



Motor Image Enterprises Pte Ltd
19 Lorong 8 Toa Payoh
Singapore 319255
Tel : (65) 6417 0333
Fax : (65) 6252 5655
BRN 198702032R

BREAKDOWN OF PAYMENT

Attn: Motor Claims Department

Dear Sir/ Madam,

Accident involving vehicle QME 5452R and G1BA 4910T on 26.03.2019

The accident was caused solely by your insured's negligence. We therefore, seeking compensation from you for my financial loss as itemised below:

a)	Repair Cost/ Excess	S\$ 7998.68
b)	Loss of Use/ Rental of vehicles for _____ day(s) @ S\$ _____ per day	S\$ 866.70
c)	LTA/ GIA Search Fees	S\$ 2.00
d)	Towing Fees	S\$
e)	Others _____	S\$
TOTAL		S\$ 8867.38

I enclose herewith copy of the following: (please tick the appropriate boxes)

<input checked="" type="checkbox"/>	Repair Invoice	<input checked="" type="checkbox"/>	LTA/ GIA Search Receipt
<input type="checkbox"/>	Policy Excess Invoice	<input checked="" type="checkbox"/>	NRIC/ Driving License
<input checked="" type="checkbox"/>	Discharge Voucher	<input checked="" type="checkbox"/>	Letter Of Authority
<input checked="" type="checkbox"/>	Rental Invoice	<input type="checkbox"/>	GIA Report
<input checked="" type="checkbox"/>	Certificate of Insurance	<input type="checkbox"/>	Survey Report
<input type="checkbox"/>	Towing Invoice	<input type="checkbox"/>	Medical Invoice

All payment should be payable to **Motor Image Enterprises Pte Ltd/my favour** and the said payment as full and final settlement of my claim.

Please acknowledge receipt and let me have your favourable reply soon.

*Contact person: Siow Hooi – 6703 8115
hooi@motorimage.net



LETTER OF AUTHORITY AND INDEMNITY

Motor Image Enterprises Pte Ltd

☒ Toa Payoh Service Center, 19, Lorong 8, Toa Payoh, Singapore 319255

☐ Leng Kee Service Center, 25, Leng Kee Road, Singapore 159097


Type of Claim:

☒ Third Party (Direct Settlement)

☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SME 5452R AND GBA 4910T
ON 26th MAR 19 AT ECP (CHANGI) BEFORE TANJONG KATONG EXIT.

1. I, the owner of vehicle no. SME 5452R hereby instruct you and authorise you to act for me with respect to the following: -
 - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
 - (c) 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.
 - (d) To sign discharge voucher on my behalf.
2. 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.
3. 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.
4. 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.
5. 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.
6. 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.
7. 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.
8. 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.
9. 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.
10. 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.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
 - a) 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.
 - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name	BEE SIM FOODS PTE LTD	Company Name	MOTORIMAGE ENTERPRISES PTE LTD
Address	20 BUKIT BATOK CRESCENT #13-15 ENTERPRISE CENTRE S(658080)	Claim Officer's Name	DANIEL A JUDE
Telephone No	87526230 / 9222	Telephone No	6703 8101 / 8611 3195
Date	27 th MAR 19	Date	27 th MAR 19
Company Stamp [For Co Regn Vehicle]	Authorized Signature 	Claim Officer Signature	

**Motor Image Enterprises Pte Ltd**

19 Lorong 8 Toa Payoh Singapore 319255

Service Centre Tel: (65) 6703 8101 / 102 Fax: (65) 6253 5535

25 Leng Kee Road Singapore 159097

Service Centre Tel: (65) 6703 8163 Fax : (65) 6479 1137

Website: www.motorimage.net

**TAX INVOICE**

GST Reg No. M2-0076975-9

Co. Reg No. 198702032R

Sales: INSURANCE CUSTOMER**Invoice No: L514237****For cash sales, payment will be
endorsed on this invoice and no
separate receipt will be issued.****DATE REC'D: 17-Apr-2019****SERVICE ADVISOR: HOOI****JOB No.: L499948****MILEAGE: 15034****ID:****NAME: EQ INSURANCE COMPANY LTD****ADDRESS: 5 MAXWELL ROAD**

#17-00 TOWER BLOCK MND COMPLEX. S(069110)

TELEPHONE:**MODEL: XV 2.0I-S EYESIGHT AWD CVT****ENGINE No.: FB20YE57097****CHASSIS No.: JF1GT7KL5JG045909****REGISTRATION No.: SME5452R**

ITEMS	CODE	DESCRIPTION OF REPAIRS	AMOUNT
1	TPCLAI	CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM)	
		AGAINST GBA4910T - EQ	
2	REMARK	CONDUCT TP CLAIM EQ DATE:26/03/2019 TIME:1525HRS	
		LOCATION:ECP CHANGI BFR TANJONG KATONG EXIT	
3	INS01	FOR ACCIDENT CAR OR REPAIR JOB QUOTATION, AN	
		ADMINISTRATIVE CHARGE WILL BE IMPOSED IF VEHICLE	
4	INS02	IS WITHDRAW AND TOWED OUT FOR REPAIR. REFER TO	
		STANDARD RATE CHART (REF. 0338).	
5	INS03	STORAGE CHARGES OF \$30/DAY WILL BE IMPOSED FROM	
		THE DATE OF CONFIRMATION OF AUTHORISATION BY THE	
6	INS05	INSTRUCTIONS WILL BE TAKEN FROM THE OWNER ONLY. IF	
		IT IS NOT POSSIBLE, AN AUTHORISATION LETTER FROM	
7	INS06	THE OWNER IS REQUIRED.	
8	INS07	CUSTOMER ARE INFORMED AND ACCEPT THAT NUMBER OF	
		DAYS FOR LOSS OF USE IS BASE ON THE FOLLOWING:	
9	INS08	NO.OF DAYS FOR LOSS OF USE RECOMMENDED BY INS.CO.	
		APPOINTED SURVEYOR NO FURTHER CLAIM CAN BE ALLOWED	
10	INS09	CUST ACK THAT CLAIMS NOT EXCEEDING \$3,000 & ABOVE	
		WILL HAVE TO BE REFER TO FIDREC DIRECTLY.	
11	REMARK	REPAIR/REPLACE RR BUMPER,RR TAILGATE,RR FLOORPAN &	1,680.00
		PANEL	
12	REMARK	RESPRAY RR BUMPER,RR TAILGATE,RR FLOORPAN & PANEL	1,260.00
13	REMARK	TO CONDUCT WATER SEEPAGE TEST	20.00
14	REMARK	TRANSFER TAILGATE MECHANISM	120.00
15	REMARK	REMOVE & REFIX CARPET,SEATS TO FACILITATE REPAIRS	250.00
16	REMARK	REMOVE & INSTALL REAR WINDSCREEN	300.00
17	REMARK	TO CONDUCT REAR LIGHTING TEST	30.00
18	REMARK	TO CONDUCT PROTECTANT COATING	250.00
19	REMARK	TO CONDUCT ANTI-RUST COATING	290.00

Certified True Copy

**Motor Image Enterprises Pte Ltd**

19 Lorong 8 Toa Payoh Singapore 319255
Service Centre Tel (65) 64170100/101 Fax (65) 62535535
25 Leng Kee Road Singapore 159097
Service Centre Tel (65) 64764776 Fax (65) 64791137
Website: www.motorimage.net

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JOB No.: L499948

MILEAGE: 15034

ID:

NAME: EQ INSURANCE COMPANY LTD

ADDRESS: 5 MAXWELL ROAD

#17-00 TOWER BLOCK MND COMPLEX. S(069110)

TELEPHONE:

MODEL: XV 2.0I-S EYESIGHT AWD CVT

ENGINE No.: FB20YE57097

CHASSIS No.: JF1GT7KL5JG045909

REGISTRATION No.: SME5452R

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
20	REMARK TO SUPPLY & INSTALL REVERSE SENSOR - 2 EYES	300.00
21	REMARK TO SUPPLY & INSTALL REAR TINTED FILM	145.00
22	REMARK SUNDRIES	30.00
23	REMARK REMOVE & REFIX REAR BOOT GARNISH & TRIM TO FACILITATE REPAIRS	120.00
TOTAL(LABOUR)		4,795.00
1	SKIRT COMPL R 5D 52401FL0209P(Qty : 1 @ 432.00 each(Discount 20.00%))	345.60
2	BUMPER FACE R XV 57704FL250(Qty : 1 @ 401.00 each(Discount 20.00%))	320.80
3	BRKT LWR R 57707FL510(Qty : 1 @ 50.40 each(Discount 20.00%))	40.32
4	BEAM COMPL R EU 57711FL0419P(Qty : 1 @ 203.00 each(Discount 20.00%))	162.40
5	COVER HOOK R XV 57731FL570NN(Qty : 1 @ 6.50 each(Discount 20.00%))	5.20
6	PANEL COMPL R GAT 60809FL0009P(Qty : 1 @ 940.00 each(Discount 20.00%))	752.00
7	GLASS ASSY R G 63019FL030(Qty : 1 @ 1062.00 each(Discount 20.00%))	849.60
8	DAM RUBBER 65245FL000(Qty : 1 @ 18.00 each(Discount 20.00%))	14.40
9	ORNAMENT ASSY F SIX 91174SA181(Qty : 1 @ 68.40 each(Discount 20.00%))	54.72
10	LETTER MK R 93079FL100(Qty : 1 @ 90.00 each(Discount 20.00%))	72.00
11	LETTER MK R XV 93079FL140(Qty : 1 @ 36.00 each(Discount 20.00%))	28.80

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TELEPHONE:**MODEL: XV 2.0I-S EYESIGHT AWD CVT****ENGINE No.: FB20YE57097****CHASSIS No.: JF1GT7KL5JG045909****REGISTRATION No.: SME5452R**

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
12	EYE SIGHT EMBLEM (TCS)	34.56
	LPH010ES-EMB(Qty : 1 @ 43.20 each(Discount 20.00%))	
	TOTAL(SPARE PARTS)	2,680.40

Subtotal 7,475.40
GST(7%) 523.28
TOTAL \$7,998.68

DATE : 09-Apr-2020

CUSTOMER

MANAGER

The customer acknowledges and confirms by taking delivery of the vehicle and/or upon receipt of this invoice, either personally or by an agent that his/her complaints relating to the vehicle have been rectified to his/her satisfaction and that the Company's liability for defective work and/or materials will be limited to rectification works and/or replacement of parts without charge or at discounted charge, at the Company's option. The customer further acknowledges that any discrepancy in this invoice (with the exception of errors and omissions) must be brought to the Company's attention in writing within three(3) days from the date of this invoice failing which it will be deemed correct.

CUSTOMER

Not yet a DUO Member? Join us now at www.DUO.com.sg and start accumulating your points for your invoice today!

Certified True Copy



Hiring Agreement

Co.Reg.No : 198403671H
GST Reg.No.: M2-0067432-1

TP2019238

ACCOUNTS COPY

SALESMAN CODE: AK

Vehicle Number: SKQ5529P Make & Model: SUBARU IMPREZA 4D 1.0i-3 AWD CVT Date: 17/04/2019
 Change Over 1: _____ Initial: _____ Date: _____
 Change Over 2: _____ Initial: _____ Date: _____

Hirer

Name: MOTOR IMAGE ENTERPRISES PTE LTD
 Address: 19 LORONG 8 TOA PAYOH
 Singapore: (319255)
 Contact Person: MR SAYEDINAH Tel: 91779089

1st Driver

Name: LEE DAI HAN
 Address: 38 LORONG ONG LYE
 Singapore: (536407)
 Contact No: 87526230 (H) (O) _____ (HP) _____
 Occupation: _____ Date of Birth: 01/12/1989
 Passport / NRIC No: S8943693A Nationality: SINGAPOREAN
 Driver's Licence No: S8943693A Driving Exp: yrs
 Country of Issue: SINGAPORE Driving Date: _____

Additional Driver

Name: _____
 Address: _____
 Singapore: ()
 Contact No: (H) (O) _____ (HP) _____
 Occupation: _____ Date of Birth: _____
 Passport / NRIC No: _____ Nationality: _____
 Driver's Licence No: _____ Driving Exp: yrs
 Country of Issue: _____ Driving Date: _____

Remarks / Delivery Location

SME5452R 3RD PARTY CLAIMS REF MIE TPY JUDE

Hirer hereby agrees to abide to the terms and conditions as set out overleaf. If I opt to pay by credit / charge card, my signature here will be deemed to have been made on the applicable credit and card charge slip.

I also agree to allow the company to hold a security deposit equivalent to the excess amount as set out in the Hire Agreement for the term of hire by credit card/ cash.

The Hirer agrees that smoking and carriage of pets are not allowed in the hired vehicle. An extra charge of S\$250 will be applicable to initialize the vehicle.

The Hirer agrees that the vehicle must be returned at the agreed time and date. Late return is chargeable, an hourly charge of S\$50 will be applied.

Check In / Out

Date Out: 17/04/2019 Time Out: 09:30:00 Km Out: 12345.00

Petrol Level: E

Agreed Date of Return: 26/04/2019 09:30:00

Date In: _____ Time In: _____ Km In: _____

Petrol Level: E

Collision Damage Waiver & PAI

ACCEPTS

To Pay Extra Fees

Daily S\$0.00

Weekly S\$

Monthly S\$

Weekend S\$

Non-Waivable Excess

S\$ 0.00 per accident

DECLINES

Hirer Declines CDW

Excess S\$ 2,000.00

per accident

Signature _____

Signature _____

*The above is subjected to 7% GST.

Per Day	90.00	810.00
Per Week		
Per Month		
Weekend		
Rental Charges <u>9 days x \$90</u>	810.00	
CDW	0.00	
PAI	0.00	
Deliver / Collection	0.00	
Malaysia Charge		
Petrol		
Other Charge		
7% GST	56.70	
Sub Total	866.70	

OVERALL CHARGES

\$866.70

Deposit Tax Invoice

Deposit Inv: _____ Amount: _____
 O/R No: _____ Date: _____

For Official Use

INV: S1015118 O/R: _____ Date: 26-04-19
 INV: _____ O/R: _____ Date: _____
 INV: _____ O/R: _____ Date: _____

 HIRER'S SIGNATURE

 DOWNTOWN TRAVEL SERVICES PTE LTD

Motor Image Enterprises Pte Ltd

Request For Car Rental

Date: 15th APR 19

Department: INS

Request By: JUDE

Invoice To: MIE SVC - TP / MIE SVC - LK

Reason:

3RD PARTY RENTAL REQUEST

(LEE DAI HAN) BEE SIM FOODS PTE LTD -> 8752 6230

Owner's Car Plate No: SME 5452R

Authorized No. of days:

Owner's Car Model: XV

Date Required: 17th APR 19

Date Returned:

Model of Vehicle Required: (Auto) Manual:

Authorized By: DANIEL LIM

(Name & Signature of Dept Mgr)

To Be Completed by Downtown Travel Service P L Staff:

Vehicle Number Assigned: SKQ5529P

Car Model: S MYR21

Rental Date: 17/4/19

Date Returned: 26.04.2019

Process by: KANAR



www.tanchong.com



DOWNTOWN TRAVEL SERVICES PTE LTD

19 Lorong 8 Toa Payoh Singapore 319255
Tel (65) 6703 8400 Fax (65) 6336 4677
Co. Reg. No. 1984-03671/H
GST Reg. No. M2-0067432-4

STOR IMAGE ENTERPRISES PTE LTD

9 LORONG 8 TOA PAYOH

(319255)

ATTN : MR SAYEDINAH

GST Reg No. : M2-0067432-4
Tax Invoice : S1015118
Inv. date...: 26-APR-2019
Print date...: 26-APR-2019
Print time...: 18:15:22
Page no.....: 1
Agreement no: TP2019238
Salesman....: AK

Description

Amount

RENTAL CHARGE FROM 17-APR-2019 TO 26-APR-2019
SUBARU IMPREZA 4D 1.6I-S AWD CVT - SKQ5529P
(LEE DAI HAN)

810.00

=====

TOTAL SGD(BEFORE GST)	810.00
GST(7%)	56.70
TOTAL SGD(AFTER GST)	866.70

=====

N.B. Cheques should be crossed and made payable to
DOWNTOWN TRAVEL SERVICES PTE LTD
Interest at 0.05% per day on overdue account. Terms
of payment strictly 7 days.

DOWNTOWN TRAVEL SERVICES PTE LTD

Authorised Signature



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-19-048752

Date of Request: 28/03/2019

Your Ref No: Online Purchase

Motor Image Enterprises Pte Ltd
19 Lorong 8 Toa Payoh
Singapore 319255

Dear Sir/Madam,

Enquiry Date 28/03/2019
Enquiry By Lim Po Beng
TP Vehicle No. GBA4910T
Accident Date 26/03/2019

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



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/EQI19006259/Kga3

25 SEPTEMBER 2019

**CASUAL MEDIA PTE LTD
18 EASTWOOD PLACE
SINGAPORE 486543**

Dear Sir/Madam,

ACCIDENT INVOLVING GBA 4910T AND SME 5452R ON 26/03/2019

We refer to the above accident. We are the Appointed Surveyor and Loss Adjuster Company by your Motor Insurer (EQ INSURANCE COMPANY LIMITED) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

This is to inform you that we received a Third Party Claim from SME 5452R.

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,

CECILIA CHONG
Case Handler
DID: 6749 4274
FAX: 6741 4108
EMAIL: ceciliachong@lkkauto.com

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