AUTOWORX HOUSE

176 Sin Ming Drive, #02-01 Sin Ming Autocare Singapore 575721 Email: <u>claims.autoworxhouse@gmail.com</u>

•TEL: 6452 8211 •FAX: 6451 7420

<u>Direct Settlement</u> THIRD PARTY CLAIM

Your ref:

Our ref: SLB 7997 A

INDIA INTERNATIONAL INSURANCE PTE LTD

Attn: Officer In Charge (Motor Claim Department)

15/10/2020

Dear Sir,

RE: ACCIDENT INVOLVING SLB7997A & PC8003J ON 29/11/2019.

We have been authorized by Tidal Capital Pte Ltd, the registered owner of vehicle number SLB7997A, which was involved in the above accident and at the material time to make a 3rd party claims against vehicle number PC8003J.

The accident was clearly caused by your insured's negligence. We, therefore seeking compensation from you for our client financial losses as itemized below: -

Repair cost	S\$	5,000.00
Loss of Rental (5days x \$130.00)	S\$	650.00
Search Fee	S\$	2.00
Total	S\$	5,652.00

We have enclosed copies of relevant documents to support our claims.

Please settle this matter within 7 days.

Your prompt settlement of our claim would be much appreciated.

Do contact us at 64528211 for any clarification.

Thank you.

Yours faithfully

Autowork House

10.	COLC L BODE	ACCUPATION TO THE RESERVE THE	-	
To:	AUTOWORX	HOUSE	<i>n</i> :	

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Letter of Authorisation
RE: ACCIDENT NVOLVING SLB 7997 A & PC 8003J
ALONG/AT BOY-Front QUE & Sheares link
ALONG/AT Boy-Front ave & Sheares link on 29/11/2019.
1. I'We, TIDAL CAPITAL PTE LTD (NRIC No. 20173048N
1. I/We, TIDAL CAPITAL PTE LTD (NRIC No. 20173048 N owner/driver of motor vehicle no. SLB7997A & residing
owner/driver of motor venicle no. Sciolitation
respectively in consideration of your workshop Autowork House
repairing my/our vehicle. I/we hereby authorise you to claim on my/our behalf for the costs
renair and loss of use. I/We further confirm and authorise you to use my/our name/s to engage to
said service of a solicitor to proceed with negotiation with the defaulting party's insurance
company for payment of the same and in the event negotiation fails, to instruct the solicitor to issue Summons on my/our behalf and in my/our name/s to claim for the same. Irrespective whether the
claim is successful or not, all legal costs incurred shall be borne by you, provided we rendered on
assistance as per second paragraph stated herein below:
2. I/We understand that by signing this Letter of Authorisation, I/we has/have to render whatever
11
Court to give evidence to enable the claim to succeed. If I/we failed or neglected to do so despire request from you, you shall be entitled to claim from me/us the repair costs together with leg
request from you, you shall be entitled to claim from mous the repeated to obtain costs, other incidental costs and expenses pertaining the issuance of Summons in order to obtain
payment from defaulting party.
payment non continue of the chiral payment with the third
3. You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my/our claim, you are party and/or his insurers on such terms as you deem fit. Upon settlement of my/our claim, you are
party and/or his insurers on such terms as you decan in. Open sometime my acceptance of the
authorised to sign any Discharge Voucher or any document to community you also have my/our settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our
C.11
incurrence commany of any other party, directly to your working the
AUTOWORK Have
1 1 C. Him meety payment after
4. In the event the claim is settled or judgment is obtained against the defaulting party, payment after
deducing all costs and disbursements incurred should be drawn in you
your discretion) and will be forwarded to you.
5. This letter of Authorisation is irrevocable.
JEP I TAL
(Reg No:) A (2017) 2048N) Tri
Signature:
Name:
NRIC NO:
Date this 30 day of 1 20 19.
Date this day of



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.iii.com.sg

__ ("the workshop") hereby confirm that we/l have reached an agreement

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCV2019D0001560 Claimant Ref : SLB7997A

Autoworx House

with the appointed Surveyor of India International Insurance Pte L of Surveyor) with respect to the amount claimed for S\$ 5,6	LKK Auto (Consultants Pte Ltd (name
on 29/11/2019 (date) at BAYFRONT AVENUE & SHEARE vehicle). This is pursuant to the inspection conducted on 03/12/20	at was damaged pursua ES LINK (location) invol	ant to the accident which occurred ving vehicle no. PC8003J (insured
We/I confirm that we/I are/am authorized by the owner claimant") of vehicle no. SLB7997A to make the claim as set out the matter on his/her behalf in a manner that we/I deem fit. We party claimant".	in the above paragraph	and we/I have full authority to settle
We/I further confirm that we/I will indemnify India International Intern	party claimant" after the fered pertaining to cost	e above said agreement lodges a
We/I confirm that the agreement reached above is in full and pursuant to the accident and that further this settlement is reach basis.		
This agreement is subject to the application of Singapore law and dispute arising out of the same. We/I authorize you to pay the total amount of S\$ $5,600.00$ t		
Dated thisday of		
CLAIMANT: Signature: Signed by "the workshop" (with another second	WITNESS: Signature:	Signed by appointed Surveyor
Name: Pylon Chew	Name:	LKK Auto Consultants Pte Ltd
NRIC: 752A Address: 176 Sin Ming Dame	NRIC:	199607198R 51 Ubi Avenue 1
#102-01	Address.	#01-25 Paya Ubi Ind. Park S(408933)
Nationality: 8' porean	Nationality:	
Occupation: Director.	Occupation:	

AUTOWORX HOUSE

C/O.176 SIN MING DRIVE #02-01 SINGAPORE 575721 TEL: 64528211 FAX: 64517420 Registration No. 5296929B

INVOICE

5427

INDIA INTERNATIONAL INSURANCE PTE LTD

15/10/2020

QUANTITY	PARTICULARS		AMOUNT (\$)
	RE: TOYOTA VELLFIRE / SLB 7997 A Lump sum repair for the above mentioned vehicle.		5,000.00
	NORX	Total	5,000.00



Auto Exchange Leasing Pte Ltd

81 Ubi Avenue 4 #01-16 UB One Singapore 408830 UEN: 201608350D

RENTAL AGREEMENT

No. R20100003

Date: 15 Oct 2020

Renter Details		Additional Driver (if ar	ny)
Name	: Lawrence Tham Soon Yuen	Name Address	
Address	: Blk 112 Punggol Walk #02-28 Singapore 828766 Singapore 828766	Date of Birth NRIC No./Passport No.	8
Date of Birth NRIC/Passport No./UEN Driving License No. Driving License Date	: 01/04/1976 : S7609101C : S7609101C : 03/01/2003	Driving License No. Driving License Issue Date Mobile No. Email	
Mobile No.	: +6596837758	Additional Driver (if an	ıy)
Email	: lawrencetsy@yahoo.com	Name	
Vehicle Description Vehicle No. Make/Model	: SLF4118U : TOYOTA / VELLFIRE 2.5Z G-EDITION A	Address Date of Birth NRIC No./Passport No. Driving License No.	: : :
Rental Period		Driving License Issue Date	3
Minimum Rental Period Date/Time Checked Out	: 5 Days : 30 Nov 2019 0000	Mobile No. Email	:
No. of Days	: 5 days	Payment Info/Channels	
Expected Date/Time of Return	: 05 Dec 2019 0000	Bank Name Account No.	: UOB : 310-309-626-8
Rental Charges* & Dep	osit	PayNow UEN	: 201927120GUOB
Rental Charges (After GST) Rental Period Deposit Received			

I, the Renter, agree that the Lessor may collect, use & disclose my personal data, as provided in this Schedule &/or pursuant to the Agreement from time to time, including my vehicle location information (through various channels and methods such as through the use of telematics technology), for the following purposes in accordance with the Personal Data Protection Act 2012 & the Lessor's group Privacy Policy (available at www.autoexchange.com.sg):

(a) administration of the vehicle rental under the Agreement;

- (b) for internal tracking, analysis and administrative purposes;
- (c) to communicate with me; &
- (d) for the Lessor to comply with its obligations under law.

Further, I understand that my personal data may be used for marketing purposes by the Lessor, its affiliated companies or their partners; & I hereby consent to receive marketing & promotional materials by telephone, SMS or e-mail.

Agreement

The Renter has read, understood & agrees with all terms & conditions of this Agreement.

Renter's Signature/Stamp

Date :15 Oct 2020 | 10.50

ROC: 2016083500 D

Authorised Signatory/Stamp

Lessor



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-19-198295

Date of Request:

02/12/2019

Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare Singapore 575721

Dear Sir/Madam,

Enquiry Date

02/12/2019

Enquiry By

Yuki Ho

TP Vehicle No. Accident Date

PC8003J 29/11/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
PC8003J	India International Insurance Pte Ltd	13/05/2019-22/06/2020	63476100

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.

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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-19-198295

Date of Request:

02/12/2019

Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare Singapore 575721

Dear Sir/Madam,

Enquiry Date

02/12/2019

Enquiry By

Yuki Ho

TP Vehicle No.

PC8003J

Accident Date

29/11/2019

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:

[X] GIRO [] Cash [] Cheque