5/21/2020 Merimen e-Claims

Print Received Message

This mail is associated with:

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 13/05/2020 09:53 AM.

To LKK HQ

Subject Alert - Adj Mandate Approved (S\$14452.45) - SKG4842T - Claim Handler: Zuhaidah Bte Samsuri

Approved:14452.45:Please negotiate LOR max \$160 p/d (Toyota Wish) x 10D + GST = \$1,712



India Ref: MCT19090293

Occupation:

WITHOUT PREJUDICE to:

(a) Insurers' Subrogated Ckrim and/or (b) Any Personal Injury Claims [Note: This Notice supersades any Inconsistencies found in this Discharge Voucher]

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

EXPRESS SETTLEMENT

DISCHARGE VOUCHER
III-Direct Settlement (PODS)

Claimant Ref: SKG4842T MBM Wheelpower Pte Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$14,000.00 (global sum) (repair coet) vehicle no. SKG4842T that was damaged pursuant to the accident which occurred on 13/09/2019 (date) at _ ECP TWDS CITY AFT EXIT 7B _ (location) involving vehicle no. SHC1151E (insured vehicle). This is pursuant to the inspection conducted on __18/09/2019 __ (date) at "the workshop". **ANISH JAIN** We/I confirm that we/I are/am authorized by the owner ("the third party claimant") of vehicle no. SKG4842T to make the claim as set out in the above paragraph and we/I 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". 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 SKG4842T (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\$ 14,000.00 to MBM Wheelpower Pte Ltd Dated this .21 day of ... May ..20 20 CLAIMANT: WITNESS: Signature: Signature: Signed by appointed Surveyor Signed by the workshop" (with chop) Ivy Lwi Name: Name: LKK AUTO CONSULTANTS PTE LTD 2369T NRIC: NRIC: 199607198R 160 Sin Ming Drive Address: Address: 51 UBI AVE 1, PAYA UBI INDUSTRIAL PARK #06-02 Singapore 575722 #02-25 SINGAPORE 408933 Nationality: Nationality:

Occupation:



Your ref : SHC1151E Our ref : SKG4842T

11 April 2020

India International Insurance Pte Ltd

64 Cecil Street #04-02, IOB Building Singapore 04911

TEL: 6347 6100

Attn: Motor Claims Dept

WITHOUT PREJUDICE

Dear Sir / Mdm,

Accident involving SKG4842T and SHC1151E Along ECP Going Towards City After Exit 7B on 13/09/2019 at 0930hrs

We refer to the above said accident.

Our investigation reveals that you are the insurers of the vehicle SHC1151E at the material time of the accident and that the said accident was caused solely by the negligence of the driver insured by your company. We hereby propose a direct settlement for our client's claim.

We enclosed herewith copy of

- 1 Final Repair Invoice
- 2 Authorisation Letter
- 3 Car Rental Invoice
- 4 LTA Search Fee
- 5 Towing Fee

We are instructed to claim the following

1	Costs of Repair - Lump Sum (11,800.00 + 7% gst)	\$ 12,626.00
2	Loss of rental (\$192.60 x 12 days)	\$ 2,311.20
3	LTA Search Fee	\$ 7.45
4	Towing Fee	\$ 107.00

Grand Total: \$ 15,051.65

Please kindly let us know whether you are prepared to settle our client's claim.

Thanks & Warmest Regards,

Ivy Lwi 1 HP: 8588 3198

ivy.lwi@mbmwheelpower.com.sg

MBM Wheelpower Pte Ltd

160 Sin Ming Drive #06-02 Sin Ming Autocity Singapore 575722

Customer Service Hotline 6262 8888

www.mbmwheelpower.com.sg Company Registration Number: 200204110W

GST Registration Number: M90368446L



To:

India International Insurance Pte Ltd

64 Cecil Street

#04-02, IOB Building Singapore 049711

TEL: 6347 6100

Attn:

1

Motor Claims Dept

Tax Invoice:

64149

11-4-2020

Vehicle No.:

Date:

SKG4842T

Make / Model:

BMW F13 640i

Chassis No.:

WBALW32050C799084

Engine No.:

14517975N55B30A

Year of Make:

2011

Accident Date:

13-09-19

S/N DESCRIPTION

COSTS OF REPAIR - LUMP SUM

Amount S\$

\$

11,800.00

Total: \$

11,800.00

7% GST: \$

826.00

Amount Due S\$ \$

12,626.00

For & on behalf MBM WHEELPOWER PTE LTD

Prepared by: Ivy Lwi

MBM Wheelpower Pte Ltd

160 Sin Ming Drive #06-02 Sin Ming Autocity Singapore 575722

Customer Service Hotline 6262 8888

www.mbmwheelpower.com.sg

Company Registration Number: 200204110W GST Registration Number: M90368446L

Letter of Authorisation

Date	:	_13/9/2	2019			
То	:	MBM \	WHEELPOWER PTE LTD			
		160 Si	n Ming Drive #06-02 Sin Ming Auto	ocity Singapore 575722		
FROM		•	ANISH JAIN	(Name of Owner & Policyholder		
CLAIM VE	HICLE No	:	SKG4842T			
CIDEN	T DATE	:	13/9/2019	0		
LOCATIO	N	:	ECP towards city			
OTHER VI	EHICLE	:	SHC1151E			
a.	Proceed with (the vehicle);	the repa	M WHEELPOWER PTE LTD to :- ir (the repair) to the above acciden	t (the accident) damaged vehicle		
;	Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or resolved (Claim against own Insurer)					
i	Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or third party insurer in question until the claim is wholly completed, settled and / or resolved. (Claim against Third Party)					
I confirm that MBM's authorisation shall include without limitation paying for all the relevant reports / documents, corresponding and negotiating with the insurer / third party and any other relevant parties, correspondance of any nature with solicitors, appointing solicitors to act in connection with the claim and, any or all such other tasks concerning the settlement, resolution and / or completion of the claim.						

Where authorising party is not vehicle owner and policyholder

EXCEPT:-

- a. Such as matters or task that the insurer / third party and / or the law requires me to personally attend to; and
- b. The submission of the claim to the insurer (Where applicable)
- I understand if I submit a claim of whatever nature to my own insurer [FOURTEEN DAYS (14 days)] after the accident (or such other time stipulated by my own insurer and / or the law), such claim will not or may not be accepted by my own insurer.
- 4 I further confirm and accept that :
 - a. To the extent permitted by laws :-
 - i) I will indemnify and keep MBM indemnify in connection with or arising from the claim; and
 - ii) That not with outstanding the agreement or otherwise, under no circumstance will I (jointly or severally) in any manner hold MBM liable for losses / damages of whatever nature arising or in connection withthe claim.
 - b. MBM does not guarantee and never represent that the insurer / third party will fully indemnify me for the damage and / or the repair's cost and, that I shall be and continue to be liable to MBM for the whole of the repair's cost.
- As the extend to which the insurer / third party will indemnify me or be liable is not conclusive, I agree to place a deposit of \$_____ (excluding Gst) for the repair's cost.
- I agree and accept MBM deposit refund policy, If the final successful percentage of indemnification / contribution / laibility from or of the insurer / third party in respect of the repair's cost to me ;
 - a. 50% and below NO REFUND
 - b. 100% FULL REFUND

- I shall inform and forward to MBM all correspondence and letters received by me from the insurer / third party, any other insurer, solicitors governmental authorities and / or, any other relevant party.
- I shall fully co-operate with and act expeditiously on any requests by MBM, particularly the signing / endorsement / execution of any "Discharge Voucher", failling which I shall be liable to MBM for the full repair costs and the expenses incurred (directly or indirectly) by MBM in connection with the claim.
- In any case if the claim is repudiated by the insurer of the third party, I shall be liable to MBM for the full repair costs and the expenses incurred (directly or indirectly) by MBM in connection with the claim.
- 10 I shall not :
 - a. respond to correspondence and letter; and
 - b. negotiate agree or accept any other from the insurer / third party or any other relevant party; without consultation of and expressed approval from MBM WHEELPOWER PTE. LTD.
- In consideration hereof (including without limitation MBM's agreeing to repair the vehicle and defer demanding payment of the repair's cost), I wholly assign to MBM WHEELPOWER PTE. LTD. All proceeds of the claim for:
 - a. the repair's costs and
 - b. damage, compensation, interest, cost (including party-to-party legal costs on a full indemnity basis and expenses in connection with the accident, repair and / or claim; which MBM shall be further entitled to apportion in its absolute discretion with any excess being paid by MBM to me as it deems fit in its absolute discretion.
- I further confirm that payment to MBM or to any person (which shall include a body corporate) authorised by you to receive payment in lieu shall constitute a good effective discharge of the payment obligations by any party of the aforesaid proceeds of my claim and that I shall not be authorised in law to receive payment.

13 I understand and agree that MBM will not be liable if:

a. the delay of receiving parts is caused by suppliers

b. the Loss of Use/Loss of income claim amount provided by the insurer of the third party is lower than desired and that MBM will not top up to the expected amount.

14 MBM has the right not to disclose any correspondences to the cilent.

Owner & Policyholder's Signature / Company Stamp (if appicable); or Authorising party's Signature / Company Stamp (if appicable)

Name: ANISH JAIN

NRIC: G5096439L

Address

Name

NRIC

Withness's Signature

Gary Wong

3687A



INVOICE TO:

Name : Mr Anish Jain

Add : 3 Central Boulevard

#51-03 Marina Bay Suites Singapore 018965

Tax Inv:

40139

Invoice Date:

30/09/2019

Vehicle No:

EK6188K

Make/Model: Toyota Wish 1.8

Reference No: SKG4842T

S/N Qty		Description	Unit	Unit Price		
1		CAR RENTAL FROM				
	12	13.09.2019 TO 25.09.2019	S\$	180.00	S\$	2,160.00

GST S\$ 151.20

Total S\$ 2,311.20

MBM WHEELPOWER PTE LTD



MBM Wheelpower Pte Ltd 160 Sin Ming Drive #06-02 Sin Ming Autocity Singapore 575722 Customer Service Hotline 6262 8888

www.mbmwheelpower.com.sg Company Registration Number: 200204110W

GST Registration Number: M90368446L



RENTAL AGREEMENT

NO. 00391

MBM Wheelpower Pte Lto:
176 Sin Ming Drive, #01-11/14/15/16 Sin Ming Autocare, Singapore 575721
Customer Service Hotline 6262 8888 Www.mbmwheelpower.com.sg Company Registration Number: 200204110W

		CHECK OUT / CHECK IN						
Vehicle No: E		Tayota Wish 1.8	DATE OUT:	12	09.2019			
Change Over 1:	Date:	Initial:		13.		TIME OUT:	1000an	
Change Over 2:	Date:	Initial:	PETROLLE	VEL OUT	F: E 1/8 1/	4 3/8 (1/2) 5	5/8 3/4 7/8	F
	CORPORAT	E HIRER	DATE IN:	25.	P10C . P0	TIME IN:	OYOOPIY	7
Co. Name:			PETROLLE	VER IN:	E 1/8 1/4	4 3/8 /1/2 5	/8 3/4 7/8	FI
Co. Address:			KM OUT	.117	ovo	KM IN 113	(01	
		KM DBIVEN	KM DRIVEN:					
			THE BRIVEY.					
Contact Person:		Tel:		CO	LLISION DA	MAGE WAI	VER	
	NAMED DE	IVER	ACCE	PTS CDW	/ EXCESS	DECLINE	S CDW EXCE	SS
Name: Arisl	n Jain		\$ 3,	500	per accident	\$	per ac	coldent
Address: 3 CS	n-lal Bulavara			D	25 34			
#51-	03 Maring Bo	y sulles s' 0180	SIGNATURE:	DE	503	SIGNATURE:		
					EXCESS	AMOUNT		
Office Tel:		ence Tel:	SINGAP	ORE	MALA		SIGNATUR	-
Occupation:	Hp:		\$3.9		\$3,		ARTICA	-
P.P/I.C. No: G 50			93			-	CAR S	
Date of Birth: Dr. Licence No:	. 10 . 198-0 Place	of Birth:			CHAR	GES		
Date of Issue:	Count		Months	@\$	p	er month		
		y of Issue:	Weeks	@\$	pe	er week		
A.W.	DDITIONAL NAME	D DRIVER	() Days	@\$	180 pe	er day		
Name: Address:			Hours	@\$	pe	r hour		
ludi ess.					SUB	-TOTAL (1)	y	
			Less Di	count:		%		
office Tel:	Residen	ce Tel:			RENTAL	CHARGES		
ecupation:	Нр:		CDW	@5		day/month		
P/I.C. No:	National	ty:	PAI	@s				
ate of Birth:	Place of	Birth:			per	hour		
. Licence No:			PETROLT	04-04				
te of Issue:	Country of	f Issue:	MISC					
marks:	, .							
tccident ca	se: Shojapure	use only						
Ref no: sk	6 1 2427							
	40461							
olce No:	Rec. No:				SUB-1	OTAL (2)		
rer will be liable for all con:	requences. For extension of rental	hire period and in case of any accident	GST @ 7%			7		
xpiry time and payment to i (one lifth) of the daily rate	r the extended rental will have to of rental for each hour exceeding	be made within 24 hours. Late charges the time for return of the Vehicle will be			<u>. </u>			-
ehicle not returned within	24 hours will be reported as stole	ore hours late in returning the vehicle.) The hours late in returning the vehicle.)			TOTAL C	HARCEC		
violations and missing iter	13.							
Information given on this t	ee to the terms and conditions ab orm are true and accurate, if I opt to ide on the applicable credit card vo	ove and as set overleaf and in declare o pay by credit card, my signature here rucher.	DOWNPAYMENTAN	ID DEPO	PRE-PAYMI	=1/1		-
ECKED OUT BY:	CHECKED IN BY:	CHECKED BY:	AMOUNT REFUNDE	D/DUE				
And the second district the second se								

MBM Wheelpower Pte Ltd
As Managers on Behalf of

Chatoo OWNER

HIRER SIGNATURE

COMPANY STAMP

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701 GST Registration No.: M4-0006529-2

Print Date/Time:

16 Sep 2019 / 12:32:40

7.45

0.00

Receipt Date/Time: 16 Sep 2019 / 12:32:40

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190916-001456

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 - SHC1151E As at 13 Sep 2019/09:30:00 Insurance Co: INDIA INT'L INS PTE LTD			(-+)	(54)
1 Insurance Enquiry - SHC1151E Enquiry Fee 20190916123142466003		7.00	0.49	7.49
	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			
de'in G 48427	xxxxxxxxxxx3574	Credit Card:		7.45
G 48427	Total	Visa/MasterCard		7.45
	Cash Change			
				0.00

THANK YOU AND HAVE A NICE DAY!

Excess Refundable Amount

Tendered Amount

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.



ISLAND RECOVERY SERVICES Blk 3026, Ubi Road 1 #04-146 Singapore 408719

GST Reg.No: M90370499P

Telephone: 6747 7400 Email: islandrecovery@ymail.com Facsimile: 6844 7233 Web: www.islandrecovery.com.sg Co. Reg. 53120055L

Cash Sales/ Work Orde

M/S: /////				
Vehicle No: SK (7 482	+2_TModel	. Bring.		
From: E(p	Time St	tart: 16.30A	421	M
To: Auto CHy # 06-00	Time E	11151	M	
Remarks:				
☐ Change Tyres /Jump Start	Accident	Use Car C	arrier	
Basement / Multi Carpark	☐ Crane Up / Winch Out	Open Doo	•	
Using King Dolley	☐ Dismantle Shaft / Brake	Loaded	AMOUNT S\$_	100.00
\mathcal{U}			GSTS\$_	7.00
(Na)	1'-6-	a gang	TOTAL S\$_	107.50
	bizsAI-	2	VP+8	117
Received By	Important No	ote:	Island Pass	10
Vehicle is transported at owner's	risk. The company accepts no re	esponsibility for a	lamaged or other mic	very Services

vehicle whilst being transported.