FAX: 64697472

Letter Of Claim For Uninsured Loss INSIA INTL. Insurance Company: Address Attention : Claims Department - Motor Claims Manager Dear Sir/Madam, Subject: Accident involving vehicle number GBH 9262 K & UK 2971 E at JEMS (SURCUS GOTELOGY) LOODING BAY ON 2500 MON 2011. I am the owner of Vehicle Number GBH9363K which was involved with the accident as mentioned above. As the accident was solely caused by your insured vehicle, bearing registration number N 24 HE , I hereby submit my claim against your company for the uninsured loss which are as follows: Excess payment for OD claim Loss of usage (SS/day) for 2 days \$100 Car rental as per invoice attached Search fee 2.00 Cost of report Others 1298.40 Total claim amount 1500.40 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 \$ 1500.40 , 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 (Owner of motor vehicle) Name Address Telephone

TANCHONG

LETTER OF AUTHORITY AND INDEMNITY

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
- D 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 R	REGISTRATION No. C	1849262 K	A		JAME		
\$106.5.8C NO	AT Jem	a Turay	gatevay	Consty	Bay	*	-
1. I, the owner of vehicle or	GOHOLL HE	shy instruct you and	authorise you to ac	t for me with re-	spart to the f	allowing	

- the owner of vehicle no UKH POOK hereby instruct you and authorise you to act for me with respect to the following:-
- (a) To submit my claims for all loses 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.
- 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.
- 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 falls, 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.
- 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.
- 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 monles 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.
 - 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 Nevin		Company Name		
Address 92 BENDEMERE EDAD		Claim officiable of the Chair official	LID.	
5 (337941)	913 BUKIT TIMAT TOXE		
Telephone No 9179 1239 ,		Telephone NgL : 6466 7711 FAX : 6469 7472		
Date	Englit LUS	Date		
Company Stamp [For Co Regn Vehicle]	Authorized Senature	Claim Officer Standard		



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0070886-X 64 | Cecli Street | #04 | #05 | #06-02 | JOB Building | Singapore 049711.

(loss of

Office (65) 63476100 Email insure@ii.com.ag Fax (65) 62244174 Website sweetil.com.ag

LKK Auto Consultants Pte Ltd

(repair cost), S\$ 120.00

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

We/I. TAN CHONG MOTOR SALES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement

India Ref: MCV2019D0000551 Claimant Ref: GBH 9262K

with the appointed Surveyor of India International Insurance Pte Ltd _____
of Surveyor) with respect to the amount claimed for S\$ 1,298,40

	Y (location) involving vehicle no. YK 2971E (insured
vehicle). This is pursuant to the inspection conducted on19/07/201	9_(date) at "the workshop".
We/I confirm that we/I are/am authorized by the owner claimant") of vehicle no.GBH 9262Kto make the claim as set out the matter on his/her behalf in a manner that we/I deem fit. We party claimant".	in the above paragraph and we/l have full authority to settle
We/I further confirm that we/I will indemnify India International I they will or have already incurred in the event that "the third further claim against the former for any loss and expenses suf-	party claimant" after the above said agreement lodges a
of use pursuant to the damage to GBH 9262K (vehicle no.) as a	IN 가는 1.1 이번 1.1 전에 가는 사람들이 되었다면 되었다. 그 보고 있는 것이 되었다면 보고 있다면 보고 있다면 보고 있다.
We'll confirm that the agreement reached above is in full and pursuant to the accident and that further this settlement is reach basis.	
This agreement is subject to the application of Singapore law and dispute arising out of the same.	d the Singapore Courts have exclusive jurisdiction over any
We/l authorize you to pay the total amount of S\$ 1,420.40	TAN CHONG MOTOR SALES PTE LTD
Dated this day of 196 20	
CLAIMANT:	WITNESS: Signature: Signature: Signied by appointed Surveyor
Signed by "the workshop" (with chop)	IVVIIIS
Signed by "the workshop" (with chop) Name: TAN CHONG MOTOR SALES PTE LTD	Signature: Signed by appointed Surveyor Name: LKK Auto Consultants Pte Ltd NRIC: 199607198R
CLAIMANT: Signed by "the workshop" (with chop) Name: NRIC: TAN CHONG MOTOR SALES PTE LTD	Signature: Signed by appointed Surveyor Name: LKK Auto Consultants Pte Ltd
NAME: TAN CHONG MOTOR SALES PTE LTD 913 BUKIT TIMAH FIDAD SINGAPORE 589823	Signature: Signed by appointed Surveyor Name: LKK Auto Consultants Pte Ltd NRIC: 199607198R Address: 51 Ubi Avenue 1



Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chung Motor Centre Singapore 589622 SERVICE CENTRES

913, BUKIT TIMAH ROAD, SINGAPORE 589623, TEL: 64694091/92 17 LORONG # TOA PAYON SINGAPORE 319254, TEL: 63570753/4/5

GST Regn No: 19-9106231-D Co. Regn No : 199106231D

GST REG: 19-9106231-D

INVOICE NO W12141259 INVOICE DATE

NAME INDIA INT'L INSURANCE PTE LTD 17-SEP-2019 TERMS CREDIT **ADDRESS** DATE REC'D 64 CECIL STREET 07-AUG-2019 #04-05 IOB BUILDING S(049711) SA/SE LAW TELEPHONE JOB NO 63476100 BG1068631 MODEL MVL2RDKE26KW3JBT-D MILEAGE 010841 ENGINE NO YOUR REFERENCE : YD25038191B INS/IC/LAW/0289/: CHASSIS NO : JN1MC2E26Z0030682 VEHICLE NO

EMS	GBH9262K JOB DESCRIPTION	AMOUNT
	LABOUR RENEW REAR WINDSCREEN GLASS ASSY.	150.00
1	RENEW WIPER MOTOR, ARM AND COVER	120.00
2	RENEW WIPER MOTOR, ARM AND COVER	48.00
3	CHECK LIGHTING 3RD BRAKE SUBTOTAL :	318.00
	PARTS	46.90
1	GASKET 3RD BRAKE LIGHT	
	Qty:1 @ \$46.90 each (Special Nett Item)	12.40
2	COTTON ADM DACE	
~	Qty:1 @ \$12.40 each (Special Nett Item)	669.6
3	GLASS-TAIL GATE	005.0
3	GLASS-TAIL GATE Qty:1 @ \$837.00 each (Disc:20.00% After Disc:\$669.60each)	38.40
4		30.4
**	COVER-BACK WIPER Qty:1 @ \$48.00 each (Disc:20.00% After Disc:\$38.40each)	48.1
-		40.1
0	RUBBER-DUM Qty:1 @ \$60.20 each (Disc:20.00% After Disc:\$48.16each)	00 0
-	QLY:1 W \$00.20 GACH (DISTINCTION OF AN ANT	80.0
6	REAR W/SCREEN SEALANT Qty:1 @ \$80.00 each (Special Nett Item)	280-2012
	Qty:1 @ \$80.00 Bach (Special Mountain)	895.4
	REMARKS	

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.



Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Mutur Centre: Singapore 589622 SERVICE CENTRES

913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92 17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753445

GST Regn No: 19-9106231-D Co. Regn No : 199106231D

TAX GST REG: 19-9106231-D

INVOICE NO W12141259 INDIA INT'L INSURANCE PTE LTD INVOICE DATE NAME 17-SEP-2019 TERMS CREDIT DATE REC'D **ADDRESS** 07-AUG-2019 64 CECIL STREET #04-05 IOB BUILDING S(049711) SAVSE LAW TELEPHONE JOB NO BG1068631 63476100 MILEAGE MODEL MVL2RDKE26KW3JBT-D 010841 YOUR REFERENCE **FNGINE NO** INS/IC/LAW/0289/ YD25038191B CHASSIS NO JN1MC2E26Z0030682 VEHICLE NO

HICLE NO	GBH9262K JOB DESCRIPTION	AMOUN
YEMS		
1	AIG CLAIM INDIA INSURANCE	
	DOA: 23.05.2019	
2	TOC: DIRECT SETTLEMENT	
	OUR REF: INS/IC/LAW/0289/2019 SATISFACTION NOTE ATTACHED	
3	T/P VEHICLE YK2971E	
	T/P VEHICLE YK2971E AUTHORISE BY: CECILIA CHONG (LKK) ON 05.07.2019 @	
4	1100HRS 07 0010 @ 1100HRS	
5	1100HRS SURVEY BY: RASUL (LKK) ON 19.07.2019 @ 1100HRS	
6	RECOMMEND 2 DATS REPAIR REPAIR FROM 13.08.2019 - 15.08.2019	
	Insurance Co : INDIA INT'L INSURANCE PTE LTD	
	Claim Type : DIRECT SETTLEMENT / THIRD PART	
	DOA: 23-MAY-2019	
	Our Ref: INS/IC/LAW/0289/2019 Our Ref: INS/IC/LAW/0289/2019	
	Our Ref: INS/IC/LAW/0289/2019 Our Ref: M/S LKK ENGINEERING & MANAGEMENT SERVICES Surveyor: M/S LKK ENGINEERING & MANAGEMENT	

LABOUR 895.46 PARTS 1213.46 SUBTOTAL 1213.46 TOTAL 84.94 GST(7%) 1298.40 AMOUNT DUE

DOLLARS:

(NB : NC=No Charge; P=Included in Package; W=Warranty ONE THOUSAND TWO HUNDRED NINETY

EIGHT AND CENTS FORTY ONLY.

WORKSHOP MANAGER

oodwi

318.00

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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-19-087510

Date of Request:

03/06/2019

Your Ref No:

Online Purchase

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

Dear Sir/Madam.

Enquiry Date

03/06/2019

Enquiry By

Eric Koh Yong Lang

TP Vehicle No.

YK2971E

Accident Date

23/05/2019

Enguiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel, No.
YK2971E	India International Insurance Pte Ltd	31/01/2019-30/01/2020	63476100

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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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-19-087510

Date of Request:

03/06/2019

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date

03/06/2019

Enquiry By

Eric Koh Yong Lang

TP Vehicle No.

YK2971E

Accident Date

23/05/2019

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:

[X] GIRO [] Cash [] Cheque