

MS FIRST CAPITAL INSURANCE LIMITED

Attn: Motor Claims Department

Dear Sir / Madam,

**ACCIDENT INVOLVING VEHICLE NO GBE 9263 Z & SHA 368 P AT PUNGGOL
FIELD ROAD LEFT TURN TO SUMANG WALK on 10/01/2020**

We understand that you are the insurer of SHA 368 P vehicle.

I/We wish to inform you that my/our vehicle GBE 9263 Z have been completed repairs to my/our satisfaction by M/s GUAN MOTOR WORKS. I/We therefore propose to claim from your as follow:

1.	Cost of Repairs	S\$	6,950.00
2.	Cost of Rental (S\$130.00 x 08days)	S\$	1,040.00
3.	LTA Search Fee	S\$	7.49
TOTAL		S\$	<u>7,997.49</u>

Please let us have your reply soonest possible.

Thank you.


Yours faithfully.

In the matter of an accident involving motor vehicles
GBE 9263 Z & SHA368P PUNGGOL FIELD ROAD LEFT TURN TO
SUMANG WALK SINGAPORE 10-1-2020

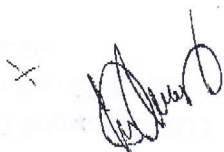
1. WARRANT TO ACT

I/We, WINZ HOE MARKETING PTE. LTD. (NRIC No.) 2XXXXX806 Z
of BLK 258 A COMPASSVALE ROAD #08-557 S' 541258

hereby authorise M/s GUAN MOTOR WORKS to act on my/our
behalf in respect of the above matter.

2. AUTHORITY

- a) I/We hereby authorise you to commence legal proceedings in my/our name(s) and to take instructions from my car-repairers who I/we have appointed as my/our agent(s) in respect of my/our claim.
- b) I/We hereby authorise you to pay to yourselves all Party and Party costs you may at any time receive in connection with the above matter and confirm that there will be no need to pay the same into the Client(s)'s Account with your Bankers.
- c) I/We hereby further authorise you to release all proceeds of settlement monies received by you (after deducting of your legal costs) to my repairers M/s GUAN MOTOR WORKS in settlement of my outstanding bill/account with them.
- d) I/We only wish to be informed of my/our case when it is necessary on your part. I/We hereby direct you to keep my car-repairers informed of all matters relating to my claim, as and when it is necessary to do so.
- e) I/We hereby authorise you to deposit in your Firms' client's account any cheques received by you and made in my/our firm's name.
- f) I/We have read and understood the above.





(Signature)



MS First Capital Insurance Limited Co.Reg No. 195000106C GST Reg No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
Tel: (65) 6507 3848 Fax: (65) 6507 3849
www.msfirstcapital.com.sg

DISCHARGE RECEIPT

CLAIM REFERENCE : D20000311MFSH
ACCIDENT DATE : 10/01/2020
ACCIDENT LOCATION : PUNGGOL FIELD ROAD LEFT TURN TO SUMANG WALK
INSURED : CITYCAB PTE LTD
INSURED DRIVER : TEO BENG KIAT
INSURED VEHICLE : SHA 368P
INVOLVED PARTY : GBE 9263Z
SETTLEMENT SUM : \$7,750.00

I/We, the undernoted CLAIMANT being the person/entity entitled to receive the compensation in relation to the accident, hereby agree to accept the SETTLEMENT SUM as full and final settlement of all claims for damages, costs & disbursements arising out of the ACCIDENT, and I/WE also agree that the said settlement sum:

1. is paid without admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and/or its INSURED DRIVER in respect of the said loss and for damage whether now or hereafter to become manifest,
2. is accepted by me/us to the intent that the said MS First Capital Insurance Limited and /or its INSURED and/or its INSURED DRIVER be absolutely and finally discharged from all claims whatsoever which I/WE now or hereafter may have arising out of or connected with or traceable to the said accident.

I/WE acknowledge that this DISCHARGE RECEIPT is not to be construed as an admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and /or its INSURED DRIVER and it shall not be used as evidence in any claims or actions which may be made against them or any of them.

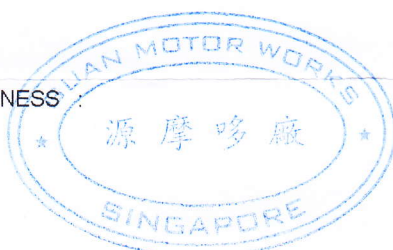
CLAIMANT : WINZ HOE MARKETING PTE. LTD.

Signature and Date :



12/5/21
[Signature]

WITNESS



Signature and Date :

[Signature] 12/05/21

源 摩 哆 廠

GUAN MOTOR WORKS

Business Regn. No: 081026-00E

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 H/P: 9742 6003

Messrs: MS FIRST CAPITAL INSURANCE LIMITED

Invoice No: 5155

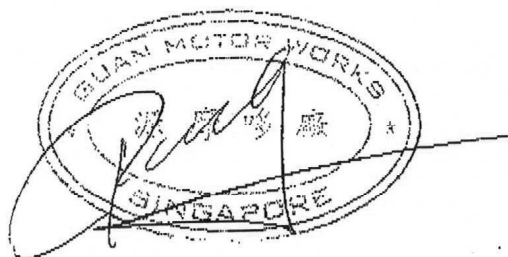
Date : 11-03-2020

NISSAN NV200 1.5 – GBE 9263 Z

Lump sum repair cost inclusive of spare parts and
labour charges.

\$ 6,950.00

Dollars Six thousand Nine hundred Fifty only.



E.&O.E.



Invoice

GBE9263Z
WINZ HOE MARKETING PTE LTD
BLK 9008 TAMPINES ST 93
#03-45
S(528843).

Invoice No : GPLIN0001795
Invoice Date : 24/2/2020
Due Date : 24/2/2020
VHA No : 2053
Referral ID : G031

Description :	Amount
Rental for 8 Day/s @ \$130 per Day \$	1,040.00

Vehicle No : SJQ689E

Vehicle Description : Toyota Wish 1.8 A

Rental Period : 10/01/2020 to 18/01/2020

Total Amount Payable : \$ 1,040.00

GOOD WAY RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875
Tel: 6315 8479 H/P: 9833 0807

GBE 9263 =

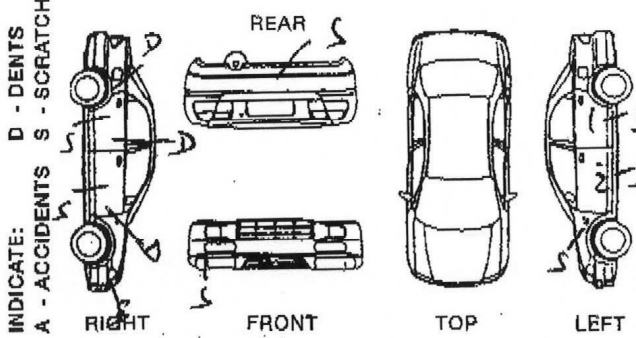
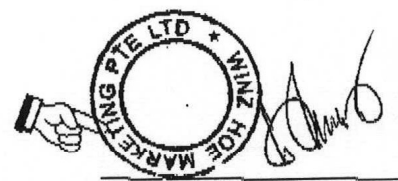
VHA No: 2053

Invoice No: GPLIN 1795

Hirer's Vehicle No:

UEN: 201505120D

VEHICLE RENTAL AGREEMENT


HIRER'S PARTICULARS Name: (as in I/C) <u>WINZ HOE MARKETING PTE LTD</u> NRIC / FIN No: <u>2XXXXX8062</u> Address (Res): <u>Block 9008 Tampines</u> <u>Street 93 #03-45 S'528843</u> Name & Address of Employer: _____ Occupation: _____ Driving Exp: _____ Singapore Driving Licence No: _____ Issue Date: _____ Date of Birth: _____ Tel: (O) _____ (R) _____ HP: _____		Vehicle No: <u>SJQ 689E</u> Replace Veh No: _____ Mileage Out: <u>264861</u> Mileage Out: _____ Make & Model: <u>TOYOTA WISH</u> Auto / Manual Out: Date <u>10/1/2020</u> Time: <u>1250</u> HIRE / PERIOD EXPIRY Time: _____ NON-WAIVER EXCESS=\$ <u>3000</u>	
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) <u>Low TEE WOOD</u> NRIC / FIN No: <u>S 1688254-B</u> Address (Res): <u>Blk 258 A Compassvale</u> <u>ROAD #08-537 S'541258</u> Occupation: _____ Driving Exp: _____ Singapore Driving Licence No: <u>S 1688254-B</u> Issue Date: <u>11-8-1982</u> Date of Birth: <u>12-6-1965</u> Tel: (O) _____ (R) _____ H/P: <u>90012557</u>		CHARGES Daily <u>8</u> @\$ <u>130</u> per day <u>\$1040</u> - Weekly @\$ _____ per week Monthly @\$ _____ per month Hours @\$ _____ per hour Extension @\$ _____ Delivery/Collection Service SUB-TOTAL \$	
VEHICLE CHECK LIST INDICATE: D - DENTS A - ACCIDENTS S - SCRATCHES RIGHT FRONT TOP LEFT 		PETROL LEVEL Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F Fuel Traffic / Parking Fines TOTAL CHARGES \$	
MISSING / FAULTY ACCESSORIES / PARTS REMARKS: _____		Hirer's Signature  Additional Driver's Signature _____	

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 GOOD WAY RENT-A-CAR PTE LTD in connection with this agreement is true.

*IMPORTANT

1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
4. 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.
5. 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.
6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY GOOD WAY RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO GOOD WAY RENT-A-CAR PTE LTD 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	SIGNATURE OF HIRER/DRIVER
18-1 2020	11.00 AM				

Asher Sng (LKKAUTO)

From: Eric Woo <EricWoo@msfirstcapital.com.sg>
Sent: Wednesday, 24 March 2021 3:05 PM
To: Asher Sng (LKKAUTO)
Subject: RE: [MANDATE REQUEST] RE: [PROPOSE LIABILITY] RE: SURVEY ASSESSMENT - D20000311MFSH/1 // EXPRESS SETTLEMENT

Follow Up Flag: Follow up
Flag Status: Flagged

Dear Asher,

You have our mandate to settle as follow:

COR : \$6,950.00
LOR : \$480 - \$800 (\$60 - \$100 x 8days)
LTA : Nil – Subject to proof
To offer : \$7,430.00 - \$7,750.00

Thank you.

Eric Woo
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email:
EricWoo@msfirstcapital.com.sg | Company Regn. No. 195000106C | TEL: 6507 3848
A Member of **MS&AD Insurance Group**

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Under the PDPA, there are various requirements that regulate the processing of your personal data. Please refer to <http://www.msfirstcapital.com.sg> for details of PDPA Personal Data Collection Statement.

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From: Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>
Sent: Friday, 26 February 2021 12:29 PM
To: Merina Chia <MerinaChia@msfirstcapital.com.sg>
Subject: [MANDATE REQUEST] RE: [PROPOSE LIABILITY] RE: SURVEY ASSESSMENT - D20000311MFSH/1 // EXPRESS SETTLEMENT

Your ref : **D20000311MFSH**
Our ref : CC4/FCI20000863/Kea3q2

Dear Sirs,

ACCIDENT INVOLVING SHA 368P (OI) AND GBE 9263Z (TP) ON 10/01/2020

We refer to the above matter.

The accident occurred when our insured rear ended third party vehicle.

Basing on the reports of the circumstance of the accident, we propose to settle third-party claim at 100% liability.

We seek your approval to offer repairer " **GUAN MOTOR WORKS** " at **\$ 7,917.49 (all-in).**

The summary is as follows: -

	Amount Claimed	Amount Revised
1. Cost of Repairs (w/GST)	\$ 11,099.67	\$ 6,950.00
2. Loss of Rental (8days x \$130)	\$ 1,040.00	\$ 960.00 (8days x \$120)
3. LTA Search Fee	\$ 7.49	\$ 7.49
Total	\$ 12,147.16	<u>\$ 7,917.49</u>

Surveyor recommended 8days for repair.

Enclosed here with all the relevant documents for your perusal.

Kindly let us have your approval / instruction.

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

email: ashersng@lkkauto.com | fax: 6741-4108 | did: 6841-6051

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.

From: Merina Chia <MerinaChia@msfirstcapital.com.sg>

Sent: Monday, 24 February 2020 10:45 AM

To: Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Subject: RE: [PROPOSE LIABILITY] RE: SURVEY ASSESSMENT - D20000311MFSH/1 // EXPRESS SETTLEMENT

Dear Asher,

We are agreeable with your proposal on liability.

Thank you.

Best Regards,

Merina Chia (Ms)

Motor Claims Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Tel: 6507 3848 | DID : 6507 3856
| Fax No. : 6507 3849 | Email: merinachia@msfirstcapital.com.sg | Company Regn. No. 195000106C

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From: Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Sent: Thursday, 20 February 2020 12:57 PM

To: Merina Chia <MerinaChia@msfirstcapital.com.sg>

Subject: [PROPOSE LIABILITY] RE: SURVEY ASSESSMENT - D20000311MFSH/1 // EXPRESS SETTLEMENT

Claim No: D20000311MFSH/1

LKK Ref: CC4/FCI20000863/Kea3

Dear Sir/Madam,

ACCIDENT INVOLVING SHA 368P AND GBE 9263Z ON 10/01/2020

We refer to the above matter.

Liability: 100%

Remark: B:27 OID REAR ENDED TP

Kindly let us have your approval on liability.

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

phone: 6841-6051 | email: ashersng@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>

Sent: Friday, 24 January 2020 9:39 AM

To: 'Merina Chia' <MerinaChia@msfirstcapital.com.sg>

Cc: Admin A <admin-a@lkkauto.com>; Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D20000311MFSH/1 // EXPRESS SETTLEMENT

YOUR REF: D20000311MFSH

LKK REF: CC4/FCI20000863/Kea3

Dear Sir / Madam,

We refer to the above matter.

We had inspected TP vehicle GBE 9263Z on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:

- TP estimated cost of repair
- Preliminary advice

Please take note that the case handler in-charge is Asher and she can be contacted at DID: 6841 6051.

To check availability of the case handler, you may contact the undersigned.

“Wishing you a Happy and Prosperous Lunar New Year”



Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>

Sent: Tuesday, 14 January, 2020 10:41 AM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Merina Chia' <MerinaChia@msfirstcapital.com.sg>; Admin A <admin-a@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D20000311MFSH/1

Dear Sir /Mdm,

Thank you for the assignment.

“Wishing you a Happy and Prosperous Lunar New Year”



Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]

Sent: Monday, 13 January 2020 5:04 PM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Merina Chia <MerinaChia@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D20000311MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards,

Admin Team

Claim Workflow System

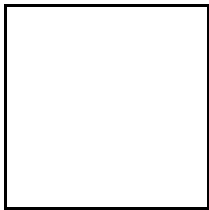
Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849

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