept the sum of \$2,623.50 , being the amount claimed for \$2,140.00 (repair costs), \$481.50 (loss of rental/use), (loss of income), \$2.00 (search fees) as compensation for the loss of or damage to the Vehicle, as a result of an accident ("Accident") which occurred on 15/02/2019 (date of accident) at/along PIE TOWARDS TUAS (location) involving vehicle no/s. SKH 3048X and SKC 6802S.

This is pursuant to the inspection conducted on 11/03/2019 (date) at the Workshop.

We confirm that this acceptance is in full and final settlement of all claims arising from the damage to the Vehicle (whether now or hereafter to become manifest), to the intent that FWD Singapore Pte. Ltd. and all other persons, in particular the driver of <u>SKC 6802S</u> be absolutely and finally exonerated and discharged from all claims of every nature and kind whatsoever which have been made or which may be made in respect of this Accident.

We also declare that we are authorized by the Claimant to receive the above compensation and we have full authority to make the claim as set out above and to settle the matter on behalf of the Claimant in any manner we deem fit.

This settlement is reached on a without prejudice and without admission of liability basis. As such, this Release is not to be construed as an admission of liability on the part of FWD Singapore Pte Ltd, their policyholder and / or authorised driver and shall not be used as evidence in any claims and / or action which may be lodged by any of them.

Dated this 12 day of <u>Sep</u> 201<u>9</u>

[Signed by the "Workshop" with Co. Stamp]
For and on behalf of the "Claimant"

[FWD's appointed surveyor with Co. Stamp]
For and on behalf of FWD Singapore Pte. Ltd.



Automotive

Main Office:

Mova Building No. 22, Jalan Kilang,

Singapore 159419
Tel: **(65) 6476 3333**Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Tax Invoice

12/09/2019

FWD SINGAPORE PTE LTD 6 TEMASEK BOULEVARD, #18-01 SUNTEC TOWER FOUR

SINGAPORE 038986

Attention :- XA049

No. Description

Lump Sum Amount

Qty

ACC. Date :- 15/02/19

Page #

Veh#

Tax#

JOB#

Terms

Remarks

U.Price

134083

- SKH3048X

CK631333

;- T220319

:- C.O.D

Veh Model :- TOYOTA LEXUS

Amounts S\$

2,000.00

E. & O.E

AMOUNT S\$

GST @ 7 %

2,000.00

140.00

AMOUNT DUE S\$

2,140.00

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD



AUTOMOTIVE PTE LTD Website: www.mova.com.sg

Co. Reg. No.: 198904033G

Automotive Pte Ltd

Main Office: No. 22 Jalan Kilang, Singapore 159419 Bukit Merah Branch:

Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122 Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792
Tel: (65) 6476 3333 Fax: (65) 6270 8314
24 Hours Breakdown Service: (65) 9799 8888
Bedok Branch: 219 Bedok Central #01-138, Singapore 460219

Tel: (65) 6604 7877

RENTAL AGREEMENT

RANO.: 1 12214

1.14

RENTAL DETAILS			INSURANCE EXCESS AMOUNT				
Vehicle Make/Model:	T ESTIMA	Vehicle No. MACOS	ZJ.	Singapo	re	Malaysia	Signature
Date/Time Out:	11/3/14 @		0,6	35EX	**	S\$	
Petrol Level Out:	E 1/8 1/4 3/8 1/2	5/8 3/4 7/8 F		Per Accid		Per Accident	
Date/ Time In:	13/3/19 @	1420W			Cha	arges	
Petrol Level In:	E /1/8 1/4 3/8 1/2	5)8 3/4 7/8 F		Months	@\$	Per Month	
Change Over 1:	Date:	Initial:	7	Weeks	@\$	Per Week	
Change Over 2:	Date:	Initial:	3	Days	@\$ 1	80.00 Per Day	540.00
KM Out:	KM In:			Hours	@\$	Per Hour	
HIRER DETAILS				Sub	-Total		
Named Hirer			Less	Discount	t	%	
ame:	CHAN HIAN HI	ENG HENRY			Rental	Charges	
ddress:	94 WESTWOOD	D AUC #03-24	CDW	@\$		per day / week / month	
	c(648142)		PAI	-		per day / week / month	
				l Top-Up Charges			
Identity Card No:	S1788508A		GST	79	10		37.80
Date of Birth:	13/00/19	67			Te	otal	577.80
Driving License:	10282081		VISA/	MASTER CAR	D/AMEX	CASH / COMPANY BILLING / OTHERS	
Country of Issue:	26				Pre-P	ayment	
Tel:	(HP) 1339 8508	(O)		Downpa	ayment	and Deposit	
Nationality:				Amount Refunded/ Due			
Effective Date:	31 July 10	197.		Signature of Refund			
Additional Hirer	/		Rem	arks:		1 .	
Name:			35	H.SU	₹85%	/Auril/ Clan	4
tdress:					/		•
				ce No.		ī	Ref. No:
			Che	cked Out	By:	Checked In By:	Checked By:
Identity Card No:							
Date of Birth:							
Driving License:	riving License:			Sales-In Charge:			
Country of Issue:			Past	3 years a	acciden	ts YES NO	
Tel:	(HP)	(O)					
Nationality:							
Effective Date:							

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/credit card voucher given above. All above information given by me are true in connection to this agreement.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- 1. Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
 2. All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile
 3. In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
 4. The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered
- 5. All traffic infringements and summons (if any) are the responsibility of the Hirer.



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

Third Party Insurer Enquiry

Our Ref No:

GR-19-024633

Date of Request:

15/02/2019

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd Blk 1008, #01-04/06/08/94 Bukit Merah Lane 3 Singapore 159722

Dear Sir/Madam,

Enquiry Date
Enquiry By
TP Vehicle No.
Accident Date

15/02/2019 Ho Kerl Shin SKC6802S 15/02/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKC6802S	FWD Singapore Pte. Ltd.	22/03/2018-21/03/2019	6727 5700

Thank You.

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.

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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-19-024633

Date of Request:

15/02/2019

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd Blk 1008, #01-04/06/08/94 Bukit Merah Lane 3 Singapore 159722

Dear Sir/Madam,

Enquiry Date Enquiry By TP Vehicle No. Accident Date 15/02/2019 Ho Kerl Shin

SKC6802S 15/02/2019

DESCRIPTION	AMOUNT (S\$)	
TP Insurer Enquiry		1.87
GST Amount		0.13
Total Amount Due (GST Inclusive)		2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date

[X] GIRO [] Cash [] Cheque



1443 - 925



Main Office: Mova Building, No. 22 Jalan Kilang, Singapore 159419. Tel: (65) 6476 3333 Fax: (65) 6271 5891 Website: www.mova.com.sg Workshop: Block 1008, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722 Tel: (65) 6272 3892 Fax: (65) 6270 8314

POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.)	SKH 3048	, X.	and (Third
ACCIDENT INVOLVING (Owner's Vehicle No.) Sk (650) 5 on	15/2/19		along
PIE towards Twas			
194 Westward Prense #33 39	Chan Him Herg	Herry	
194 Westward Orenie #53 39	*NRIC/Passport No	71188 2074	(Address)*
(Address)*	•	apore and having its regi	
		owner of Vehicle appoint MOVA AUTOMO	_
(MOVA) a company incorporated in Singapore	,	• •	
Lane 3 #01-04/06/08 its agents or any person			
name(s) and on *my/our behalf to do all or any o		to be my/our Attorney a	ariu iii iiiy/oui
name(s) and on my/our behalf to do all of any o	ine lollowing.		
which *I/we may have against the oth *policy/policies taken up by such *policy/policies taken up by *me/us arising 2. For the purpose of such claim(s) as afores shall in MOVA absolute discretion, deem 3. To collect payment(s) due in respect of to be made by way of cheque in favor o and discharge thereof. 4. For any of the purposes aforesaid, to ex relation thereto. 5. Generally do all such acts as it shall deed 6. To agree to any settlement at the absolute for the policy/policies taken up by such *policy/policies taken up by such *policy/polici	coarty/parties or alter taken used taken use	rnatively under Insurance p by *me/us (subject to a of use/rental and all of ss and damage). rs on *my/our behalf as *rectified the loss and damage, selected the loss and damage, select	ce Policy No. approval by my ther costs and my/our Attorney such payment a valid receipt whatsoever in
*I/We hereby declare that all acts, instruments *my/our behalf by the Attorney, its agents or an valid and effectual to all intents and purposes what in *my/our own proper person(s) and *I/we hereby executed by virtue of the authority and powers h	and documents done by person authorized I be tsoever as it is the sam ratify and confirm, all a	by virtue of this Power by MOVA in its behalf she had been done or execu	all be as good ited by * me/us
*I/We hereby further declare that the powers and	d authority hereby co	onferred shall remain irr	evocable.
*I/We further comfirm that the acceptance by MO full discharge of my/our claim(s) in respect of suc	OVA of the settlement a	amount in respect of such	constitute the
*IN WITNESS WHEREOF. *!/We have hereunto of, Year Two Thousand -		nd seal this day	_ of the month
Signed, Sealed & Delivered By			
1			

Co's Rubber Stamp, where applicable.