

Autolution Industrial Pte Ltd
Tan Chong Moror Sales Fre Ltd's Authorised Dealer
19 Ubi Road 4
Singapore 408623
Tel (65) 64999666 167038680
Fax: 165/168467483

15/6(2020 DATE:

YOUR REF:	020005	1 MFSH	-	Busins	ess Reg. No.: 19	9500871W
OUR REF:	INS/IC/H/0037 /20	Maria Company	-			
The Motor Clai	ms Department		= M/ MS FIRST (	CAPITAL INSURANCE LTD		
ATTENTION TO	CLAIMS OFFICER:		MOTOR	CLAIM MANAGER		
Dear Sir/ Mada	ım,	-9	Y			
Accident Involv	ving: MY CLIENT VI	HICLE SLE 5	616 AND AG	AINST YOUR INSURED VEHICLE	SHC 381	9 A
Accident Date:	Particular de la companya del la companya de la com	181	12020	TIME 22 = 05		
Place and time	of accident:	Ang Mo	KiO A	re 2 towards	Serdng	00 n
RE: Direct Settl	ement for the Vehicle Number.	U	SLE!	56167	0	
On behalf of th	e owner of Motor Vehicle No.		SLES	which was in	ivolved	
in the captione	d accident			,		
The Vehicle wa	s surveyed by your appointed so	uveyor at AUTOLU	TION INDUST	RIAL PTE LTD 19 UBI ROAD 4 SII	NGAPORE 40862	3
and I based my	claims on his recommendation	for	sgD \$ 430	8-19 being the repair cost ar	nd period of repa	ir for
4	days. (Strictly on a W	ithout Prejudice B	asis)	Care Drug A		
As the accident	was cause by the negligent act	of your insured		SAC3819A lam subm	nitting this claim	for your
consideration						29 Ct 10
COST REPAIR	) i		Ca		SGD\$	3180.19
COST OF LESS	4	DAYS (S) SGD\$	80	/DAY	SGD \$	320
	authorization letter					
GIA REPORT FE	ES (SGD\$ 12.00 FOR SEARCH FE	E & SGD\$ 15.00 F	OR EACH		SGD \$	
REPORT FEE						
LTA SEARCH /SI					SGD \$	Marian Marian Marian Marian
COST OF CAR R	ENTAL	DAY(S) SGD \$		-	SGD\$	
					SGD \$	
	_					1,2 - 6 ,0
TOTAL AMOUN	I				SGD\$	4308.19
We enclose her	ewith the following documents	to support my clai	me			
We enclose her	ewith the following documents	to support my clai	1113,			
Α.	AUTHORIZATION LETTER		E.	FINAL REPAIR BILL (S)		
	LTA SEARCH		F.	GIA REPORT (S) RESULT		
C.	INSURANCE CERTIFICATE ETC.		G.	LETTER OF DEMAND		
D.	CAR RENTAL INVOICE					
Kindly look into	this matter and let me hear fro	m you on the settle	ement of the o	owner's		
claims as soon a	s possible. Thank you .					

Yours Faithfully,

Hamzah Bin Sa'ad Service Supervisor

Tel 67038690 HP: 96450079

TAN CHONG





### LETTER OF AUTHORITY AND INDEMNITY

		Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623
		Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
1	d	Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623

Type of Claim:

✓ Third Party (Direct Settlement)

□ Own Damage (Recovery Claim)

□ TC Autoclinic Pte Ltd, 25, Leng kee Road, Singapore 159097

□ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

ACCID	ENT INVOLVING VEHICLE REC	SISTRATION	No.	STE291	167	AND	SHC3819A
ON _	18/1/2020	AT AN	4 MO	EIO NE	2 TOWARDS	SERANGOOM	
	I, the owner of vehicle no.	2 LE 5 61 67	he	reby instruct	you and autho	orise you to act for me	e with respect to the following: -
	(a) To submit my claims for	(a) To submit my claims for all loses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.					
	(b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.						
	(b) To settling my claim as	they deem fi	t, inclu	ding settling	the matter or	basis of my contribu	itory negligence if any.

- (d) To sign discharge voucher on my behalf.
- 2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
- 3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
- 4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
- 5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
- 6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
- 7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
- 8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
- 9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
- 10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
- 11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
  - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
  - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop		
Name HOE WA	N SIN	Company Name Autolution Industrial	Pte. Ud	
Address 24 Millside	Dive #02-02	Claim Officer's Name Houndah Sand		
Telephone No 866880	50.	Telephone No 96450079	INDUST	
Date 2011/2020	Email horwansin ()	Date 20 1 2020	ST 72	
Company Stamp · Authorized Signature g mail *		Claim Officer Signature	379	
[For Co Regn Vehicle]	weld		* OF	



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

# DISCHARGE RECEIPT

CLAIM REFERENCE

D20000561MFSH/1

ACCIDENT DATE

18/01/2020

ACCIDENT LOCATION

ANG MO KIO AVE 3 TOWARDS CTE

INSURED

COMFORT TRANSPORTATION PTE LTD

INSURED DRIVER

LEE THYE HONG

**INSURED VEHICLE** 

SHC3819A

**INVOLVED PARTY** 

**SLE5616Y** 

SETTLEMENT SUM

\$4,228.19

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: HOE WAN SIN

Signature and Date:

03/9/2020

WITNESS : HAMZAH SAAD

A Member of MS&AD INSURANCE GROUP



In Association with Tan Chong Motor Sales Pte Ltd 19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483 Business Reg. No.: 199500871W GST Reg. No.: M2-8920338-9



TAX INVOICE

M2 - 8920338 - 9GST REG:

INVOICE NO.

MS FIRST CAPITAL INSURANCE LIMITED INVOICE DATE

**TERMS** 

W32148295 16-JUN-2020

**ADDRESS** 

NAME

CREDIT

36 ROBINSON ROAD TELEPHONE: #16-01 CITY HOUSE S(068877) DATE REC'D

02-APR-2020

: 65073848

SA/SE JOB NO

HAMZAH

ENGINE NO : BDTARCZB17EWA----A

MILEAGE

HG822915

CHASSIS NO : HR16990409B

YOUR REFERENCE:

062285

VEHICLE NO: MNTBBAB17Z0027425

SLE5616Y

D20000561MFSH

TENS	JOB DESCRIPTION Credit terms	TRUCMA 0
7 Marie tem	SUNDRIES Qty:1 @ \$20.00 each (Special Nett Item) SUBTOTAL :	20.00
1	REMARKS DIRECT SETTLEMENT.	A CONTROL OF THE CONT
	Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED Policy No: * Claim Type: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA: 18-JAN-2020 Our Ref: INS/IC/H/0037/20 Surveyor: M/S LKK ENGINEERING & MANAGEMENT SERVICES	bitisetti on tio or operation of the second
the year	The control of the co	of Raide (20/2) In a shadow and
	The control of the annual state of the control of the PCMS, shall be without prejudice to any optite united powers only never the control of the PCMS, shall be without prejudice to any optite united powers of the control of the powers of the control of the cont	inco-ell to the and a paying a large and and a paying a large and a paying a large and a l
	DABOUR  RAPA  STREET  CONICS means (including internal e-mail) shall be addressed to at the addressed to addressed to at the addressed to at the addressed to at the a	1688.00 2039.28 3727.28
stali ivra	### TOTAL  ###################################	3727.28 260.91 3988.19

(NB : NC=No Charge; P=Included in Package; W=Warranty; G=Goodwill)

THREE THOUSAND NINE HUNDRED EIGHTY DOLLARS:

EIGHT AND CENTS NINETEEN ONLY.

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

**VEHICLE NO:** 

F(E6EA0E6BY2020

16:34:07

SLE5616Y

(HG822915/W32148295)

MS FIRST CAPITAL INSURANCE LIMITED

NAME:



NAME

**ADDRESS** 

MODEL

## AUTOLUTION INDUSTRIAL PTE LTD

MS FIRST CAPITAL INSURANCE LIMITED

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



TAX INVOICE

GST REG: M2-8920338-9

INVOICE NO.

W32148295 INVOICE DATE

**TERMS** 

16-JUN-2020

DATE REC'D

CREDIT

SA/SE

02-APR-2020

JOB NO

HAMZAH

**MILEAGE** 

HG822915

062285

YOUR REFERENCE:

D20000561MFSH

VEHICLE NO: MNTBBAB17Z0027425 SLE5616V

ENGINE NO : BDTARCZB17EWA----A

: 65073848

CHASSIS NO: HR16990409B

36 ROBINSON ROAD

TELEPHONE: #16-01 CITY HOUSE S(068877)

	SLE5616Y	
ITEMS	JOB DESCRIPTION Credit terms	THUCMA OF
	aupring of the exercise of the exercise of the first of the exercise of the ex	
	LABOUR	o sanda a a sandra d
1	LABOUR CHARGES TO REPAIR RH FRONT DOOR, RENEW RH	780.00
	FRONT FENDER AND FRONT BUMPER.	
2	CHARGES TO SPRAY PAINTING SAME.	750.00
3	RENEW DAMAGED HEADLAMP AND FOCUS.	48.00
4	RENEW RH FRONT WHEEL RIM AND TYRE INCLUDE WHEEL	15.00
	BALANCING. difeeses of antiling of sent reques to droppe and the manufacture of the sent requestions o	Months and
5	CHECK AND ADJUST WHEEL ALIGNMENT.	95.00
	SUBTOTAL :	1688.00
	the control of the co	- Mallion Month and all
	PARTS	and afucing a
1	CLIP FRONT BUMPER @ \$1.30 EACH	6.24
militare medites	Qty:6 @ \$1.30 each (Disc:20.00% After Disc:\$6.24each)	died ana
2	HEADLAMP RHow 1964 of 3do land one good point you are never a reference on your sales.	652.00
	Qty:1 @ \$815.00 each (Disc:20.00% After Disc:\$652.00each)	not be flable for
3	WHEEL RIM FRONT RH 100 2002h Instructed O and to bid a larger of at all wheel and a larger of a larger	280.00
	Otv:1 @ \$280.00 each (Special Nett Item)	del advantes a
fsire 4	FRONT BUMPER FASCIA	462.32
	Qty:1 @ \$577.90 each (Disc:20.00% After Disc:\$462.32each)	SMST loweres
5	FRT BUMPER SIDE BRKT RH	16.48
	Qty:1 @ \$20.60 each (Disc:20.00% After Disc:\$16.48each)	m. New Yillo man ye
6	FENDER-FRONT RH	602.24
	Qty:1 @ \$752.80 each (Disc:20.00% After Disc:\$602.24each)	atheir ender a
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		Maria Managara

DOLLARS:

WORKSHOP MANAGER

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**CUSTOMER** 

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

**VEHICLE NO:** 

RELEASE BY

# Khanchna (LKK Auto)

From: Jason Tea < JasonTea@msfirstcapital.com.sq>

**Sent:** 27 July 2020 4:14 PM **To:** Khanchna (LKK Auto)

Cc: Admin A

Subject: ES-LKK MANDATE GIVEN - D20000561MFSH/1 // EXPRESS SETTLEMENT VIA LKK

Dear Khanchna,

We refer to your proposal to settle @ \$4,228.19 to 4,308.19 (all in).

We agree please hold on for 2 weeks before settlement as we have just send the LOD to our Insured & ID.

Regards Jason Tea Motor Claims

Personal Data Protection Act 2012 ("PDPA"):

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

Confidentiality Notice: This e-mail is confidential. It may also be legally privileged. If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it. If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

With effect from 15 January 2018, we will be known as **MS First Capital Insurance Limited**. Our new website will be **www.msfirstcapital.com.sg**.

As a response to the COVID19 outbreak, we are observing staggered working hours and some of us are on Work From Home arrangement.

However, our office is open and we are actively working to support our clients and partners. We have access to e-mails and will work to respond in a timely manner.

We appreciate your understanding on this matter.

Our Motor Claim email address is: motorclaims@msfirstcapital.com.sg

Thank you and have a nice day.

From: Khanchna (LKK Auto) < khanchna@lkkauto.com>

Sent: Monday, 27 July 2020 2:34 pm

To: Jason Tea < JasonTea@msfirstcapital.com.sg>

Cc: Admin A <admin-a@lkkauto.com>

Subject: RE: MANDATE REQUEST ON QUANTUM AND LIABILITY - D20000561MFSH/1 // EXPRESS SETTLEMENT VIA LKK

YOUR REF: D20000561MFSH LKK REF: CC4/FCI20001672/Hka3 Dear Mr. Jason,

We refer to the above matter. Please ignore the previous email sent on 27/7/2020.

Liability: 100% - BOLA 15

Remarks: Insured driver filter lane

We seek your approval to offer third party repairer "AUTOLUTION INDUSTRIAL PTE LTD" at \$4,228.19 ~ 4,308.19 (all in).

The summary is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair (W/GST)	\$ 4,357.34	\$ 3,988.19
2. Loss of Use( 4 days x \$80)	\$ 320.00	\$ 240.00 ~ 320.00 ( 4 days x \$60 ~ \$80)
Total	\$ 4,677.34	\$ 4,228.19 ~ 4,308.19

Surveyor recommended 4 days for repair

Enclosed herewith all the documents for your perusal.

### Kindly let us have your approval/instruction.

Thank you.

Best Regards,

Khanchna | Case Handler LKK Auto Consultants Pte Ltd

DID: **6841 2360** | email: <u>Khanchna@lkkauto.com</u> Fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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

Sent: Sunday, 9 February 2020 10:15 AM

To: 'Jason Tea' < <u>JasonTea@msfirstcapital.com.sg</u>>

Cc: Admin A <admin-a@lkkauto.com>; Khanchna (LKK Auto) <a href="mailto:khanchna@lkkauto.com">khanchna@lkkauto.com</a> Subject: RE: SURVEY ASSESSMENT - D20000561MFSH/1 // EXPRESS SETTLEMENT

YOUR REF: D20000561MFSH LKK REF: CC4/FCI20001672/Hka3

Dear Sir / Madam,

We refer to the above matter.

We had inspected TP vehicle SLE 5616Y 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 Khanchna and she can be contacted at DID: 6841 2360.

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

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)

**Sent:** Thursday, 30 January 2020 11:06 AM **To:** 'CWS Motor Claims'; assignments

Cc: 'Jason Tea'; Admin A

Subject: RE: SURVEY ASSESSMENT - D20000561MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that vehicle is not in the workshop, repairer will arrange.





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:** Thursday, 30 January 2020 9:13 AM **To:** ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims; Jason Tea

Subject: PRI: SURVEY ASSESSMENT - D20000561MFSH/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

PS: This is a system generated mail. Please do not reply to this mail.



This email has been checked for viruses by AVG antivirus software. www.avg.com