

Main Office:

Movs Building No. 22, Jalan Kilang. Singapore 159419

Tel: (65) 6476 3333 Fax: (65) 6271 5891

Workshop Dept:

Block 1008, VIA EMAIL HO1-04/06/08/94

WITHOUT PREJUDICE gaspore 159722

Tel: (65) 6272 3892 Fax: (66) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

www.mova.com.sg

INDIA INT'L INSURANCE PTE LTD 64 Cecil Street #05-06 IOB Building Singapore 049711.

: SHA3763L

: 30 August 2019

Attn: Motor Claims Department

Dear Sir/Mdm

Our Ref

Your Ref

Date

ACCIDENT INVOLVING: SLA9241P & SHA3763L

: SLA9241P / T220819

DATE OF ACCIDENT: 02 AUGUST 2019

ALONG: MARINA BOULEVARD

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$ 4,226.50	
Loss of Use (\$ 120.00 x 15 days)	\$ 1,800.00	
Loss of Rental (\$ _x _days) + 7% GST	\$	
Surveyor Fees	\$	
Taxi Fees / E-License / Others	\$	
LTA /GIA SEARCH	\$ 7.49	
Medical Fees	\$	
Towing Fees	\$	
Grand Total	\$ 6,033.99	

Car date in: 02/08/2019 Car date out: 16/08/2019

Authorized Repair Days: 05 (TP/OD/WS/Recovery of Incidental Costs)

Please pay the amount of \$\$ 6,033.99 in favor of MOVA AUTOMOTIVE PTE LTD If you have any enquiries, please call Ms Suann @ 62723892 or email suann@mova.com.sg

Yours faithfully, MOVA AUTOMOTIVE PTE LTD For Claims Manager

NOTE: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

· This is a computer generated letter and does not need a signature.





Main Office: Mova Building, No. 22 Jalan Kilang, Singapore 159419. Tel: (65) 6476 3333 Fax: (65) 6271 5891 Website: www.mova.com.sg Workshop: Block 1008, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722. Tel: (65) 6272 3892 Fax: (65) 6270 8314

### POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.)	SLA 9241P		and (Third
Party's Vehicle No.)	n 2/1//4		along
Marine Balleyn, J			
BY THIS POWER OF ATTORNEY, *I/We,	Myoa Pulymotica	Du Lin	
BY THIS POWER OF ATTORNEY, TWE,	*NRIC/Passport No.	1919093336	(Address)*
2) Janes Krissy Place Building	# 27 - 21	/ STREETEL	( iddioco)
a comp	any incorporate in Singa	apore and having its red	gistered office at
(Address)*			Registered No.
	hereby irrevocably a	appoint MOVA AUTOMO	OTIVE PTE LTD,
(MOVA) a company incorporated in Singapore	and having its registe	red office at Block 10	08 Bukit Merah
Lane 3 #01-04/06/08 its agents or any person	authorized by MOVA	to be "my/our Attorney	and in *my/our
name(s) and on *my/our behalf to do all or any	of the following:		
which "I/we may have against the of "policy/policies taken up by such "Insurance Company) in respect of the expenses, etc suffered by "me/us arisin 2. For the purpose of such claim(s) as afore shall in MOVA absolute discretion, dee 3. To collect payment(s) due in respect of to be made by way of cheque in favor and discharge thereof.  4. For any of the purposes aforesaid, to expedition thereto.	*party/parties or altern taken up e cost of repairs, loss og from the Accident (los esaid, to appoint solicitor em fit. of any such claim(s) for of MOVA AUTOMOTIV	natively under Insurar p by *me/us (subject to of use/rental and all of s and damage). s on *my/our behalf as the loss and damage, E PTE LTD and to give	approval by my other costs and "my/our Attorney such payment e a valid receipt
<ol> <li>Generally do all such acts as it shall d</li> <li>To agree to any settlement at the abs</li> </ol>		The set of the second s	ch claim(s) and
*I/We hereby declare that all acts, instruments *my/our behalf by the Attorney, its agents or a valid and effectual to all intents and purposes wh in *my/our own proper person(s) and *I/we hereb executed by virtue of the authority and powers	any person authorized b atsoever as it is the same by ratify and confirm, all a	y MOVA in its behalf se had been done or exe	hall be as good cuted by * me/us
*I/We hereby further declare that the powers a	nd authority hereby co	onferred shall remain i	rrevocable.
*I/We further comfirm that the acceptance by M full discharge of my/our claim(s) in respect of si		mount in respect of suc	ch constitute the
*IN WITNESS WHEREOF. *I/We have hereunted of, Year Two Thousand		nd seal this day	of the month
Signed, Sealed & Delivered By			

Customer's Name: NRIC No:

Co's Rubber Stamp, where applicable.

Insurer's copy

\*delete as appropriate.



Occupation:

#### INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 1907037928 | GST Reg. No. 842-0070000-4, 641 | Cartil Street | #04 | #05 | #06-02 | 10B Building | Singapore 049711

Office (65) 62476100 Fax. (65) 62244174 Erroll Inscre@itcom.sg Website www.iii.com.sg

The acceptance of this offer is without prejudice to any personal injury claim/insure's claim/expenses.

### EXPRESS SETTLEMENT

# DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: TP / MCT 19080004 Claimant Ref : SLAS241P ("the workshop") hereby confirm that well have reached an agreement We/I, \_\_\_\_MOVA AUTOMOTIVE PTE LTD LKK Auto Consultants Pte Ltd with the appointed Surveyor of India International Insurance Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 4,226.50 (repair cost), S\$ 560.00 (loss of use/rentar), S\$ 7.49 (search fee), vehicle no. \$1,45241F that was damaged pursuant to the accident which occurred (location) involving vehicle no: SHA3763L (insured OR 02/08/2019 (date) at ALONG MARINA BOULEVARD vehicle). This is pursuant to the inspection conducted on \_ 07/09/2019 (date) at "the workshop". We/I confirm that we/I are/am authorized by the owner MOVA AUTOMOTIVE PTE LTD ("the third party claimant") of vehicle no. SLASSAIP to make the claim as set out in the above paragraph and we/l have full authority to settle the matter on his/her behalf in a manner that we/l deem fit. We/l enclose herein the letter of authority given by "the third party claimant". Well further confirm that well will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SLA9241P (vehicle no.) as a result of the accident. Weil confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability hasis. This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same. We/I authorize you to pay the total amount of S\$ 4.793.99 to MOVA AUTOMOTIVE PTE LTD LKK CLAIMANT: WITNESS: MRB Signature Signature: Signed by "the workshop" (with chop) Signed by appointed Surveyor LKK Auto Consultants Pte Ltd Name Name 199607198R NRIC: NRIC: MOVA ALTOMOTIVE PTE LTD Address: Address: 51 Ubi Avenue 1 BIR 1006 HUNG MERAH LANE #01-25 Paya Ubi Ind. Park S(408933) #01-04 (S) 159722 Tel: 62723892 Fax: 6270s Nationality: Nationality: GST Reg No : M2-008886+

Occupation:



## **Tax Invoice**

19/11/2019

Attention :- XA027

INDIA INT'L INSURANCE PTE LTD 64 CECIL STREET #04-06 **IOB BUILDING** SINGAPORE 049711

Page # :- 1

Veh# :- SLA9241P

Veh Model :- TOYOTA ALPHARD

:- CK631841 Tax#

Claim # ;- T220819

ACC. Date :- 02/08/19

:- C.O.D Days

Remarks :-

Terms

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No.	Description		Qty	U.Price	Amounts S\$
**********	SPECIAL NET ITEMS : COST OF REPAIR				3,950.00
	SPECIAL NET TOTAL S\$			-	3,950.00
_					
		E. & Q/E	NON-TAX AMO	UNT S	

AMOUNT S\$

3,950.00

GST @ 7 %

276.50

AMOUNT DUE S\$

4,226.50

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD



Chiu Nyet Fah has successfully logged out.

Your last login date and time was 02 Aug 2019, 13:24:00.

To return to ONE.MOTORING, please click here

For security reasons, please CLEAR YOUR CACHE after each session.

### Session Transaction History

			Asset Owner		Transaction Amount	
5/No	1 Asset Type	Asset ID	ID:	Transaction Type	(5\$)	Log Date/Time
1	Vehicle	SHA3763L	2	18.32 Insurance Enquiry	7.49	02 Aug 2019 /
				(GIRO Payment)		13:24:38

**Enquire Vehicle Insurance Details** 

Vehicle No. Incident Date/Time

Search Status Insurano

Insurance Company Code

Insurance Company Name

SHA3763L

02 Aug 2019 / 09:35:00

Successful

105

INDIA INT'L INS PTELTD

Previous

OK