

**Autolution Industrial Pte Ltd**

Tan Chong Motor Sales Pte Ltd's Authorised Dealer
 19 Ubi Road 4
 Singapore 408623
 Tel: 651 64909666 / 67038630
 Fax: 651 68467463
 Business Reg. No: 199500671W

DATE: 15/6/2020
 YOUR REF: 020000561 MFSH
 OUR REF: INS/IC/H/0037/20

The Motor Claims Department M/ MS FIRST CAPITAL INSURANCE LTD
 ATTENTION TO CLAIMS OFFICER : MOTOR CLAIM MANAGER

Dear Sir/ Madam,

Accident Involving: MY CLIENT VEHICLE SLG 5616Y AND AGAINST YOUR INSURED VEHICLE SHC 3819A

Accident Date: 18/1/2020 TIME 22:05

Place and time of accident: Ang Mo Kio Ave 2 towards Serangoon

RE: Direct Settlement for the Vehicle Number. SLG 5616Y

On behalf of the owner of Motor Vehicle No. SLG 5616Y, which was involved
 in the captioned accident

The Vehicle was surveyed by your appointed surveyor at AUTOLUTION INDUSTRIAL PTE LTD 19 UBI ROAD 4 SINGAPORE 408623

and I based my claims on his recommendation for SGD \$ 4308.19 being the repair cost and period of repair for
4 days. (Strictly on a Without Prejudice Basis)

As the accident was caused by the negligent act of your insured SHC 3819A I am submitting this claim for your
 consideration

COST REPAIR		SGD \$	<u>3988.19</u>
COST OF LESS	<u>4</u> DAYS (S) SGD \$ <u>80</u> /DAY	SGD \$	<u>320</u>

(Please refer to authorization letter)

GIA REPORT FEES (SGD\$ 12.00 FOR SEARCH FEE & SGD\$ 15.00 FOR EACH	SGD \$	<u> </u>
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REPORT FEE	SGD \$	<u> </u>
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LTA SEARCH /SURVEY FEE	SGD \$	<u> </u>
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COST OF CAR RENTAL	DAY(S) SGD \$	SGD \$	<u> </u>
		SGD \$	<u> </u>

TOTAL AMOUNT	SGD \$	<u>4308.19</u>
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We enclose herewith the following documents to support my claims,

- | | |
|-------------------------------|--------------------------|
| A. AUTHORIZATION LETTER | E. FINAL REPAIR BILL (S) |
| B. 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 from you on the settlement of the owner's
 claims as soon as possible. Thank you .

Yours Faithfully,

Hamzah Bin Sa'ad
 Service Supervisor

Tel: 67038690 HP: 96450079

TAN CHONG
 INTERNATIONAL



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
☒ Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623
☐ TC Autoclinic Pte Ltd, 25, Leng kee Road, Singapore 159097
☐ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

Type of Claim:

- ☒ Third Party (Direct Settlement)
☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SLE5616Y AND SHC3819A
 ON 18/1/2020 AT ANG MO KIO AVE 2 TOWARDS SERANGOON

1. I, the owner of vehicle no. SLE5616Y hereby instruct you and authorise you to act for me with respect to the following: -
 - (a) To submit my claims for all losses 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.
 - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
 - (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 <u>HOE WAN SIN</u>		Company Name <u>Autolution Industrial Pte. Ltd</u>	
Address <u>24 Hillside Drive #02-02</u>		Claim Officer's Name <u>Hansh Sied</u>	
Telephone No <u>86682050</u>		Telephone No <u>96450079</u>	
Date <u>20/1/2020</u>	Email <u>hoewansin@gmail.com</u>	Date <u>20/1/2020</u>	
Company Stamp [For Co Regn Vehicle]	Authorized Signature <u>[Signature]</u>	Claim Officer Signature <u>[Signature]</u>	

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

Signature and Date :


3/9/2020

AUTOLUTION INDUSTRIAL PTE LTD

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

NAME : MS FIRST CAPITAL INSURANCE LIMITED
ADDRESS : 36 ROBINSON ROAD
TELEPHONE : #16-01 CITY HOUSE S(068877)
MODEL : 65073848
ENGINE NO : BDTARCZB17EWA----A
CHASSIS NO : HR16990409B
VEHICLE NO : MNTBBAB17Z0027425
SLE5616Y

INVOICE NO. :
INVOICE DATE : W32148295
TERMS : 16-JUN-2020
DATE REC'D : CREDIT
SA / SE : 02-APR-2020
JOB NO : HAMZAH
MILEAGE : HG822915
YOUR REFERENCE : 062285
D20000561MFSH

ITEMS	JOB DESCRIPTION	Credit terms	30	AMOUNT
7	SUNDRIES			20.00
	Qty:1 @ \$20.00 each (Special Nett Item)			
	SUBTOTAL :			2039.28
1	REMARKS			
	DIRECT SETTLEMENT.			
	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			
	LABOUR :			1688.00
	PARTS :			2039.28
	SUBTOTAL :			3727.28
	TOTAL :			3727.28
	GST(7%) :			260.91
	AMOUNT DUE :			3988.19

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

DOLLARS: THREE THOUSAND NINE HUNDRED EIGHTY
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 : SLE5616Y (HG822915/W32148295)

REC-015/2020

16:34:07

NAME: MS FIRST CAPITAL INSURANCE LIMITED



www.tanchong.com

AUTOLUTION INDUSTRIAL PTE LTD

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
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INVOICE DATE : W32148295
TERMS : 16-JUN-2020
DATE REC'D : CREDIT
SA/SE : 02-APR-2020
JOB NO : HAMZAH
MILEAGE : HG822915
YOUR REFERENCE : 062285
D20000561MFSH

ITEMS	JOB DESCRIPTION	Credit terms 30	AMOUNT
	LABOUR		
1	LABOUR CHARGES TO REPAIR RH FRONT DOOR, RENEW RH FRONT FENDER AND FRONT BUMPER.		780.00
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 BALANCING.		15.00
5	CHECK AND ADJUST WHEEL ALIGNMENT.		95.00
	SUBTOTAL :		1688.00
	PARTS		
1	CLIP FRONT BUMPER @ \$1.30 EACH Qty:6 @ \$1.30 each (Disc:20.00% After Disc:\$6.24each)		6.24
2	HEADLAMP RH Qty:1 @ \$815.00 each (Disc:20.00% After Disc:\$652.00each)		652.00
3	WHEEL RIM FRONT RH Qty:1 @ \$280.00 each (Special Nett Item)		280.00
4	FRONT BUMPER FASCIA Qty:1 @ \$577.90 each (Disc:20.00% After Disc:\$462.32each)		462.32
5	FRT BUMPER SIDE BRKT RH Qty:1 @ \$20.60 each (Disc:20.00% After Disc:\$16.48each)		16.48
6	FENDER-FRONT RH Qty:1 @ \$752.80 each (Disc:20.00% After Disc:\$602.24each)		602.24

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.sg>
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 <http://www.msfirstcapital.com.sg> 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	<u>\$ 4,228.19 ~ 4,308.19</u>

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: Khanchna@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: Sunday, 9 February 2020 10:15 AM

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

Cc: Admin A <admin-a@lkkauto.com>; Khanchna (LKK Auto) <khanchna@lkkauto.com>

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.

"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: 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