

Letter Of Claim For Uninsured Loss

Insurance Company: LONGMAC Date: _____
Address : _____
Attention : Claims Department – Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number GBC 71943 & XD 1029G
at ADMIRALTY RD TWO WOODLAND on 02/02/18.
CITICORP

I am the owner of Vehicle Number GBC 71943 which was involved with the accident as mentioned above.

As the accident was solely caused by your insured vehicle, bearing registration number XD 1029G, I hereby submit my claim against your company for the uninsured loss which are as follows:

Excess payment for OD claim	\$	_____
Loss of usage (\$\$/day) for <u>4</u> days <u>X\$60/-</u>	\$	<u>240.00</u>
Car rental as per invoice attached	\$	_____
Search fee	\$	<u>2000</u>
Others <u>Total repair cost</u>	\$	<u>4581.53</u>
Total claim amount	\$	<u>4823.53</u>

Enclosed please find copies of GIA report, invoices and certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof, or alternatively let me have the full and final settlement for all uninsured loss which amounted to \$ 4823.53, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely

[Signature]



(Owner of motor vehicle)

Name : DR FERRY
Address : 91195676
Telephone : _____ S()



**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-19-021258
Date of Request: 11/02/2019

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 11/02/2019
Enquiry By Eric Koh Yong Lang
TP Vehicle No. XD1029G
Accident Date 02/02/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
XD1029G	Lonpac Insurance Bhd	29/07/2018-28/07/2019	+65 62507388

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.



**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-19-021258
Date of Request: 11/02/2019

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 11/02/2019
Enquiry By Eric Koh Yong Lang
TP Vehicle No. XD1029G
Accident Date 02/02/2019

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:

☒ GIRO ☐ Cash ☐ Cheque



www.tanchong.com

Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
SERVICE CENTRES
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : LONPAC INSURANCE BHD
ADDRESS : 300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : YTKARURM20TWL-CAAC
CHASSIS NO : K9KC400D057540
VEHICLE NO : VSKYBAM20Z0146759
GBG7194S

INVOICE NO :
INVOICE DATE : W12140947
TERMS : 25-JUN-2019
DATE REC'D : CREDIT
SA/SE : 08-MAY-2019
JOB NO : LAW
MILEAGE : BG1062162
YOUR REFERENCE : 038195
INS/IC/LAW/0090/20

ITEMS	JOB DESCRIPTION	AMOUNT
5	AUTHORISE BY:HSIAO TONG (LKK) ON 08.05.2019 @ 1234HRS	
6	*** OWNER CLAIM LOSS OF USE	
7	REPAIR FRM 13.05.2019-16.05.2019	
Insurance Co : LONPAC INSURANCE BHD Policy No.....: TP-XD1029G Claim Type ...: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA.....: 02-FEB-2019 Our Ref.....: INS/IC/LAW/0090/2019 Surveyor.....: M/S LKK ENGINEERING & MANAGEMENT SERVICES		
LABOUR :		1428.00
PARTS :		2853.80
SUBTOTAL :		4281.80
TOTAL :		4281.80
GST (7%) :		299.73
AMOUNT DUE :		4581.53

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)
DOLLARS: FOUR THOUSAND FIVE HUNDRED EIGHTY
ONE AND CENTS FIFTY THREE ONLY.

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 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.

CUSTOMER

TO SECURITY GUARD

PLEASE TEAR ALONG PERFORATED LINE

VEHICLE NO : GBG7194S (BG1062162/W12140947)

DATE : 16-05-2019
TIME : 11:40:43
RELEASE BY : [Signature]



www.tanchong.com

Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
SERVICE CENTRES
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : LONPAC INSURANCE BHD
ADDRESS : 300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : YTKARURM20TWL-CAAC
CHASSIS NO : K9KC400D057540
VEHICLE NO : VSKYBAM20Z0146759
GBG7194S

INVOICE NO :
INVOICE DATE : W12140947
TERMS : 25-JUN-2019
DATE REC'D : CREDIT
SA/SE : 08-MAY-2019
JOB NO : LAW
MILEAGE : BG1062162
YOUR REFERENCE : 038195
INS/IC/LAW/0090/20

ITEMS	JOB DESCRIPTION	AMOUNT
5	EMBLEM Qty:1 @ \$48.50 each (Disc:20.00% After Disc:\$38.80each)	38.80
6	CLIP GRILLE \$5.70 EA X 02 Qty:2 @ \$5.70 each (Special Nett Item)	11.40
7	FASCIA FRT Qty:1 @ \$682.10 each (Disc:20.00% After Disc:\$545.68each)	545.68
8	HOOD Qty:1 @ \$1157.90 each (Disc:20.00% After Disc:\$926.32each)	926.32
9	FRT LICENCE PLATE (SMART PLATE WITH CASING) LONG Qty:1 @ \$60.00 each (Special Nett Item)	60.00
10	SUNDRIES Qty:1 @ \$20.00 each (Special Nett Item)	20.00
	SUBTOTAL :	2853.80
	REMARKS	
1	NTUC CLAIM AGAINST LONPAC INSURANCE DOA:02.02.2019	
2	TOC: 'DIRECT SETTLEMENT OUR REF:INS/IC/LAW/0090/2019	
3	SATISFACTION NOTE ATTACHED T/P VEHICLE NO:XD1029G	
4	SURVEY BY:TAUFIK (LKK) ON 07.05.2019 @ 1400HRS RECOMMEND 4 DAYS REPAIR	

DOLLARS:

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 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.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

RELEASE BY



www.tanchong.com

Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
SERVICE CENTRES
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : LONPAC INSURANCE BHD
ADDRESS : 300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : YTKARURM20TWL-CAAC
CHASSIS NO : K9KC400D057540
VEHICLE NO : VSKYBAM20Z0146759
GBG7194S

INVOICE NO : W12140947
INVOICE DATE : 25-JUN-2019
TERMS : CREDIT
DATE REC'D : 08-MAY-2019
SA/SE : LAW
JOB NO : BG1062162
MILEAGE : 038195
YOUR REFERENCE : INS/IC/LAW/0090/20

ITEMS	JOB DESCRIPTION	AMOUNT
	LABOUR	
1	FOCUS & ADJUST H/LAMP, RESET HORIZONTAL & VERTICAL ALIGNMENT TO FACTORY SPECIFICATION	48.00
2	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA \$100/PANEL X 03	100.00
3	REPAIR LH/RH FRONT FENDDER, SUPPORT PANEL AND RENEW BONNET AND FRONT BUMPER	780.00
4	S/PAINT FRONT BUMPER, BONNET, LH/RH FRONT FENDER AND BOTH HEADLAMP GARNISH LH/RH	500.00
5	SUPPLY AND RENEW FRONT NO. PLATE (SMART PLATE WITH CASING) LONG WHITE/BLACK	NC
	SUBTOTAL :	1428.00
	PARTS	
1	CLIP BUMPER/GRILLE \$1.20 EA X 29 Qty:29 @ \$1.20 each (Disc:20.00% After Disc:\$27.84each)	27.84
2	RH HEADLAMP Qty:1 @ \$625.80 each (Disc:20.00% After Disc:\$500.64each)	500.64
3	LAMP HEADLAMP LH Qty:1 @ \$625.80 each (Disc:20.00% After Disc:\$500.64each)	500.64
4	GRILLE-RADIATOR Qty:1 @ \$278.10 each (Disc:20.00% After Disc:\$222.48each)	222.48

DOLLARS:

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 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.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

RELEASE BY



LETTER OF AUTHORITY AND INDEMNITY

W12140947
4581.52

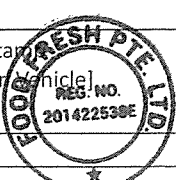
- ☐ Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623
- ☐ Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
- ☐ Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623
- ☐ TC Autoclinic Pte Ltd, 25, Leng kee Road, Singapore 159097
- ☐ TC Autoclinic 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. GBC 71945 AND XD 1029G
ON 02/02/19 AT ADMIRALTY RD TWO WOODLAND CANTON

1. I, the owner of vehicle no. GBC 71945 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	<u>Jeffrey</u>	Company Name <u>Tan Chong</u>
Address		Claim Officer's Name
Telephone No	<u>91195676</u>	<div style="border: 1px solid black; padding: 5px; width: fit-content;">TAN CHONG MOTOR SALES PTE LTD 913 BUKIT TIMAH ROAD SINGAPORE 589623 TEL : 6466 7711 FAX : 6469 7472</div>
Date		Date
Company Stamp [For Co Registered Vehicle] 	Email	Claim Officer's Signature
	Authorized Signature <u>[Signature]</u>	

SATISFACTORY NOTE

W12140947

\$ 4581.53.

TAN CHONG MOTOR SALES PTE LTD (TCMS)

AUTOLUTION INDUSTRIAL PTE LTD (AIPL)

TC AUTOCLINIC PTE LTD (TCAC)

☒
☐
☐

DATE:

OWNER NAME:

NRIC NO.:

ADDRESS:

VEHICLE MODEL:

REGN. NO.:

CHASSIS NO.:

ROD FARBY PTE
LTD
NISSAN NURSD
GBG 71945

TYPE OF CLAIM:

☐ OWN DAMAGE (OD)
☐ OWN DAMAGE (OD) & UNINSURED LOSS
(EXCESS & LOSS OF USAGE) VIA
TCMS / AIPL / TCAC
☐ THIRD PARTY THROUGH
TCMS / AIPL / TCAC
☒ THIRD PARTY - OWNER
DIRECT CLAIM AGAINST
THIRD PARTY INSURANCE
☐ WINDSCREEN / GLASS (W/S)

INSURANCE CO.:

CLAIM NO.:

POLICY NO.:

DATE OF ACCIDENT: 02/02/19	DATE RECEIVED: 13/05/19	DATE COMPLETED: 16/05/19
----------------------------	-------------------------	--------------------------

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no futher claim whatsoever against the above Company in repect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on*

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD [Non Claim Discount] may also be affected, subject to business policy of respective Insurance Company.

(NAME / SIGNATURE OF INSURED)

FOOTNOTE:

☐ TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF OF OWNER THROUGH TCMS'S LEGAL AID

☐ OWNER WILL MAKE CLAIM AGAINST THIRD PARTY INSURANCE COMPANY

☐ TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF OF OWNER UNINSURED LOSS. (EXCESS PAYMENT & LOSS OF USAGE)

☐ DEPOSIT PAID BY OWNER

☐ DOCUMENTS RETURNED TO OWNER

INSURANCE CO. COPY

* Delete When Necessary