Registration number : 53228991M 23 Kaki Bukit Ave 4, #04-01 (South Wing) Singapore 415933 INVOICE

To: AIG Asia Pacific Insurance Pte. Ltd

78 SHENTON WAY

#07-16

SINGAPORE 079120

Vehicle No: SMH1104G

Chasis No: W0V7H9ED7J4033407

Engine No: 10XVA10804666

Invoice No: ACC-19015

Invoice Date: 14/10/2019

DESCRIPTION AMOUNT SGD

No. Description Price (SGD)

Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges

\$4,350.00

Grand Total: \$ 4,350.00

Yours Faithfully, TO So

Suhaimi

Service Executive

Tel: 9189 2617 Fax:6844 5185 Email: aceautosolution@gmail.com

E&OE

ALL CHEQUE PAYMENTS SHOULD BE CROSSED AND MADE PAYABLE TO "ACE AUTO SOLUTION". PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 19 Sep 2019 / 16:49:47

Receipt Date/Time: 19 Sep 2019 / 16:49:47

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190919-002412

Previous Receipt No. :

rievious receipt No				
S/N Item Description/ Business Transaction Reference		Amount Before	GST Amount	Amount After GST
No.		GST (S\$)	(S\$)	(S\$)
Result of Insurance Enquiry - SLT4973T				
As at 14 Sep 2019/16:45:00				
Insurance Co: AIG ASIA PACIFIC INSURAN	NCE PTE. LTD.			
1 Insurance Enquiry - SLT4973T				
Enquiry Fee		7.00	0.49	7.49
20190919164901724468				
	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			
	20190919164911852	Direct Debit: eNETS Debit (Internet Banking)		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.

Authorization To Act

I, Alpino (y Rental Pte Ltd	("the third party claimant") of
7 yb Close, Alpine Certie, 5' pac	408604
(address), owner of SMHIIOTC	(vehicle no.) hereby
authorize Ace Auto Shihm	
("the workshop") to act for me w	ith respect to my claim for repair
costs and/or rental and/or loss of	of use ("claim") for my vehicle
no. Shall of that was damage	ed pursuant to the accident which
occurred on 14/9/2019 (date)	along Favier Read (luse to
Parjer Garsen)	(location) involving
vehicle no/s SLT 49737	
("the accident").	

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this $\frac{20}{}$ day of $\frac{0^{\circ}}{}$ (month) $20 \frac{19}{}$ (year)

Signed by "the third party claimant"

Signed by "the workshop"

Letter of Authorisation & Indeminity

Accider	at Involving Vehicle no. SMH11046 and SLT 49737 On 14/9/2014
	uiler hous ((love to fuller (-4.200)
1.	Ace Ach Solution ("the workshop")
2	to commence repairs to the said vehicle. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$ being refundable deposit of the repair to my/our said vehicle.
2.	Your are further authorized to appoint solicitors on my/our behalf and give the solicitors ful instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including it necessary, to commence legal proceedings in court in my/our name against the third party.
3.	You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit.
4.	Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional costs and disbursement for acting for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account. If the event that my/our claim or legal costs of the third party as well as the professional costs and disbursements of my/our solicitors notwithstanding that my/our solicitors were appointed by you on our behalf.
5.	I/we also hereby instruct and authorise you deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
6.	In the event that I/we am/are required to attend at my/our solicitors office or to attend court in connection with my/our claim, I/we shall render full co-operation.
7.	In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party, I/we authorise you to revert the claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respect, I/we understand and accept that the excess amount applicable under policy of insurance shall be borne by me/us.
8.	If for whatever reasons, my/our insurers reject my/our 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/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
9.	I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.
	Dated this $\frac{20}{}$ day of $\frac{09}{}$ 20 19
Signatur	re of vehicle owner
Name -	Witnessed by:
IC No : (Compar	ny stamp, if applicable)
_	: 7 4h low Alpine
	15 pers 408604
	6511 3021

Letter of Demand

To: AIC Asia Pacific Journal Pte Lts.

Fuiler from (Close to Fuiler Cardas)

1) I/We, the owner of vehicle no. SMUIOTE hereby appoint Ace Auto Solution ("the workshop") to act for me/us to recover damages sustained in the above accident from the third party driver and/or insurers. Claims are as follows:

\$ 4350.00 Vehicle Repair cost / Excess Vehicle Rental Fee for _____ days @ \$____per day Loss of use/rental for ____ days @ \$ 400.00 $$ 1^{\infty}$ per day Loss of income for _____ days @ \$__ per day Rolice search fee/police report fee/LTA search fees Others

Total: \$ 4757.45

Signature of vehicle owner

Witnessed by:

Suhyini

Address: 7 44 (lor, Alpine Centre Spor 408604 Tel: 65/13021