

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,
Ridit Merah Lane 3,
Singapore 159722
Tel : (65) 6272 3892
Fax : (65) 6270 8314

VIA EMAIL**WITHOUT PREJUDICE**

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

Our Ref : YM4179C / T210419
Your Ref : DM19HO00732-JG

Date : 12 December 2019

EQ INSURANCE CO LTD
5 Maxwell Road
#17-00 Tower Block MND Complex
Singapore 069110.

Attn: Motor Claims Department

Dear Sir/Mdm

ACCIDENT INVOLVING: YM4179C & YN3246T

DATE OF ACCIDENT: 12 MARCH 2019

ALONG: JURONG LOGISTIC HUB LEVEL 7

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$ 1,685.25
Loss of Use (\$ __ x __ days)	\$
Loss of Rental (\$ 350.00 x 03 days) + 7% GST	\$ 1,123.50
Surveyor Fees	\$
Taxi Fees / E-License / Others	\$
Police Report/GIA	\$ 2.00
Medical Fees	\$
Towing Fees	\$
Grand Total	\$ 2,810.75

Car date in: 10/04/2019 Car date out: 13/04/2019

Authorized Repair Days: 04 (TP/OD/WS/Recovery of Incidental Costs)

Please pay the amount of **S\$ 2,810.75** in favor of **MOVA AUTOMOTIVE PTE LTD.**

If you have any enquiries, please call Ms Suann @ 62723892 or email suann@moval.com.sg

Yours faithfully,
MOVA AUTOMOTIVE PTE LTD
For Claims Manager

NOTE: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

- This is a computer generated letter and does not need a signature.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC4/EQI19005708/pb3

04 APRIL 2019

U SAY MARKETING PTE LTD

8A Admiralty St,

#04-04

Singapore 757437

Attn: The Management

Dear Sir/Madam,

ACCIDENT INVOLVING YN 3246T AND YM 4179C ON 12/03/2019

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

We have received a claim from YM 4179C against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

CHEW HSIAO TONG

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)



Main Office: Move Building, No 22 Jalan Kiang, Singapore 159419. Tel: (65) 6476 3333 Fax: (65) 6271 5891 Website: www.mova.com.sg
Workshop: Block 1006, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722 Tel: (65) 6272 3852 Fax: (65) 6270 8314

POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) YM 4179C and (Third
Party's Vehicle No.) YN 33161 on 12/03/19 along
Jurong Logistic Hub M17

BY THIS POWER OF ATTORNEY, I/We, Trans Concorde Services Pte Ltd
NRIC/Passport No. 199304624R (Address)*

_____ a company incorporate in Singapore and having its registered office at
(Address)* _____ owner of Vehicle Registered No.

_____ hereby irrevocably appoint MOVA AUTOMOTIVE PTE LTD,
(MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah
Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be my/our Attorney and in my/our
name(s) and on my/our behalf to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which I/we may have against the other party/parties to the Accident and under the insurance policy/policies taken up by such party/parties or alternatively under Insurance Policy No. _____ taken up by me/us (subject to approval by my Insurance Company) in respect of the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on my/our behalf as my/our Attorney shall in MOVA absolute discretion, deem fit.
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of MOVA AUTOMOTIVE PTE LTD and to give a valid receipt and discharge thereof.
4. For any of the purposes aforesaid, to execute, sign, seal and deliver all documents whatsoever in relation thereto.
5. Generally do all such acts as it shall deem necessary for the purpose of settling such claim(s) and
6. To agree to any settlement at the absolute discretion of MOVA.

I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by me/us in my/our own proper person(s) and I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

I/We hereby further declare that the powers and authority hereby conferred shall remain irrevocable.

I/We further confirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand and seal this day 10 of the month of 4 Year Two Thousand - 2019.

Signed, Sealed & Delivered By:

Customer's Name: Trans Concorde Services Pte Ltd

NRIC No:

Co's Rubber Stamp, where applicable.



MOVA's copy

*delete as appropriate.

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

Tax Invoice

13/12/2019

EQ INSURANCE CO LTD
5 MAXWELL ROAD
#17-00 TOWER BLOCK MND COMPLEX
SINGAPORE 069110

Attention :- XA039

Page # :- 1

Veh # :- YM4179C

Veh Model :- MITSUBISHI

Tax # :- CK632098

Claim # :- T210419

ACC. Date :- 12/03/19

Terms :- C.O.D Days

Remarks :-

No.	Description	Qty	U.Price	Amounts S\$
SPECIAL NET ITEMS :				
1.	ALUMINIUM BOX - REAR PILLAR RH	1 PC	900.00	900.00
2.	ALUMINIUM BOX - BACK DOOR HINGE LOWER RH	1 PC	50.00	50.00
3.	ALUMINIUM BOX - BACK DOOR HINGE STOPPER RH	1 PC	25.00	25.00
SPECIAL NET TOTAL S\$				975.00
LABOUR :				
TO CUT/WELD REAR ALUMINIUM BOX PILLAR, TO REMOVE & REFIT AFFECTED & ALIGNMENT				600.00
LABOUR TOTAL S\$				600.00

E. & O.E

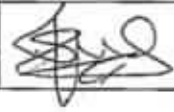
NON-TAX AMOUNT S

AMOUNT S\$ 1,575.00

GST @ 7 % 110.25

AMOUNT DUE S\$ 1,685.25

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

RENTAL DETAILS			INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	1471 Suzuki	Vehicle No: YP3314U	Singapore	Malaysia	Signature
Date/Time Out:	10/4/19 @ 1025H		S\$ 2000.00	S\$	
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		Per Accident	Per Accident	
Date/Time In:	13/04/2019 @ 1150H		Charges		
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:	Weeks @\$	Per Week	
Change Over 2:	Date:	Initial:	3 Days @\$ 350.00	Per Day	31050.00
KM Out:	110081	KM In: 110303	Hours @\$	Per Hour	
HIRER DETAILS			Sub-Total		
Named Hirer			Less Discount	%	
Name:	Wong Soon Weng		Rental Charges		
Address:	Blk 424 Clementi Avenue 1		CDW @\$	per day / week / month	
	#19-301 S(120424)		PAI @\$	per day / week / month	
			Petrol Top-Up		
Identity Card No:	S0033219D		Misc Charges		73.50
Date of Birth:	20/03/1951		GST +7%		1123.50
Driving License:	21/01/1974		Total		
Country of Issue:			VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS	
Tel:	(HP) 92423628 (O)		Pre-Payment		
Nationality:			Downpayment and Deposit		
Effective Date:			Amount Refunded/ Due		
			Signature of Refund		
Additional Hirer			Remarks:	Tp claim- YM479C	
Name:			Suanne		
Address:			Invoice No:	Ref. No:	
			Checked Out By:	Checked In By:	Checked By:
Identity Card No:					
Date of Birth:					
Driving License:			Sales-In Charge:		
Country of Issue:			Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/>		
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

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- 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 as a day rental.
- 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-19-039928
Date of Request: 13/03/2019

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: 13/03/2019
Enquiry By: SUANNE Chiu Nyet Fah
TP Vehicle No: YN3246T
Accident Date: 12/03/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YN3246T	EQ Insurance Company Ltd	03/07/2018-02/07/2019	6223 9433

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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Operating Hours: Monday to Friday 9am to 5pm
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TAX INVOICE

Our Ref No: GR-19-039928
Date of Request: 13/03/2019

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: 13/03/2019
Enquiry By: SUANNE Chiu Nyet Fah
TP Vehicle No: YN3246T
Accident Date: 12/03/2019

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:

☒ GIRO ☐ Cash ☐ Cheque