



Our Ref : SLU430P

Your Ref : SJU1485Z

19 Aug 2019

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way

#07-16 SGX

Singapore 079120

Attn : Motor Claims Department

WITHOUT PREJUDICE

BY HAND

Dear Sirs,

ACCIDENT INVOLVING MOTOR VEHICLE SLU430P & SJU1485Z ALONG EAST COAST PARKWAY ON 12/05/2019 @ 19:20 HRS

We are the appointed workshop for SAT MOTORS, the owner of motor vehicle **SLU430P**, which was involved in the above captioned accident with your insured vehicle **SJU1485Z**.

The said accident was a result of and/or contributed to by the negligence of the driver of your/your insured vehicle and our client's vehicle had suffered damages.

We hereby quantify our client's claims as follow:-

| | |
|---|----------------------|
| 1. Cost of Repair (Agreed) | S\$ 9,630.00 |
| 2. Loss of Rental (03 days @ \$200/day) | S\$ 642.00 |
| 3. Towing Fee | <u>S\$ 128.40</u> |
| Total | S\$ 10,400.40 |

Kindly made Cheque of **\$10,400.40** payable to **SAT Motors** within the next **14 days**.

Regards,



A handwritten signature in blue ink, appearing to be 'Jem'.

SAT MOTORS
24 Defu Lane 12
Singapore 539131
Singapore

AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16

Singapore

Tax Invoice INV/2019/1310

Invoice Date: 19/08/2019 **Due Date:** 19/08/2019 **Source:** SO16159 **Vehicle:** Ferrari/F430/SLU430P

| Product | Description | Quantity | Unit Price | Taxes | Tax Excluded Price |
|-----------------|-------------|----------|------------|-------|--------------------|
| REPAIR COST | REPAIR COST | 1.000 | 9,000.00 | 7% SR | S\$ 9,000.00 |
| Subtotal | | | | | S\$ 9,000.00 |
| Taxes | | | | | S\$ 630.00 |
| Total | | | | | S\$ 9,630.00 |
| Paid | | | | | S\$ 0.00 |
| Balance | | | | | S\$ 9,630.00 |

Comment: REFERENCE NUMBER CC4/AIG19008549/GEA3

Sales Person: Phua Jun Ren Sean (sean@satmotors.com)

Driver: DEREK NG

Payment term: Immediate Payment



SAT MOTORS
24 Defu Lane 12
Singapore 539131
Singapore

AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16

Singapore

Tax Invoice INV/2019/1311

Invoice Date: 19/08/2019 **Due Date:** 19/08/2019 **Source:** SO16159 **Vehicle:** Ferrari/F430/SLU430P

| Product | Description | Quantity | Unit Price | Taxes | Tax Excluded Price |
|----------------|--|----------|------------|-------|--------------------|
| LOSS OF RENTAL | LOSS OF RENTAL 13 MAY 2019 TO 15 MAY 2019 VEHICLE NUMBER - SKR9895A MODEL - MERCEDES BENZ E200 | 3.000 | 200.00 | 7% SR | S\$ 600.00 |

| | |
|-----------------|------------|
| Subtotal | S\$ 600.00 |
| Taxes | S\$ 42.00 |
| Total | S\$ 642.00 |
| Paid | S\$ 0.00 |
| Balance | S\$ 642.00 |

Comment: REFERENCE NUMBER CC4/AIG19008549/GEA3

Sales Person: Phua Jun Ren Sean (sean@satmotors.com)

Driver: DEREK NG

Payment term: Immediate Payment



SAT MOTORS
24 Defu Lane 12
Singapore 539131
Singapore

AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16

Singapore

Tax Invoice INV/2019/1312

Invoice Date: 19/08/2019 **Due Date:** 19/08/2019 **Source:** SO16159 **Vehicle:** Ferrari/F430/SLU430P

| Product | Description | Quantity | Unit Price | Taxes | Tax Excluded Price |
|--------------------|---|----------|------------|-------|--------------------|
| TOWING (PAINTWORK) | TOWING FROM EAST COAST PARKWAY TO 24 DEFU LANE 12 | 1.000 | 120.00 | 7% SR | S\$ 120.00 |

| | |
|-----------------|------------|
| Subtotal | S\$ 120.00 |
| Taxes | S\$ 8.40 |
| Total | S\$ 128.40 |
| Paid | S\$ 0.00 |
| Balance | S\$ 128.40 |

Comment: REFERENCE NUMBER CC4/AIG19008549/GEA3

Sales Person: Phua Jun Ren Sean (sean@satmotors.com)

Driver: DEREK NG

Payment term: Immediate Payment



SAT MOTORS

24 Defu Lane 12, Singapore 539131

Tel : 6748 1141 Fax : 6749 1141

LETTER OF AUTHORITY & INDEMNITY

ACCIDENT ON 12 MAY 2014 ALONG / AT
EAST COAST PARKWAY INVOLVING VEHICLE NUMBERS
SLN 430P AND SJU 1485Z

I, DEREK NH NRIC No. S9171379I
of BLK 125 TAMMINES ST 11 # 12-486 S(521125)
owner of vehicle number SLN 430P ("my vehicle") hereby authorize SAT Motors (RCN No. 53164690D) ("my repairer") to commence with repairs to my vehicle and to proceed with a claim to recover against the third party driver and/or his employer/or the vehicle owner and/or the insurers concerned, the cost of repairs, loss of use and/or rental expenses (where applicable) sustained by me as a result of the above accident ("my claim").

I agree and understand that I should make full disclosure of all relevant facts and evidence and hereby undertake to render full assistance and cooperation to my repairer and/or any solicitor appointed to take conduct of my claim.

In consideration of you repairing my/our motor vehicle at my/our request, I/we hereby authorize you to demand, claim, settle and receive whatever amount settled/payable by the insurance company and/or third party or to commence legal proceedings, if necessary, in my name, for the cost of repairs and loss of use etc. and to you appointing any solicitors to act for me in respect of the said accident/claim and all and any amount claimed, received and/or settled shall belong absolutely to you. I/We also hereby authorized you to sign all discharge vouchers/indemnity forms/letter of instructions and all necessary papers in connection with the above claim in my/our absence.

I/we agree to assign the whole proceeds of my/our third party claims to you and my/our solicitors to be appointed by you on my/our behalf shall accept this as my/our irrevocable authorization to pay the amount compensated direct to you after the deductions of their costs on solicitors & client basis. I/We undertake to co-operate fully with you and my/our solicitors appointed as on my behalf without claiming my/our expenses or time losses or incidental charges etc. to see the claim to a successful conclusion.

In the event the payment of the settlement sum is made in my favor. I shall attend your workshop and give you a replacement cheque or cash (less the deposit, if any) within 14 days of being notified by you. If I fail to do the above, I shall be liable to you for the sum of the repairs, legal costs and other costs/expenses incurred by you. I/we undertake to ensure that my/our cheque shall be honored upon presentation by you. In the event that my/our is dishonored, for whatever reasons, you may proceed to lodge a police report against me for this criminal act and may proceed to sue me/us for this breach.



I/we undertake to inform you and our solicitors appointed by you on my behalf in the event the 3rd party insurance company communicate with me/us directly orally or in writing and I/we further undertake not to accept any monies or offer settlement from the 3rd party insurance without first communicating with you and obtaining your consent.

In the event of any of the aforesaid breach, I/We shall have the totally no deface to your action/claim against me/us and I/we will have to bear your legal costs incurred on an indemnity basis for any legal action may arise against me/us including your damages, expenses and other incidentals charges.

I/we hereby also confirm that I was involved in the said above mention accident and that it was not a false accident or a staged accident and I/We are fully aware and advised that if the above accident was proven to the false or a fraudulent accident, I/We would be liable to pay for all your damages, expenses and other incidentals charges and I/we will have to bear your legal costs incurred on an indemnity basis for any legal actions that may arise against me/us with regards to the above accident.

I hereby understand and agree that in the event that my claim is unsuccessful for whatever reason, I will be held fully responsible and liable for the cost of the repairs payable to my repairer. I also understand that in such event, I will be also liable for the incidental costs and expenses, such as survey fees, search fees, filing fees, etc., which may have incurred as the case may be. I understand and accept that in the event m repairer is compelled to enforce this agreement due to a default on my part, I am liable to pay the legal costs incurred by my repairer on a full indemnity solicitor-and-client basis to the fullest extent permitted by law.

I confirm that I understand the above and have entered voluntarily into this agreement without any inducement, threat and/or promise. I acknowledge and accept that a settlement of my claim may result in my motor insurance No Claim Discount being affected at the discretion of my motor insurers.

| | | | |
|-------------|--|-------------------|--|
| Signature | : <u></u> | Witness Signature | : <u></u> |
| Name | : <u>DEREK NG</u> | Name | : <u>JESSIE ONG</u> |
| NRIC No. | : <u>S9171379E</u> | NRIC No. | : <u>S8704225H</u> |
| Address | : <u>BLK 125 TAMPINES ST 11</u> <u>#12-486 S(521125)</u> | Address | : <u>24 DEPU LANE 12</u> <u>S(539131)</u> |
| Contact No. | : <u>97353954</u> | Contact No. | : <u>9859 9677</u> |