



Your Ref: SHD7221S
Our Ref : TPDS20009 – YN7015S

4th February 2020

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: YN7015S AND SHD7221S ALONG JUNCTION OF
MANDAI ROAD & MANDAI LAKE ROAD ON 27.12.2019.**

We are the authorized repair workshop for the owner of motor vehicle no. **YN7015S** which is involved in the captioned accident with your insured vehicle **SHD7221S**. 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\$	4,494.00	(inclusive GST)
2	5days of Loss of USE@ \$200.00	S\$	1000.00	
3	LTA Report fee	S\$	36.45	
	Total	S\$	5,530.45	

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

- Proforma Invoice
- LTA Report fee
- GIA report 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

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

LETTER OF AUTHORIZATION

RE: ACCIDENT BETWEEN YN70155 / SHD72215 (Vehicle Numbers)
ON 27/12/2019 (Date of Accident) AT Junction of Mandai Rd &
Mandai Lake Road

1. I/We, the owner of vehicle no. YN70155 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

Hebe

Date

27/12/2019

Company Stamp (if applicable) : _____

Email: _____

EXPRESS SETTLEMENT

DISCHARGE VOUCHER

III- Direct Settlement (PODS)

India Ref: MCT19120642

Claimant Ref: YN 7015S

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\$ 5,200.00 (Global Sum) 5,200.00 vehicle no. YN 7015S that was damaged pursuant to the accident which occurred on 27/12/2019 (date) at JUNCTION OF MANDAI ROAD & MANDAI LAKE ROAD (location) involving vehicle no. SHD 7221S (insured vehicle). This is pursuant to the inspection conducted on 02/01/2020 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CHYE THIAM MAINTENANCE PTE LTD ("the third party claimant") of vehicle no. YN 7015S 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 YN 7015S (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\$ 5,200.00 to COMPLETE VMS PTE LTD

Dated this 02 day of March 2020

CLAIMANT:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by "the workshop" (with chop)

Leow Lily

S1413397F

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

Singaporean

WITNESS:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by appointed Surveyor

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

Tax Invoice : VM015175

Invoice Date : 02/03/2020
Vehicle Num : YN7015S
Make/Model : MITSUBISHI CANTER
Mileage(Km) :
PO/VO/RO# :
Ref./Remark : MCT19120642

Contact : 63476100 Fax No. : 62244174

S/N	Quantity	Particular	Unit Price	Amount S\$
		COST OF REPAIR AS AGREED AT		4,200.00

SingDollars : Four Thousand Four Hundred Ninety-Four Only


COMPLETE VMS PTE LTD

Total S\$: 4,200.00
GST S\$: 294.00
Amount Due S\$: 4,494.00
=====

Terms : Cash

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 27 Dec 2019 / 11:44:42

Receipt Date/Time : 27 Dec 2019 / 11:44:42

Tax Invoice/Receipt

Receipt No. : ITNET-00000-191227-001555

Previous Receipt No. :

**S/N Item Description/
Business Transaction Reference
No.**

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SHD7221S

As at 27 Dec 2019/00:00:01

Insurance Co: INDIA INT'L INS PTE LTD

1 Insurance Enquiry - SHD7221S
Enquiry Fee
20191227114338956465

7.00	0.49	7.49
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Sub-Total	7.00	0.49	7.49
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Total Before Rounding	7.00	0.49	7.49
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Rounding Difference			0.04
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Total Amount Payable			7.45
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Paid By

xxxxxxxxxxxx2417	Credit Card: Visa/MasterCard	7.45
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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 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-20-001334

Date of Request: 03/01/2020

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: YN7015S

Date of Accident: 27/12/2019

Place of Accident: MANDAI RD

Involving Vehicle No: SHD7221S

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.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-20-001335

Date of Request: 03/01/2020

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: 27/12/2019

Vehicle No: YN7015S

Place of Accident: JUNCTION OF MANDAI ROAD & MANDAI LAKE ROAD

Involving Vehicle No: SHD7221S

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\$)
SHD7221S	JUNCTION OF MANDAI ROAD & MANDAI LAKE ROAD	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.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque