

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3004351900

Claim No : SNM19D205166

Claimant : YO SWEE HIANG DOLORES

Amount : S\$635.00

SINGAPORE DOLLARS SIX HUNDRED THIRTY FIVE ONLY

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SMA 3202E

Insured Vehicle No. : SJN 2922J

Date of Loss : 25/10/2019

Place of Accident : JB CHECKPOINT BEFORE MALAYSIAN CUSTOM ON BRIDGE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : NURQALLIQUE IZHAR BIN AZHARI

Driver Name : MOHAMMAD SAHAK BIN RAHMAT

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Global Sum (all in) S\$ 635.00

TOTAL S\$ 635.00

Claimant Name : Yo Swee Hiang Dolores NRIC No : S7003825-J

Signature :  Date : 19-12-2019

This Discharge Voucher applies strictly for claimant's claim for **property damages only** and does not constitute a full discharge for any other claims or further claims whatsoever present or future that may manifest arising directly or indirectly from this accident. This Settlement terms herein is without an admission of liability on the part of the claimant and/or his driver and the settlement terms and should not be used as evidence in any related suits or claims arising from this accident.

ARC

AUTOMOTIVE REPAIR CENTRE PTE LTD
38 WOODLANDS INDUSTRIAL PARK E1
#05-18 SINGAPORE 757700
TEL: 64688834 / FAX: 64622278
E-MAIL: info@automotiverepaircentre.com.sg

China Taiping Insurance (Singapore) Pte Ltd
Attn: Motor Claims Dept

Dear Sir/ Madam

LETTER OF DEMAND

ACCIDENT INVOLVING VEHICLE NO SMA3202E & SJN2922J
BEFORE MALAYSIA CUSTOM ON BRIDGE ON 25/10/2019.

We understand that you are the insurer of vehicle SJN2922J.

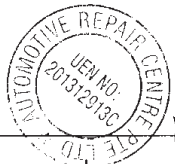
I/We wish to inform you that my/our vehicle SMA3202E have been completed repairs to my/our satisfaction by M/s AUTOMOTIVE REPAIR CENTRE PTE LTD. I/We therefore propose to claim from your as follows:

1.	Cost of Repair	S\$ 535.00 (w/GST 7%)
2.	Loss of Use (S\$120.00 x 01 day)	S\$ 120.00
3.	LTA Search Fee/GIA Reports	S\$ 2.00
	TOTAL	S\$ 657.00

Please let us have your reply soonest possible.

Thank you.

Yours faithfully


20/11/2019

AUTOMOTIVE REPAIR CENTRE PTE LTD

38 Woodlands Industrial Park E1

#05-18, Singapore 757700

Tel : 64688834 Fax : 64622278

e-mail : info@automotiverepaircentre.com.sg

Company Reg. No : 201312913C GST Reg. No : 201312913C

Tax Invoice : INV00001874

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

3 ANSON ROAD, #16-00

SPRINGLEAF TOWER, SINGAPORE 079909

Contact : 6389 6116 Fax No. : 6224 7175 / 6224 747

Date : 20/11/2019

PO/WO No. :

Reference : SMA3202E

Attention :

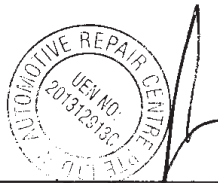
Terms :

Page No : 1

S/N	Quantity	Particular	Unit Price	Amount S\$
1.	1	COST OF REPAIR (PART BY PART)	500.00	500.00

Dollars : Five Hundred Thirty-Five Only

Total S\$:	500.00
GST @ 7% S\$:	35.00
Amount Due S\$:	535.00
	=====



Customer Signature & Co. Stamp

AUTOMOTIVE REPAIR CENTRE PTE LTD



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

Third Party Insurer Enquiry

Our Ref No: GR-19-177195

Date of Request: 29/10/2019

Your Ref No: Online Purchase

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18
Singapore 757700

Dear Sir/Madam,

Enquiry Date 29/10/2019
Enquiry By Raymond Tan Kok Leong
TP Vehicle No. SJN2922J
Accident Date 25/10/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJN2922J	China Taiping Insurance (Singapore) Pte. Ltd.	11/01/2019-10/02/2020	6389 6111

Thank You.

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.

This is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

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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-19-177195

Date of Request: 29/10/2019

Your Ref No: Online Purchase

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18
Singapore 757700

Dear Sir/Madam,

Enquiry Date 29/10/2019
Enquiry By Raymond Tan Kok Leong
TP Vehicle No. SJN2922J
Accident Date 25/10/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

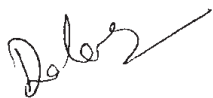
LETTER OF AUTHORISATION

I/We, YO SWEE HIANG DOLORES ("claimant") of
BLK 22 CANBERRA DRIVE #12-05 S(768426) (address), owner of SMA3202E (vehicle no.)
hereby authorize **Automotive Repair Centre Pte Ltd** ("the workshop"), to act on behalf of
me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim")
for my/our vehicle no. SMA3202E that was damaged pursuant to the accident which occurred
on 25/10/2019 (date) along MALAYSIAN CUSTOM ON BRIDGE (location)
involving vehicle no/s SJN2922J ("the accident").

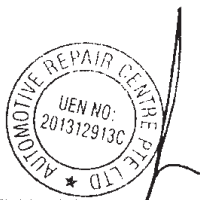
I/We further authorize the workshop to settle my/our above mentioned claim in a manner that
they deem fit and the workshop is further authorized to receive payment further to settlement
of my/our claim with payment cheque/s being made in favour of the workshop.

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

Dated this 12 (day) of 11 (month) 19 (year)



Signed by "the claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)