



## THINK ONE AUTOCARE PTE LTD

RCB: 201322501G GST: 201322501G

No 18 Defu Avenue 2, Singapore 539522

Tel: (65)6844 3300 Fax: (65)6842 4988

Email: [enquiry\\_autocare@thinkone.com.sg](mailto:enquiry_autocare@thinkone.com.sg)

Our Ref : XE2678X  
Your Ref :  
Date : 10.12.2019

INDIA INTERNATIONAL INSURANCE  
#40-05 IOB BUILDING  
640CECIL BUILDING  
SINGAPORE 049711

Dear Sirs,

Accident Involving **XE2678X** along **CHANGI ROAD EAST** on **03.06.2019 04:30HRS**

We are authorized by the owner **THINK ONE LEASING PTE LTD** of vehicle **XE2678X** to claim damages and losses against your insured in connection with the above road traffic accident.

Our client's vehicle was damaged and our client has been put to loss and expenses, particular of which are as follows:

Cost of Repair (inc 7%gst)	:	\$7115.50
Loss of Used \$200.00 x 4days	:	\$800.00
LTA SERACH FEE	:	\$7.45
<b>Total</b>	:	<b>\$7922.95</b>

We enclose herewith the supporting documents for your perusal.

Please let us have your cheque payment made in favour of 'Think One Autocare Pte Ltd'

Yours Faithfully

Think One Autocare Pte Ltd  
18 Defu Lane Avenue 2  
Singapore 539522  
Tel: 6844 3300 Fax: 6842 4988

Michael Ng  
Claim Advisor  
HP: 91288488  
DID: 68443300  
[michaelng@thinkone.com.sg](mailto:michaelng@thinkone.com.sg)

## AUTHORISATION TO ACT

I / We, THINKONE LEASING PTE LTD of 20 UBI ROAD 4  
("the third party claimant") (address)  
# D2-08 THINKONE BUILDING S 408622 owner of XE 2678X  
(vehicle number)

hereby authorised **THINK ONE AUTOCARE PTE. LTD** ("the workshop") to act for me  
with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my  
vehicle no. XE 2678X that was damaged pursuant to the accident which  
occurred on 30.11.2019 along CHANGI ROAD EAST  
(date)  
involving vehicle number(s) SHA 3811 G ("the other party").

I/We further authorised the workshop to settle my above mentioned claim in a manner that  
they deem fit and the workshop is further authorised to receive payment further to settlement  
of my 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 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.

\*Should the case could not reach to a settlement, I / We authorised Think One Autocare to  
proceed with all the necessary legal means and should this case failed,

I/We THINKONE LEASING PTE LTD agreed and will bear / pay  
all the repair costs and legal fees costs due incurred by Think One Autocare Pte Ltd

Dated this 20th (day) of NOVEMBER (month) 20 19 (year)



Signed by "the third party claimant"  
(with company's stamp if applicable)

Think One Autocare Pte Ltd  
18 Defu Lane Avenue 2  
Singapore 539522  
Tel: 6844 3300 Fax: 6842 4988

Signed by "the workshop"  
(with company stamp)

Occupation



THINK ONE AUTOCARE PTE LTD  
RCB:201322501G GST:201322501G  
No.18 Defu Lane Avenue 2 Singapore 539522  
Tel:(65)6844 3300 Fax:(65)6842 4988  
Email:enquiry\_autocare@thinkone.com.sg

Bill To : INDIA INTERNATIONAL INSURANCE  
Address : #04-05 IOB BUILDING  
64 CECIL STREET  
SINGAPORE 049711

Tax Invoice :JO201912-123  
Date : 09/12/2019  
Vehicle Number :XE2678X  
Make/Model :NISSAN UD  
Mileage(km) :  
Staff ID NSP  
Remarks/Ref :

S/N	Description	Amount S\$
1	COST OF REPAIR	6,650.00

E & O.E.

SUB TOTAL	\$	6,650.00
GST 7%	\$	465.50
TOTAL SGD	\$	7,115.50

Think One Autocare Pte Ltd  
18 Defu Lane Avenue 2  
Singapore 539522  
Tel: 6844 3300 Fax: 6842 4988

Customer's Signature / Co.Stamp

for Think One Autocare Pte Ltd



Land Transport Authority  
10 Sili Ming Drive  
Singapore 575701  
GST Registration No.: M4-000629-1

Print Date/Time 02 Dec 2019 / 15:30:48

Receipt Date/Time 02 Dec 2019 / 15:30:48

### Tax Invoice/Receipt

Receipt No.: ITNET-0000-19-205-00-866

Previous Receipt No:

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
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Result of Insurance Enquiry - SHA3811G

As at 30 Nov 2019/04:30:00

Insurance Co. INDIA INT'L INS PTE LTD

1	Insurance Enquiry - SHA3811G Enquiry Fee 20191202132853402134	7.00	0.45	7.45
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Sub-Total	7.00	0.45	7.45
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Total Before Rounding	7.00	0.45	7.45
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Rounding Difference			0.00
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Total Amount Payable			7.45
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Paid By

XXXXXXXXXXXX3045

Credit Card:  
Visa/MasterCard

Total			7.45
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Cash Change			0.00
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Tendered Amount			7.45
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Excess Refundable Amount			0.00
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THANK YOU AND HAVE A NICE DAY!

Please advise that this is a receipt of the payment received from the customer and is not a receipt of the goods or services provided.

Provider: Financial Institution: The Singapore Police Force. This receipt is not valid for any other purpose.

10/10/2019