

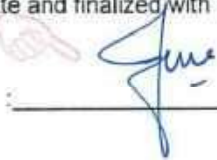
To: Complete VMS Pte Ltd  
176, Sin Ming Drive,  
#03-14, Sin Ming Autocare Complex  
Singapore 575721

**LETTER OF AUTHORIZATION**

RE: ACCIDENT BETWEEN PC2590U / SH7732H (Vehicle Numbers)  
ON 16/10/2019 1950 (Date of Accident) AT Penjuru Road

1. I/We, the owner of vehicle no. PC2590U hereby appoint you to act for me to repair and recover damages sustained to my vehicle in the above accident from the third party driver and / or his / her insurers.
2. In this respect, I/We have authorized you to repair, correspond, negotiate and settle on my behalf, all claims against the parties involved in the subject accident. All final financial awards in my favor pertaining to the subject accident claim are to be paid to Complete VMS Pte Ltd.
3. By way of this Letter of Authorization, I/We also further authorized you to sign all Discharge Vouchers and any other related documents in settlement of the subject accident claims. I/We hereby undertake to ratify and reaffirm such signing of Discharge Vouchers and/or documents from any third party insurers by us.
4. During the settlement process with the third party insurers / drivers, you may act fully on my behalf and all negotiations and correspondences given by you to the third party insurers / driver are as if given directly from me. With regards to the settlement of the above subject accident claim, I/We agree and undertake to ratify all correspondences and negotiations given by you to the third party insurers / driver and further agree and undertake to be bound by all acts performed or carded out by you.
5. I/We understand that should the subject accident claims fail or not able to reach an amicably settlement with the third party insurers or driver, I/We will have to appointed a solicitors by way of signing a warrant to act in present of the appointed solicitor to further pursue the matter and to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable). I/We further agrees that should I/We fails or disagrees to appoint a solicitors at that stage, I/We shall be fully liable for all costs incurred to you until that point of time.
6. I/We further confirm my/our understanding that I/We shall render my/our full co-operation pertaining to the settlement of the subject accident and method of repair adopted shall be in accordance to the standard practices of the industry and will be at the full discretion of you.
7. I/We hereby agree that upon settlement of the above subject accident claim, I/We are required to sign Discharge Voucher/s issued by the third party insurers. After which all settlement monies shall be used to settle all costs and fee incurred to carry out the above subject accident repairs and claims. This settlement monies shall constitute a full discharge of your payment obligation to us.
8. Any indemnity / discharge voucher signed by the workshop is without prejudice to my rights to claim for compensation for my personal injury (if any). Complete VMS Pte Ltd is only authorized to negotiate and finalized with Third Party for my property damages

Signature :





Witness's Name & Signature



Name :

Date :

16/10/2019

Company Stamp (if applicable) :

Email :

## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCT19100388  
Claimant Ref: PC 2590U

We/I, COMPLETE VMS 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\$ 8,190.00 (Global Sum) (vehicle no. PC 2590U) that was damaged pursuant to the accident which occurred on 16/10/2019 (date) at JUNCTION OF PENJURU ROAD & PENJURU LANE (location) involving vehicle no. SH 7732H (insured vehicle). This is pursuant to the inspection conducted on 21/10/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner TECH OFFSHORE MARINE (S) PTE. LTD. ("the third party claimant") of vehicle no. PC 2590U 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 PC 2590U (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\$ 8,190.00 to COMPLETE VMS PTE LTD

Dated this 21 day of January 2020

CLAIMANT:

Signature:

*[Signature]*

Signed by "the workshop" *[Signature]*

Name:

NRIC:

Address:

Nationality:

Occupation:

**Leow Lily**  
**S1413397F**  
**176, Sin Ming Drive, #03-14**  
**Singapore 575721**

WITNESS:

Signature:



Signed by appointed Surveyor

Name:

NRIC:

Address:

Nationality:

Occupation:

**LKK Auto Consultants Pte Ltd**  
**199607198R**  
**51 Ubi Avenue 1**  
**#01-25 Paya Ubi Ind. Park S(408933)**

*This indemnity is signed without prejudice  
to my rights to claim for compensation  
for my personal injury.*

# COMPLETE VMS PTE LTD

176 Sin Ming Drive, #03-14 / 07, Sin Ming Autocare Complex, S575721  
Tel: 6455 0012 Fax: 6554 0012 Email: main@completevms.com.sg  
Business Reg. No. 200416180E GST Reg. No.: 200416180E



INDIA INTERNATIONAL INSURANCE PTE LTD  
64 CECIL STREET #04#05 IOB BUILDING  
SINGAPORE 049711

Contact : 63476100 Fax No. : 62244174

Tax Invoice : VM015083

Invoice Date : 21/01/2020  
Vehicle Num. : PC2590U  
Make/Model : TOYOTA REGIUS ACE 3.0 DX M  
Mileage(Km) :  
PO/NO/RO# :  
Ref./Remark : MCT19100388

S/N	Quantity	Particular	Unit Price	Amount S\$
		COST OF REPAIR AS AGREED AT		6,500.00

SingDollars : Six Thousand Nine Hundred Fifty-Five Only

Total S\$ :	6,500.00
GST S\$ :	455.00
Amount Due S\$ :	6,955.00
	=====

Terms : Cash

  
COMPLETE VMS PTE LTD





Your Ref: SH7732H  
Our Ref : TPDS19144 – PC2590U

20th November 2019

By Postage

**INDIA INTERNATIONAL INSURANCE PTE LTD**

64 Cecil Street #04 #05  
IOB Building  
Singapore 049711

Attention: Motor Claims Department

Dear OIC,

**ACCIDENT INVOLVING VEHICLE: PC2590U AND SH7732H ALONG PENJURU ROAD ON 16.10.2019.**

We are the authorized repair workshop for the owner of motor vehicle no. **PC2590U** which is involved in the captioned accident with your insured vehicle **SH7732H**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1	Cost of Repair as agreed with surveyor	S\$ 6,955.00	(inclusive GST)
2	11days of Loss of Rental@ \$180.00	S\$ 1,980.00	
3	LTA/GIA Search fee	S\$ 36.45	
	Total	S\$ 8,971.45	

We enclosed herewith the following documents to support the claims:-

- Proforma Invoice
- Rental agreement
- Lta/GIA search fee

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

**Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.**

Thank you  
Yours Faithfully

**Chiu Siong Lim**  
For Complete VMS Pte Ltd

# COMPLETE VMS PTE LTD

176 Sin Ming Drive, #03-14 / 07, Sin Ming Autocare Complex, S575721  
Tel: 6455 0012 Fax: 6554 0012 Email: main@completevms.com.sg  
Business Reg. No. 200416180E GST Reg. No.: 200416180E



INDIA INTERNATIONAL INSURANCE PTE LTD  
64 CECIL STREET #04/#05 IOB BUILDING  
SINGAPORE 049711

Attention : MOTOR CLAIMS DEPT

Contact : 63476100 Fax No. : 62244174

Proforma Invoice : TP006822

Date : 20/11/2019  
Vehicle Num. : PC2590U  
Make/Model : TOYOTA REGIUS ACE 3.0 DX M-2014  
Chassis/Eng# : KDH2010118725/1KD2307546  
Accident Date : 16/10/2019  
Claim No. :  
Reference :  
Policy No. :

COST OF REPAIR AS AGREED

Amount S\$

6,500.00

SingDollars : Six Thousand Nine Hundred Fifty-Five Only

COMPLETE VMS PTE LTD

Total S\$ : 6,500.00  
GST S\$ : 455.00  
Amount Due S\$ : 6,955.00  
=====

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time : 18 Oct 2019 / 13:27:21

Receipt Date/Time : 18 Oct 2019 / 13:27:21

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-191018-001693

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 - SH7732H As at 16 Oct 2019/00:00:01 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SH7732H Enquiry Fee 20191018132554834277	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
	<b>Paid By</b>			
	xxxxxxxxxxxx2417 Credit Card: Visa/MasterCard			7.45
	<b>Total</b>			7.45
	<b>Cash Change</b>			0.00
	<b>Tendered Amount</b>			7.45
	<b>Excess Refundable Amount</b>			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.



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-19-172151

Date of Request: 18/10/2019

Your Ref No: WALK IN JIMMY

COMPLETE VMS PTE LTD  
176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX  
SINGAPORE 575721

Dear Sir/Madam,

Your Vehicle No: PC2590U  
Date of Accident: 16/10/2019  
Place of Accident: PENJURU RD  
Involving Vehicle No: SH7732H

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**  
6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

## TAX INVOICE

Our Ref No: GR-19-172152

Date of Request: 18/10/2019

Your Ref No: WALK IN JIMMY

COMPLETE VMS PTE LTD  
176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX  
SINGAPORE 575721

Dear Sir/Madam,

Date of Accident: 16/10/2019

Vehicle No: PC2590U

Place of Accident: JUNCTION OF PENJURU ROAD & PENJURU LANE

Involving Vehicle No: SH7732H

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SH7732H	JUNCTION OF PENJURU ROAD & PENJURU LANE	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque





合和旅游巴士服务

HUP HOE COACH SERVICE

Registration No. 52879439J

50 Serangoon North Ave 4 #05-18 First Centre Singapore 555856

HP: +65-9322 7087 Email: huphoecoach2@hotmail.com

Rental, Hire & Chartered For Overland  
Cars, MPV, Lorries, Mini Buses

No.: 5848

OFFICIAL RECEIPT

Date:

29/10/19

兹收到

Received From

来大银

The Sum Of Dollars

KARUPPAIYA MUTHURAMAN

ONE THOUSAND NINE HUNDRED EIGHTY

ONLY

1/c: 368679152

系还

Being Payment Of

Renta of Bus for

18/10/19 to 29/10/19

\$ 1980/xx

HUP HOE COACH SERVICE

Cash

Cheque No:

L

# HIRING AGREEMENT

Vehicle No.

PA 3373 J

Owner

HUP HOE COACH SERVICE

Hirer

KARUPPAIYA MUTHU RAMAN

Address

BLK 950 JURONG WEST ST. 91

#03-637 S(640 950)

Contact No.

86424572

Hiring Period

18/10/19 10AM

29/10/19 12pm

Hiring Rate

11 days x \$180/- = \$1980/-

Hiring Rules

Full tank of diesel at the point of vehicle-hand-over before and after used.

DOB

4/5/1968

All damages, summons and accident's excess during the hiring period are to be borne by the hirer.

The standard terms and conditions of hiring services apply over the hiring period.

Pickup point

Please pickup the vehicle at SIN MING AUTO CARE

Attn : Mr Lim 93227087

: Ms Lilian 96881679


: Ms Sandy 97306185

Signature of Owner

I/C no.

Name

Date

  
96881679  
S1627039/C  
Lim Yaw Khiong  
18/10/19

Signature of

I/C no.

Name

Date



S6867915 Z

KARUPPAIYA MUTHU RAMAN

18/10/19

(Please attach copies of I/C, Driving Licence & Vocational Licence of the hirer.)

## Print Received Message

This mail is associated with :

**\*PC2590U (MCT19100388)**  
**[SH7732H]**

TP

TECH OFFSHORE MARINE (S) PTE LTD

Oct 16 2019 7:00PM

[-]

COMPLETE VMS PTE LTD

**From** India International Insurance Pte Ltd (HQ) (III\_SG), sent on 19/12/2019 16:19 PM.  
**To** LKK\_HQ  
**Subject** Alert - Adj Mandate Approved (S\$8341.45) - PC2590U - Claim Handler: Sherini Pillai

Approved:8341.45:RENTAL UPTO TO \$150.00 ONLY