



In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



GST REG: M2-8920338-9

NAME : EQ INSURANCE COMPANY LIMITED

ADDRESS : 5 MAXWELL ROAD

TELEPHONE : #17-00 TOWER BLOCK MND COMPLEXS(069110
62239433

MODEL : FRLARBZJ11UEA--A--

ENGINE NO : HRA2307174A

CHASSIS NO : SJNFEAJ11U1718821

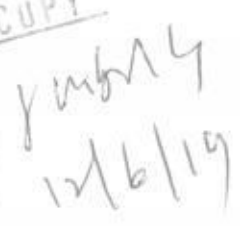
VEHICLE NO : SFL67Z

INVOICE NO.	W32146883
INVOICE DATE	29-MAY-2019
TERMS	CREDIT
DATE REC'D	02-MAY-2019
SA / SE	HAMZAH
JOB NO	HG802706
MILEAGE	035022
YOUR REFERENCE :	DM19HO00963/JT

ITEMS	JOB DESCRIPTION	AMOUNT
7	R/R DOOR ARC MLDG Qty:1 @ \$483.00 each (Disc:20.00% After Disc:\$386.40each)	386.40
8	DOOR-FRONT RH Qty:1 @ \$1104.80 each (Disc:20.00% After Disc:\$883.84each)	883.84
9	DOOR-REAR RH Qty:1 @ \$1104.80 each (Disc:20.00% After Disc:\$883.84each)	883.84
	SUBTOTAL :	2777.12

REMARKS	
1	DIRECT SETTLEMENT.

Insurance Co : EQ INSURANCE COMPANY LIMITED
Policy No.... : *
Claim Type .. : DIRECT SETTLEMENT / THIRD PARTY CLAIM
DOA..... : 31-MAR-2019
Our Ref..... : INS/IC/H/0184/19
Surveyor..... : M/S LKK ENGINEERING & MANAGEMENT SERVICES



LABOUR	:	1790.00
PARTS	:	2777.12
SUBTOTAL	:	4567.12
TOTAL	:	4567.12
GST (7%)	:	319.70
AMOUNT DUE	:	4886.82

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)
DOLLARS: FOUR THOUSAND EIGHT HUNDRED EIGHTY
SIX AND CENTS EIGHTY TWO ONLY. *12/19*

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "**Conditions**") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating to the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

WORKSHOP

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE _____

TIME

VEHICLE NO : SF167Z (HG802706/W32146883)

RELEASE BY 2019

17:05:58



www.tanchong.com

AUTOLUTION INDUSTRIAL PTE LTD

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



TAX INVOICE

GST REG: M2-8920338-9

NAME : EQ INSURANCE COMPANY LIMITED
ADDRESS : 5 MAXWELL ROAD
TELEPHONE : #17-00 TOWER BLOCK MND COMPLEXS(069110)
MODEL : 62239433
ENGINE NO : FRLARBZJ11UEA--A--
CHASSIS NO : HRA2307174A
VEHICLE NO : SJNFEAJ11U1718821
SFL67Z

INVOICE NO. : W32146883
INVOICE DATE : 29-MAY-2019
TERMS : CREDIT
DATE REC'D : 02-MAY-2019
SA/SE : HAMZAH
JOB NO : HG802706
MILEAGE : 035022
YOUR REFERENCE : DM19H000963/JT

ITEMS	JOB DESCRIPTION	AMOUNT
1	LABOUR	585.00
2	LABOUR CHARGES TO REPAIR RH CENTRE PILLAR, RH REAR FENDER AND RENEW BOTH RH DOORS.	750.00
3	CHARGES TO SPRAY PAINTING SAME.	160.00
4	REMOVE AND INSTALL BOTH RH DOORS MECHANISM.	200.00
5	APPLY SEALANT TO BOTH RH DOORS.	NC
6	RENEW RH REAR WHEEL RIM AND WHEEL BALANCING.	95.00
	CHECK AND ADJUST WHEEL ALIGNMENT.	1790.00
	SUBTOTAL	
	PARTS	80.56
1	RH FRT DOOR SASH	
	Qty:1 @ \$100.70 each (Disc:20.00% After Disc:\$80.56each)	23.92
2	R/F DOOR TAPE	
	Qty:1 @ \$29.90 each (Disc:20.00% After Disc:\$23.92each)	258.88
3	R/F DOOR LOWER PVC MLDG	
	Qty:1 @ \$323.60 each (Disc:20.00% After Disc:\$258.88each)	23.92
4	R/R DOOR TAPE	
	Qty:1 @ \$29.90 each (Disc:20.00% After Disc:\$23.92each)	23.92
5	R/R DOOR TAPE	
	Qty:1 @ \$29.90 each (Disc:20.00% After Disc:\$23.92each)	211.84
6	R/R DOOR LOWER PVC MLDG	
	Qty:1 @ \$264.80 each (Disc:20.00% After Disc:\$211.84each)	

DOLLARS:

WORKSHOP MANAGER

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WORKSHOP

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

RELEASE BY



**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-19-050499
Date of Request: 01/04/2019

Your Ref No: Online Purchase

Tan Chong Motor Sales Pte Ltd
911, Bukit Timah Road
Singapore 589622

Dear Sir/Madam,

Enquiry Date: 01/04/2019
Enquiry By: Eric Koh Yong Lang
TP Vehicle No: SKH582P
Accident Date: 31/03/2019

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

P.T.O



CERTIFIED
TRUE COPY

Handwritten signature
12/6/19



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

Third Party Insurer Enquiry

Our Ref No: GR-19-050499

Date of Request: 01/04/2019

Your Ref No: Online Purchase

Tan Chong Motor Sales Pte Ltd
911, Bukit Timah Road
Singapore 589622

Dear Sir/Madam,

Enquiry Date: 01/04/2019
Enquiry By: Eric Koh Yong Lang
TP Vehicle No: SKH582P
Accident Date: 31/03/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKH582P	EQ Insurance Company Ltd	24/02/2019-23/02/2020	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.

This is a computer generated document and requires no signature.



LETTER OF AUTHORITY AND INDEMNITY



- ☐ Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589622
- ☐ Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
- ☐ Autolution Industrial Pte Ltd, 19, Ubi Road A, Singapore 408623
- ☐ TC Autoclinic Pte Ltd, 25, Leng Kee Road, Singapore 159097
- ☐ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

Type of Claim:

- ☐ Third Party (Direct Settlement)
- ☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SFL672 AND SKH 582P
ON 31/3/2019 AT Bayshore Road

- I, the owner of vehicle no. SFL672 hereby instruct you and authorise you to act for me with respect to the following:
 - To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
 - To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
 - To sign discharge voucher on my behalf.
- I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned
- In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
- In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
- If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
- I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
- I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
- I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
- I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
- In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
- For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
 - For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
 - For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name <u>TAN SIEW CHUAN</u>		Company Name: <u>Autolution Industrial Pte. Ltd</u>	
Address <u>22, Bayshore Road, #06-04,</u>		Claim Officer's Name <u>Hansel Sudh</u>	
Tenor <u>1B The Bayshore, Singapore 46990</u>		Telephone No <u>96450079</u>	
Telephone No <u>81686276</u>		Date <u>1-4-2019</u>	
Date <u>1-4-2019</u>		Claim Officer Signature	
Company Stamp (For Co. Regn Vehicle)		Authorized Signature	





Autolution Industrial Pte Ltd
Tan Chong Motor Sales Pte Ltd's Authorised Dealer
19 Ubi Road 4
Singapore 408623
Tel (65) 64909666 / 67038680
Fax (65) 68467483
Business Reg. No.: 199500871W

DATE: 29.5.2019
YOUR REF: CC4/EQJ19006232/Uhb3
OUR REF: INS/IC/H/0184/19

The Motor Claims Department
ATTENTION TO CLAIMS OFFICER : EQ INSURANCE COMPANY LTD
MOTOR CLAIM MANAGER

Dear Sir/ Madam,

Accident Involving: MY CLIENT VEHICLE SFL67Z AND YOUR INSURED VEHICLE SKH582P
Accident Date: 31/3/2019 TIME 10:30
Place and time of accident: BAYSHORE ROAD
RE: Direct Settlement for the Vehicle Number. SFL67Z
On behalf of the owner of Motor Vehicle No. SFL67Z, which was involved
in the captioned accident

The Vehicle was surveyed by your appointed surveyor at **AUTOLUTION INDUSTRIAL PTE LTD 19 UBI ROAD 4 SINGAPORE 408623**

and I based my claims on his recommendation for **SGD \$ 5128.82** being the repair cost and period of repair for
3 days. (Strictly on a Without Prejudice Basis)

As the accident was caused by the negligent act of your insured **SKH582P** I am submitting this claim for your
consideration

COST REPAIR		SGD \$	4,886.82
COST OF LESS	3 DAYS (S) SGD\$ 80 /DAY	SGD \$	240.00
(Please refer to authorization letter)			
GIA REPORT FEES (SGD\$ 12.00 FOR SEARCH FEE & SGD\$ 15.00 FOR EACH REPORT FEE		SGD \$	
LTA SEARCH /SURVEY FEE		SGD \$	2.00
COST OF CAR RENTAL	DAY(S) SGD \$	SGD \$	
Medical claims		SGD \$	
TOTAL AMOUNT		SGD \$	5,128.82

We enclose herewith the following documents to support my claims:

- | | |
|-------------------------------|--------------------------|
| A. AUTHORIZATION LETTER | E. FINAL REPAIR BILL (S) |
| B. LTA SEARCH | F. GIA REPORT (S) RESULT |
| C. INSURANCE CERTIFICATE ETC. | G. LETTER OF DEMAND |
| D. CAR RENTAL INVOICE | H. MEDICAL CLAIM |

Kindly look into this matter and let me hear from you on the settlement of the owner's
claims as soon as possible. Thank you.

Yours Faithfully,


Hameed Bin Sa'ad

Service Supervisor

Tel: 67038690 HP: 96450079



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