

**FORZA AUTOHAUS PTE LTD**

COMPANY REG NO : 201833292C

39 Woodlands Close, #01-34/35, Mega @ Woodlands
Singapore 737856

+65-6278 1889

enquiry@forzaauto.sg

Our Ref : SGA 50S
Your Ref : SHB 4305P

16th Nov 2019

WITHOUT PREJUDICE

INDIA INTERNATIONAL INSURANCE PTE LTD

BY EMAIL @ motorclaim@iii.com.sg

64 Cecil Street

#04/06-00 IOB Buidling

Singapore 049711

Attention: Motor Claims Dept

Dear Sir/Mdm,

CLAIMANT: CHIA AH TOW

RE: ACCIDENT INVOLVING SGA 50S AND SHB 4305P ALONG YISHUN AVE 11 BLK 417 CARPARK ON 21/09/2019 AT ABOUT 1650 HOURS.

We refer to the above matter.

Please be informed that the quantum has been agreed between your surveyor Mr Steve and our Mr.Erik Chan.

Please find our claims as follows:-

1. Cost of Repair	\$	6,400.00
2. Loss of Use for 8 days @ \$120.00 per day	\$	960.00
3. LTA search fee	\$	7.45

TOTAL: \$ 7,367.45



FORZA AUTOHAUS PTE LTD

COMPANY REG NO : 201833292C

📍 39 Woodlands Close, #01-34/35, Mega @ Woodlands
Singapore 737856

☎ +65-6278 1889

✉ enquiry@forzaauto.sg

Pre-repair inspection arranged on 23rd Sep 2019 and was surveyed on 25th Sep 2019.

Additional of 2 days PRI and one weekend incurred. Total 3 days

A copy each of the following supporting documents is enclosed:

- (1) GIA Report
- (2) Final Repair Bill
- (3) LTA search
- (4) Vehicle Registration Card
- (5) Insurance Certificate
- (6) Letter of Authority & Payment Authorisation

Yours faithfully



Forza Autohaus Pte Ltd




FORZA AUTOHAUS PTE LTD

39 Woodlands Close #01-34/35, Mega @ Woodlands Singapore 737856
Tel: 6278 1889 Email: enquiry@forzaauto.sg
8 Kaki Bukit Avenue 4 #07-23 Premier @ Kaki Bukit Singapore 415875
Tel: 65 6881 1772 Fax: 65 8166 5437
Registration No.: 201833292C

Letter of Authority

Accident involving no. SGA 508 and SHB 4305P along
YISHUN AVE 11 3K 47 CARPARK on
21-Sep-2019 at about 1650HRS

1. I/ We, hereby appointed Forza AutoHaus Pte Ltd to be my agent and I/We authorised my said agent to give you all instructions pertaining to the conduct of my **Third-Party Claim** including instructions to commence legal proceedings in court in my name/our name against the respective insurer/owner/driver or company, if applicable.
2. ** My said agent has my authority to decide on my behalf whether to accept any offer of settlement from the respective insurer/owner/driver or company.
3. I understand and agreed that until I revoke my said agent's authority in writing to you, I am bounded by all instructions given by my said agent to you.
4. ** Upon settlement of the **Third-Party Claim** and in case the settlement monies were sent to me/us by the insurers/owner/company, I/We undertake to make payment to Forza AutoHaus Pte Ltd for the costs of repairs settled and related expenses and disbursement incurred.
4. The above-mentioned vehicle is to be repair at Forza AutoHaus Pte Ltd on my own will without any inducement, threat or promise.


Signature of Owner/Company
(Company's stamp if applicable)

Name:

RCB/NRIC/Passport No.:

Address:




FORZA AUTOHAUS PTE LTD

39 Woodlands Close #01-34/35, Mega @ Woodlands Singapore 737856
Tel: 6278 1889 Email: enquiry@forzaauto.sg
8 Kaki Bukit Avenue 4 #07-23 Premier @ Kaki Bukit Singapore 415875
Tel: 65 6881 1772 Fax: 65 8166 5437
Registration No.: 201833292C

Letter of Authority

Accident involving no. SGA 508 and SHB 4305P along
YISHUN AVE 11 BIK 47 CARPARK on
21-Sep-2019 at about 1600HRS.

1. I/ We, hereby appointed **Forza AutoHaus Pte Ltd** to be my agent and I/We authorised my said agent to give you all instructions pertaining to the conduct of my **Third-Party Claim** including instructions to commence legal proceedings in court in my name/our name against the respective insurer/owner/driver or company, if applicable.
2. ** My said agent has my authority to decide on my behalf whether to accept any offer of settlement from the respective insurer/owner/driver or company.
3. I understand and agreed that until I revoke my said agent's authority in writing to you, I am bounded by all instructions given by my said agent to you.
4. ** Upon settlement of the Third-Party Claim and in case the settlement monies were sent to me/us by the insurers/owner/company, I/We undertake to make payment to Forza AutoHaus Pte Ltd for the costs of repairs settled and related expenses and disbursement incurred.
4. The above-mentioned vehicle is to be repair at **Forza AutoHaus Pte Ltd** on my own will without any inducement, threat or promise.


Signature of Owner/Company
(Company's stamp if applicable)
Name: CHIA AH TOW MARY
RCB/NRIC/Passport No.:
Address:

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCT19090519
Claimant Ref: SGA 50S

We/I, FORZA AUTOHAUS 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\$ 6,400.00 (repair cost), S\$ 800.00 (loss of use/~~rental~~), S\$ 7.45 (search fee), vehicle no. SGA 50S that was damaged pursuant to the accident which occurred on 21/09/2019 (date) at YISHUN AVE 11 BLK 417 CARPARK (location) involving vehicle no. SHB 4305P (insured vehicle). This is pursuant to the inspection conducted on 25/09/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CHIA AH TOW MARY ("the third party claimant") of vehicle no. SGA 50S 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/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 SGA 50S (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\$ 7,207.45 to FORZA AUTOHAUS PTE LTD

Dated this 06 day of FEB 20 20

CLAIMANT:

Signature: [Signature]
Signed by "the workshop" (with chop)
Name: LEE CHIAO JIN
NRIC: S79155342
Address: Blk 186B Block North Dr
4 #01-22 SC 462156
Nationality: S'POKAI
Occupation: OPERATION MANAGER

WITNESS:

Signature: [Signature]
Signed by appointed Surveyor
Name: LKK Auto Consultants Pte Ltd
NRIC: 199607198R
Address: 51 Ubi Avenue 1
#01-25 Paya Ubi Ind. Park S(408933)
Nationality: _____
Occupation: _____

FORZA AUTOHAUS PTE LTD

39 Woodlands Close #01-34/35 Mega@Woodlands Singapore 737856
Tel No. : +65 6278 1889 Fax No. : E-Mail : enquiry@forzaauto.sg
Company Reg. No. : 201833292C

M/s India International Insurance Pte Ltd
Singapore

TAX INVOICE

Date : 18/11/2019
Date in : 24/09/2019
Vehicle Num. : SGA50S
Make/Model : PORSCHE C4SCOUPE TIP-2007
Chassis/Eng# : WPOZZZ99Z8S720361/68840515
Accident Date : 21/09/2019
Claim No : C100047
Reference :
Policy No. : SI18V13344/VPS/R10 (05/11/2019)

GLOBAL SUM
AS PER DIRECT SETTLEMENT
REF : DATED 18/11/2019
BY LKK Auto Consultants Pte Ltd

Amount \$
6,400.00

E. & O.E.	Sub \$:	6,400.00
	Add GST (0%) \$:	0.00
	Total Amount \$:	6,400.00



FORZA AUTOHAUS PTE LTD

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 23 Sep 2019 / 18:04:21

Receipt Date/Time : 23 Sep 2019 / 18:04:21

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190923-003237

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 - SHB4305P As at 21 Sep 2019/16:50:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SHB4305P Enquiry Fee 20190923180259242295	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			
	xxxxxxxxxxxx0663 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.

Print Receipt

OK

Save as PDF

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
India 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 : Forza Autohaus Pte Ltd
Address : 39 Woodlands Close, #01-34/35, Mega@Woodlands S(737856)
Telephone Number: 6278 1889 Fax Number: _____
Name of Bank : OCBC Name of Branch: _____
Account Number To Be Credited : 713-027977-001

I/We hereby authorise _____ 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 writing delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivered to 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 the change.

(B) To: OCBC Bank
(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 this document.


Signatures and Company's stamp As In Bank Account



6-2-2020
Date

Part II (To Be Completed By Supplier's Bank)

To: _____
(Name of Paying Organisation)

Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that in our files. The account number to be presented in the Interbank Giro format is as follows:

Bank	Branch	Account Number
<div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>

Name & Signature of Authorised Bank Officer

Date