

Proforma Inv: CAS/20/PI0034

FAX: 6509 9501

Email: contact@casgarage.sg

23.03.2020

Our Ref: SMF 4771X

Your Ref: GBG 567X

M/s LonPac Insurance Bhd

Motor Claims Department

101 Thomson Road

#18-01 United Square

Singapore 307591

BY POST

Dear Sir/Mdm

ACCIDENT INVOLVING SMF 4771X AND GBG 567X ALONG CTE TWRDS SLE ON 20.11.2019

Please refer to the above mentioned accident.

We are writing in on the behalf of

CHOW CHEE SOON

the registered owner of motor vehicle number

SMF 4771X

which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle number GBG 567X As a result of which, our client have suffered loss and and expenses.

We are instructed by our client to claim for:

1. Cost of Repair (Recommended By LKK Adrian) 6,700.00 2. Loss of Rental (06 days x \$120)

LTA Search 3.

720.00 7.45

TOTAL AMOUNT

7,427.45

We enclsoed hereby the following documents for your consideration:

- (A) Final Repair Bill
- LTA Search Invoice (B)
- (C)Rental Agreement
- (D) Rental Invoice
- (E) Letter of Authority

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

GARAGE PTE LTD UEN 201828067M 1 KAK BUKIN AVENUE 6, #02-22 AUTOBAY, \$INGAPORE 417883

Ms Nicole Chong Administrator Mobile: 65 97916119 Email: nicole@casgarage.sg



FAX: 6509 9501

Email: contact@casgarage.sg

LETTER OF AUTHORITY AND INDEMNITY

ACCI	DENT	INV	OLVING	VEH	HICLE	NC)	Smi	× 147+1 ×	AND_	GBG 56+X
AT/Al	LONG_	CTE	TOWARDS	SLE	BEFORE	AHM	MO	KIO	AVE 3		
ON_	90	_DAY_	11	MON	TH	2019	_Y	EAR			
a)	vehicles.		of vehicle no.								ence repair to the said
b)	appointn	nent are	given by me/	us with r	espect to	the con	iduct	of my	our claims a		I instructions as if the party driver and/or his ne third party.
c)	You hav	on such to	full authority erms as you d	y to instr eem fit. U	uct my/or Jpon settl	ur solici ement o	tors t	o nego claim,	otiate a settler you are autho	ment with the rized to sign a	third party and/or his any Discharge Voucher
d)	Upon res	solving m oursement	y/our claim, y s for acting fo	ou are au	thorized t	to agree	with :	my/ou	solicitors on	the amount of	n, on my behalf. f their professional cost sum on my/our behalf
e)	In the ev					at my/or	ır soli	citors'	office or to	attend court in	n connection to my/our
f)	If for w recovera undertak	hatever reble under to pay	easons, my/ou the policy of the full amou	ir insurer insurance int of yo	s reject i e or make ur repair	e any of bill and	fer to surv	pay le	ess than the ar s and any oth	nount claimed	pairs and/or any loses d by you, I/we agree to reasonably incurred on
g)			o pay you the d understand t					e may	be.		
Dated	this	9 0 q	ay!	1	month	201	9	year			
				W.							
Signat	ure		:	/							
Name			CHOW	(HEE	SOON				Company	Stamp	
NRIC/	ROC N	0.	: _ 51417	995 Z							
Addre	SS		194 RIV	ERVALE	DRIVE	. #07	-				
			765	•							



LONPAC INSURANCE BHD

CLAIM NO : 19/19/19/VC05/022678 DATE : 26 NOVEMBER 2020 "My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

DISCHARGE VOUCHER

I/We, CHOW CHEE SOON confirmed acceptance from M/s LONPAC INSURANCE BHD and/or owner of GBG 567X the sum of Singapore Dollar Seven Thousand and Three Hundred Only (\$7,300.00) in full and final satisfaction, liquidation and discharge of all property/injury losses competent to me/us upon the said M/s LONPAC INSURANCE BHD in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving SMF 4771X on 20 November 2019 along AYE NEAR WEST COAST EXIT.

I /We hereby agree to indemnify and keep indemnify (LONPAC INSURANCE BHD/ JNR ENTERTAINMENT PRIVATE LIMITED) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to <u>CAS</u> <u>GARAGE PTE LTD.</u>

I/We hereby acknowledged that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.

Signature of vehicle owner/Date

CHOW CHEE SOON M/M/2020

Name of vehicle owner /Date



INVOICE

LONPAC INSURANCE BHD

Invoice Date 25 Mar 2020

Invoice Number TI-20-0036-1182TP

Reference SMF 4771X HYUNDAI ELANTRA

CAS GARAGE PTE LTD 1 KAKI BUKIT AVENUE 6 #02-22 AUTOBAY SINGAPORE 417883

Description	Quantity	Unit Price	Tax	Amount SGD
LUMP SUM REPAIR COST (RECOMMENDED BY LKK ADRIAN)	1.00	6,700.00	No Tax	6,700.00
			Subtotal	6,700.00
	\$100 WHILE		TOTAL SGD	6,700.00

Due Date: 25 Mar 2020

PAYMENT ADVICE

To: CAS GARAGE PTE LTD 1 KAKI BUKIT AVENUE 6 #02-22 AUTOBAY SINGAPORE 417883

Customer Invoice Number TI-20-0036-1182TP

LONPAC INSURANCE BHD

Amount Due

6,700.00

Due Date

25 Mar 2020

Amount Enclosed

Enter the amount you are paying above



THE REPORT OF THE PARTY OF THE

1 KAKI BUKIT AVENUE 6 SINGAPORE (417883) #02-38, AUTOBAY

TEL:6484 2220 H/P:9692 2220

UEN NO.: 53394623M

No. 10026 Date: 36/11/2019

ICIAL RECEIPT

CHOW CHEE SOON

(SMF 4711X)

Seven Hundred Twenty Unly.

um of Dollars

ived from _

; Payment Of ___

Rental of Smr 4064C

doc1 x shap 9

CS CAR RENTAL

1sh/Cheque No.





CS CAR RENTAL

1 KAKI BUKIT AVENUE 6 #02-38, AUTOBAY SINGAPORE (417883) TEL:6484 2220 H/P:9692 2220

NO: 10042

UEN: 53394623M

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULAR	Vehicle No: SMIC 4064 C Replace Veh No:					
Name: (as in I/C) _ CHOW CHEE SOOH	Mileage Out: 18 760 Mileage Out:					
NRIC/PASSPORT No: SILI 7995 Z	Make & Model: Hyundai Auto/Manual					
Address (Res) 194 PIVERVALE DRIVE #07-765	Algorital Group:					
Address (1165)	Out : Date 30 - 11 - 20/9 Time: 1900					
Name & Address of Employer	HIRE / PERIOD EXPIRY Time:					
Name & Address of Employer	NON-WAIVER EXCESS=\$					
Occupation : Driving Exp:						
Delicing Linear No. SILLIA997 D/ Type Local / International	CHARGES					
Page Pate:	Daily 6 @\$ 1>0 per day 7>0 00					
Tel:(0) 90609717 (R) HP +65-9060777	Weekly @\$ per week					
ADDITIONAL DRIVER'S PARTICULARS	Monthly @\$ per month					
Name: (as in I/C) CHOE CHENH HUA	Hours @\$ per hour					
NRIC/PASSPORT No: 39034193 F	Others @\$					
Address (Res)	CDW @\$ per day/month					
Driving License No: \$9034193F D/L Type: Local / International	PAI @\$ per day/month					
Issue Date: Date of Birth: 24/09/1990	Delivery/Collection Service					
Occupation: Driving Exp:	SUB-TOTAL \$ 720 CV					
	000 1011.2 4					
VEHICLE CHECK LIST	PETROL LEVEL					
	PETROL LEVEL Out E 1/4 1/2 3/4 F					
SH REAR	Out E 1/4 (1/2 3/4 F In E 1/4 1/2 3/4 F					
REAR REAR	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION					
- DENTS - SCRATCHES - SCRATCHES	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc.					
REAR REAR	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION					
D-DENTS S-SCRATCHES S-SCRATCHES	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc.					
D-DENTS S-SCRATCHES S-SCRATCHES	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc.					
A - ACCIDENTS S - SCRATCHES A - ACCIDENTS A	Out E 1/4 1/2 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc.					
REAR REAR A - ACCIDENTS RIGHT FRONT TOP LEFT ACCESSORIES CHECK	Out E 1/4 (1/2) 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc. TOTAL CHARGES \$					
A - ACCIDENTS S - SCRATCHES A - ACCIDENTS A	Out E 1/4 (1/2) 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc. TOTAL CHARGES \$					
REAR REAR A - ACCIDENTS RIGHT FRONT TOP LEFT ACCESSORIES CHECK	Out E 1/4 (1/2) 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc. TOTAL CHARGES \$					
REAR S- SCBATCHES RIGHT FRONT TOP LEFT ACCESSORIES CHECK Ashtray Cig Lighter S/Tyre	Out E 1/4 (1/2) 3/4 F In E 1/4 1/2 3/4 F EXTENSION Misc. TOTAL CHARGES \$					

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CS CAR RENTAL in connection with this agreement is true.

*IMPORTANT

- 1. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE
- 2. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 3. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- 4. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY, IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- 5. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CS CAR RENTAL

RETURN OF VEHICLE. THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SINGAPORE OF HIRER/DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CS CAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	Day 1
76 Lu	1330				SIGNATURE OF HIRER/DRIVE

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

20 Nov 2019 / 20:46:23

Receipt Date/Time: 20 Nov 2019 / 20:46:23

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191120-003366

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 - GBG567X As at 20 Nov 2019/17:40:00 Insurance Co: LONPAC INSURANCE BHD				
1 Insurance Enquiry - GBG567X Enquiry Fee 20191120204544400645		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			
	xxxxxxxxxxx5986	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.

Jasper Chua (LKK Auto)

From:

ONG LI LI < llong@lonpac.com>

Sent:

Wednesday, 25 November 2020 3:18 PM

To:

Jasper Chua (LKK Auto)

Cc:

MT_Claim_SG

Subject:

RE: <SEEK MANDATE> Direct Settlement - Accident Involving GBG567X (OI: LPC - 19/19/19/VC05/022678)) AND SMF4771X (TP: LKK REF - CC6/LPC19020663/Ahb3)

on 20.11.2019 Our Ref: 19/19/19/VC05/022678 [External General]

Lonpac External - General

Dear Jasper

Please proceed.

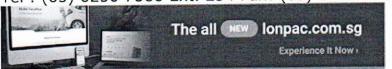
Regards,

Ong Li Li

Senior Claims Executive | Lonpac Insurance Bhd 300 Beach Road #17-04/07 The Concourse

Singapore 199555

Tel: (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

Lonpac External - General data is for internal / external use.

From: Jasper Chua (LKK Auto) [mailto:jasperchua@lkkauto.com]

Sent: Friday, 13 November 2020 1:53 PM To: ONG LI LI < llong@lonpac.com>

Ce: MT Claim SG <mt claim@lonpac.com>

Subject: RE: <SEEK MANDATE> Direct Settlement - Accident Involving GBG567X (OI: LPC - 19/19/VC05/022678)) AND SMF4771X (TP: LKK REF - CC6/LPC19020663/Ahb3) on 20.11.2019

Our Ref: 19/19/19/VC05/022678 [External General]

Dear Li Li.

We check and confirm insured driver hold a valid driving license.

Please refer to attached documents.

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2928 | email: <u>jasperchua@lkkauto.com</u> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933) From: ONG LI LI < llong@lonpac.com > Sent: Monday, 6 April 2020 10:41 AM

To: Jasper Chua (LKK Auto) < jasperchua@lkkauto.com>

Cc: MT_Claim_SG <mt_claim@lonpac.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>

Subject: RE: <SEEK MANDATE>Direct Settlement - Accident Involving GBG567X (OI: LPC -

19/19/VC05/022678)) AND \$MF4771X (TP: LKK REF - CC6/LPC19020663/Ahb3) on 20.11.2019

Our Ref: 19/19/19/VC05/022678 [External General]

Lonpac External - General

Dear Jasper

Please check and confirm if Insured driver holds a valid driving license to drive Insured vehicle at the time of accident.

*note: the driving license in the GIA report is 3A.

Regards,

Ong Li Li

Senior Claims Executive | Lonpac Insurance Bhd 300 Beach Road #17-04/07 The Concourse

Singapore 199555

Tel: (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



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From: Jasper Chua (LKK Auto) [mailto:jasperchua@lkkauto.com]

Sent: Friday, 3 April 2020 2:28 PM To: ONG LI LI < llong@lonpac.com>

Cc: MT_Claim_SG <mt_claim@lonpac.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>

Subject: <SEEK MANDATE> RE: Direct Settlement - Accident Involving GBG567X (OI: LPC - TBA)

AND SMF4771X (TP: LKK REF - CC6/LPC19020663/Ahb3) on 20.11.2019 Our Ref:

19/19/19/VC05/022678 [External General]

Dear Li Li,

We refer to the subject matter.

It was reported that Insured driver rear-ended third party.

Summary to offer to repairer **CAS GARAGE PTE LTD** is as follows:

TP CLAIMED	REVISED - TO OFFER		
Cost of Repair	\$ 16,968.96	\$ 6,700.00	
Loss of Rental (\$120.00 x 6 days)	\$ 720.00	\$ 600.00 (\$100.00 x 6 days)	
LTA Search Fee	\$ 7.45	\$ 7.45	
TOTAL	\$ 17,696.41	\$ 7,307.45	

Breakdown of days is as follows:

Recommended days	6 Days
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