

36 Toh Guan Road East #01-36 Enterprise Hub Singapore 608580

Email: AMA.CLAIM@GMAIL.COM (201735370W)

Our Ref: SLL3836E Date: 11/09/2019 WITHOUT PREJUDICE

ATTENTION: ATTENTION: MOTOR CLAIMS DEPT

India International Insurance 64 CECIL ST, #04-#05 IOB BUILDING, SINGAPORE 049711

CLAIMANT: CAR OWNER

ACCIDENT INVOLVING SLL3836E and SHD6723S ALONG GEYLANG LOR 19 TOWARDS GEYLANG ROAD ON 16/08/2019 @ 1810HRS.

We are instructed by Lim Sim Guan to claim damages against your insured in connection with a road accident on involving our client's motor registration number SLL3836E and motor vehicle registration number SHD6723S driven by you or your authorised driver at the material time.

We are instructed that your negligent driving and/ or management of your vehicle casued the accident. As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair after surveyor final estimate

\$ 3,200.00 2) Cost of Rental (Includes loss of PRS and loss of Sun & PHs) (8 days x \$120)

7.45

960.00

3) LTA Search Fee

TOTAL: \$ 4,167.45

A copy of each of the following supporting documents is enclosed:

- 1) LOD
- 2) Repairer's Invoice
- 3) LTA Search Invoice
- 4) Rental Invoice
- 5) Letter of Authorization
- 6) Discharge Voucher
- 7) Rental Agreement

Please note that if you are insured and wish to claim under your insurance policy, you should immediately pass this letter to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particular: of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

For any further enquiry, kindly contact us via email to AMA.CLAIM@GMAIL.COM.SG or call Alvin Wee at 8778 3636 directly.

Yours Faith

AMA AUTOCARE PTE LTD

Claims Director



AMA AUTOCARE PTE LTD

36 Toh Guan Road East #01-36 Enterprise Hub Singapore 608580 Email :AMACARE.CLAIM@GMAIL.COM (201735370W)

BILLING DETAILS

NAME LIM SIM GUAN

VEHICLE NUMBER SLL3836E

MAKE & MODEL TOYOTA ALTIS

NRIC/FIN S1369378A

ADDRESS 41 JURONG EAST AVE 1 #16-03 SINGAPORE 609777

DRIVER LIM SIM GUAN

TEL 97721528

EMAIL

CASE NO AAC0452

INVOICE

Invoice No.: AUTO0146

Date: 11/09/2019

Terms: C.O.D

S/N	DATE	CODE	DESCRIPTION	AMOUNT (\$)

1

1001

Lump Sum Repair Cost: To supply and replace parts, labour charges for repair, panel beating, welding and respary painting.

\$3,200.00

2 LTA Search Fee \$7.45

TOTAL AMOUNT (\$)

\$3,207.45

REMARKS:

Cheque Payment should be crossed and issued in favour of

AMA AUTOCARE PTE LTD

No Receipt will be issued.

Thank you for your patronage.



NIE CHUN YAN



> Back to OneMotoring

Authority Land Transport

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

17 Aug 2019 / 13:39:17

Receipt Date/Time: 17 Aug 2019 / 13:39:17

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190817-000962

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHD6723S As at 16 Aug 2019/18:10:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - SHD6723S Enquiry Fee		7.00	0.49	7.49
20190817133810028618				
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	xxxxxxxxxxxxx1574	Credit Card: Visa/MasterCard		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

AMA RENTAL PTE LTD

36 Toh Guan Road East #01-36 Enterprise Hub Singapore 608580 Email : ama.carrental@gmail.com (201708966M)

NAME
CAR PLATE NO.
MAKE & MODEL
NRIC/FIN
ADDRESS
DRIVER
TEL
ATTENTION:
EMAIL:

NAME LIM SIM GUAN
SL13836E
TOYOTA ALTIS
TOYOTA ALTIS
S1369378A
ADDRESS
41 JURONG EAST AVE 1 #16-03 SINGAPORE 609777
LIM SIM GUAN
97721528
AMA AUTOCARE PTE LTD
EMAIL:
-

Invoice No.: AMA0433 Date: 24/08/2019

Terms: C.O.D

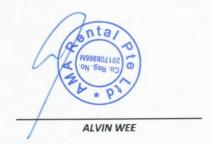
S/N	DESCRIPTION	NO. OF DAYS	PER DAY (\$)	AMOUNT \$ (SGD)
1	RENTAL OF TOYOTA VIOS	8	\$120.00	\$960.00
	Car Plate No.: SMF9071A Period of 17/08/2019 - 24/08/2019			
			Subtotal	\$960.00
		Aı	mount Paid (\$)	\$960.00
			Balance Due	\$0.00

Cheque Payment should be crossed and issued in favour of

AMA RENTAL PTE LTD

No Receipt will be issued.

Thank you for your patronage.



LETTER OF AUTHORISATION

To: M/S AMA AUTOCARE PTE. LTD.

										VEHICLE NOS:
82L3836E	_&_	SHD	672	35	ALONG	GEYL	TNG	LOR	19	TONARDS
GEYLANG	ROP	0								

I/We, Lim Sim Guard NRIC/Passport No: S1369378A, owner of vehicle no. SLL38365 hereby authorize you to commence repair to the said vehicle forthwith.

- 1. I/We hereby irrevocably authorize you to demand claims settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident claims and all an any amount claimed, received and/or settled shall belong absolutely to you. 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 deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claims to as successful conclusion.
- I/We also irrevocably authorize you to sign all discharge vouchers/indemnity forms and all
 necessary papers in connection with the above claims in my/our absence. I/We irrevocable
 authorize you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the
 purpose of the third party/own insurer's claim.
- 3. I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally and in writing and I/We further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.
- 4. My vehicle is repaired by the repairer on my own will without any inducement, threat or promise.
- Upon settlement of the third party claims and in case the settlement monies was sent to me/us by
 the third party's insurers, I/We undertake to pay you and my/our Solicitor the cost of repairs settled
 and related expenses and disbursement incurred.

Owner's Signature (Company's Stamp If applicable) Witness Signature/Name

Jenny Ng

Jenny 4/9

AMA AUTOCARE PTE. LTD.

(VEHICLE CLAIMS DISCHARGE VOUCHER)

INSURED: LM SIM GUAN
NRIC NO:
VEHICLE NO: SUL 3836E
ACCIDENT CLAIMS NO:
POLICY NO:
I confirm that all repairs necessary as a result of an accident in which the said vehicle was involved on or about the
DATE/TIME: 24 22 2 pm
SIGNATURE OF INSURED
(PLEASE SIGN AND RETURN)



AMA RENTAL PTE LTD

36 Toh Guan Road East #01-36 Enterprise Hub Singapore 608580 Tel: 8778 3636 Email: ama.carrental@gmail.com (ROC NO:201708966M)

			LEASING AC	REEMENT						
Mr/Ms. LIM	SIM GUAN			("HIRER") of	NRIC/FIN	5136937				
With Registered Add	dress HI Jul	SINGAPORE 609777								
Contact Number The Agreed leasing of	977215 date is from 17	/ &	2.112	0 24 / 8		2019 Weeks / Months				
Vehicle Inspection a						Vehicle No.	SMF 9071A			
	-			W						
()				Make & Model TOYOTA UIOS 1.5 E				
	De of		2			VEHICLE COLLECTION				
90	7			VI		Mileage				
1 10	11 1]	1	M		Date	17 /8 / 2019			
						Time	11 / 10 (AM)PM			
26					ط	Fuel Level:	1/2			
(1/in	E KIN F.			
							SIGNATURE / HIRER			
ADDITIONAL DRIVER	R/NAME						VEHICLE RETURNED			
NRIC/FIN						Mileage	KM			
NATIONALITY						Date	24/8/2019			
CONTACT NUMBER						Time	2 100 (AM/PN			
SECURITY DEPOSIT	S\$	DATE RECEIVED:	/	/			. 0			
TOTAL RENTAL COS	T S\$						7~			
DEPOSIT	s\$			SIGNATURE / HIRER						
TOTAL RECEIVED	S\$		RECEIVED BY:			REMARKS:				
DEPOSIT REFUNDED S\$ BY: RECEIVED BY (I				er):						

HIRER TO PROVIDE ORIGINAL NRIC/FIN AND DRIVER LICENSE INCLUDING THAT OF ADDITIONAL DRIVER FOR PHOTOCOPYING AS PROOF.

IN THE EVENT OF HIT-AND-RUN /ILLEGAL SUB-LETTING/FAILURE TO RETURN OF HIRER VEHICLE PER THIS AGREEMENT. A MANDATORY PENTALTY OF (MINIMUM) \$\$5000 WILL BE IMPOSED ON THE HIRER.

Comprehensive Sect I payable for Own Damage.

Comprehensive Sect II payable for Third Party Claims that are settled.

Third Party Excess \$1500 applies for all third party claims that are settled; Windscreen not covered.

\$2000 Sect I Excess and \$1500 Sect II Excess is applicable for driver who is 22 years old (older) and with minimum 2 years driving experience. \$4000 Sect I Excess and \$3000 Sect II Excess is applicable for drivers who is 21 years old or with minimum 1 year driving experience.

The policy does not cover drivers who is 21 years old or less than 1 year experience.

A charge of \$200 is applicable if the DECAL is damaged or removed from the said vehicle mentioned above during the rental period.

You are responsible for all fines, penalties and tolls levied against the Vehicle during the Rental Period.

All payments to be made payable to: POSB Savings 331-03845-8 or Paynow to 9488 8238 / (SCAN the QR Code)

IUO SIGNED FOR AND ON BEHALF OF AMA Rental Pte Ltd

By signing this agreement the hirer confirms had read the Terms and Conditions for leasing and of giving his/her unconditional approval to the Terms and Conditions for leasing stated on this and the back of this page.

DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of India International Insurance. Payment will be credited directly (Name of Paying Organisation) Into the Supplier's bank account stated below through Interbank Giro. The Supplier has to complete Part I of the form,
obtain his banker's certification in Part II and return the duly completed form to ndia International Insurance (Name of Paying Organisation)
Part I (To Be Completed By Supplier)
(A) To: India International Insurance (Name of Paying Organisation)
Supplier's Particulars:
Name : AMA AUTOCARE PTE LTO
Address: 36, TOH GUAN ROAD EAST, # 61-36 ENTEXPRISE HAR 8608
Telephone Number: 87783636 Fax Number:
Name of Bank :: OCBC Name of Branch: OCBC NORTH BRANCH
Account Number To Be Credited: 712 500446001
I/We hereby authorise India International Insurance to credit payments due to me/us to the above account. (Name of Paying Organisation)
This authorisation shall continue to be in force until I/we have expressly revoked it by notice in writed delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivere my/our address last known to you.
In the event of a change of bank account, I/we shall inform you in writing 2 weeks in advance before change.
(B) To:
(Name of Supplier's Bank)
I/We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in document.
White
Signatures and Company's stamp As In Bank Account Date
Part II (To Be Completed By Supplier's Bank)
To: India International Insurance (Name of Paying Organisation)
Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/or particulars agree with that in our files. The account number to be presented in the Interbank Giro format is follows: Bank Branch Account Number
Name & Signature of Authorised Bank Officer Date



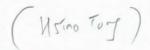
India Ref: TP / MCT19080386

Occupation:

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Fax (65) 62244174 Email insure@iii.com.sg Website www.iii.com.sg



EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

Claimant Ref : SLL3836E We/I. AMA AUTOMOTIVE PTE, LTD. ("the workshop") hereby confirm that we/I have reached an agreement LKK Auto Consultants Pte Ltd with the appointed Surveyor of India International Insurance Pte Ltd of Surveyor) with respect to the amount claimed for S\$ 3,200.00 800.00 __ (repair cost), S\$ rental), S\$ 7.45 (search fee), vehicle no. SLL3836E that was damaged pursuant to the accident which occurred on 16/08/2019 (date) at GEYLANG LOR 19 TOWARDS GEYLANG ROAD (location) involving vehicle no. SHD6723S (insured vehicle). This is pursuant to the inspection conducted on 20/08/2019 (date) at "the workshop". LIM SIM GUAN We/I confirm that we/I are/am authorized by the owner _ ("the third party claimant") of vehicle no. SLL3836E 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/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant". We/I further confirm that we/I 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 SLL3836E (vehicle no.) as a result of the accident. We/I 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 basis. 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\$ 4,007.45 to AMA AUTOCARE PTE LTD Dated this day of CLAIMANT: WITNESS: MRB Signature Signature: Signed by appointed Surveyor op" (with chop) LKK Auto Consultants Pte Ltd Name: Name: 201735370W 199607198R NRIC: NRIC: 36, TOH GUAN RD BALT, 51 Ubi Avenue 1 Address: Address: #01-36 ENTERPRISE HUB #01-25 Paya Ubi Ind. Park S(408933) 5608580 Nationality: Nationality:

Occupation: