

JOB SUMMARY REPORT

ACE AUTOLUTION PTE LTD
13 ,KAKI BUKIT ROAD 4
BARTLEY BIZ CENTRE #03-29,
SINGAPORE 417807.

BILLING

BILL to -

Vehicle NO : SMM 8334 L
Repair Type : **LUMPSUM**
Repair As Per Surveyor Report: \$ 3,200.00
Material Cost :
Less Repair Items/Adjustment
Special Nett Items :
Total Repair Cost : \$ **3,200.00**

Final Repair Cost : \$ 3,200.00

Others

Search Fees (LTA) \$ -
Surveyor Fees \$ -
Loss of Rental \$ 720.00 6 days (include Sat,Sun&waiting PRI)

Loss Of Use \$ -

Purchase 3rd party report \$ 29.00

Total Amount Bill : \$ 3,949.00

Approved By : QUEK YONG PHENG
Date : 4/9/2020

Signature:



LETTER OF AUTHORISATION

TO:MR / MRS

RE:ACCIDENT INVOLVING VEHICLE

NOS: SMM8334L & SH7942T ALONG
Bik 339 Ang Mo Kio Avenue 1 ON 23 February 2020 @ 12:20
open carpark

I/WE Hitachi Capital Asia Pacific Pte Ltd NRIC / Passport No: 199400399N
Owner of vehicle no. SMM8334L hereby authorize you to commence
repair to the said vehicle forthwith.

- 1 I/We hereby irrevocably authorize you to demand claims settle receive whatever amount settled/payable by the insurance and /of third party or to ~~commence legal proceeding, if necessary,~~ in my name for the costs of repair and loss of use,etc and you ~~appointing any Solicitor to act for me in~~ respect for the accident claims and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claims to you and ~~my/our Solicitor(to be appointed by you on my/our behalf) shall accept this as my/our irrevocable~~ authorization to pay the amount compensated direct to you after deduction of their costs on a ~~Solicitor & Client basis. I/We undertake to co/operate fully with you and my/our Solicitors to see the~~ claims to as successful conclusion.
- 2 I/We also irrevocably authorize you to sign all discharge vouchers/indemnity forms and all necessary ~~papers in connection with the above claims in my/our absence. I/We irrevocable authorize you to~~ appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third ~~party/own insurer's claim.~~
- 3 I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the ~~third party's insurance company communicate with me/us directly, orally and in writing and I/We~~ further undertake not to accept any monies or offer of settlement from the third party's insurers ~~without first communicating with you and obtaining you consent.~~
- 4 My vehicle is repaired by the repairer on my own will without any inducement, threat or promise.
- 5 Upon settlement of the third party claims and in case the settlement monies was sent to me/us by the third party's insurance. I/We undertake to pay you and ~~my / our Solicitor~~ the cost of repairs settled and related expenses and disbursement incurred.

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

KELVIN CHANG (MR)
Manager
Vehicle Solutions
Total Vehicle Solutions
Owner's Signature

Witness Signature / Name

(Company's Stamp if applicable)

PAYMENT AUTHORISATION FORM

Date: _____

Attn: Motor Claims Department

Dear Sir/Mdm

ACCIDENT ON 23 February 2020 @ 12:30

INVOLVING VEHICLE NOS: SMM8334L & SH7942T

ALONG BK 339 Ang Mo Kio Ave 1 open Carpark.

I/We (Name) Hitachi Capital Asia Pacific Pte Ltd, NRIC/Passport No: 199400399N,

The registered owner/driver of vehicle regn.no. SMM8334L which was involved
In the above accident with your insured motor vehicle reg.no. SH7942T.

I/We also hereby authorize that any payment due to me/us from the foresaid claim to be paid
to M/S ACE AUTOLUTION PTE LTD.

I/We hereby indemnify M/S ACE AUTOLUTION PTE LTD against all claims and /or damages
which may arise from all action taken for and on my/our behalf.

I/We hereby affirmed that above-mentioned statement to be true and correct.

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

Yours faithfully,
.....
KELVIN CHANG (MR)
Manager
Vehicle Solutions
Total Vehicle Solutions
Owner's Signature

(Company's stamp if applicable)



Co. Reg. No. 190703792k | GST Reg. No. M2-0078806-X
64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
Office (65) 63476100 Email insure@iil.com.sg
Fax (65) 62244174 Website www.iil.com.sg

my execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims arising from the same accident.

**ACE AUTOLUTION PTE LTD**

13 Kaki Bukit Road 4 Bartley Biz Centre #03-29

Singapore 417807

Tel:6702 4282 Fax:6702 4202

Business Registratrion No. 201403869W

Invoice To
INDIA INTERNATIONAL INSURANCE PTE LTD

Invoice	
Date	18/11/2020
Number	S 200253
Vehicle No.	SMM 8334 L
Car Model	HONDA VEZEL

ITEM	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT (\$\$)
OTHER	<u>FINALISATION AMOUNT DETAILS AS BELOW :</u>			
	GLOBAL SUM			
	COST OF REPAIR			
	LOSS OF RENTAL			
	PURCHASE 3RD PARTY REPORT			
OTHER	TOTAL AMOUNT FOR ABOVE ITEM	1	\$ 3,520.00	\$ 3,520.00
		TOTAL \$ 3,520.00		



ISSUED BY

ECO AUTOMOBILE LEASING

13 Kaki Bukit Road 4 #03-29
Bartley Biz Centre
S417807
T: 6384 7515 F: 6702 4202
E: ecoautoleasing@gmail.com
Co. Reg No. 53354814D

**INVOICE****HIRER DETAIL**

Name : Lim Tong Khng Eric
Address : Blk 229 Serangoon Ave 4
#02-35
Singapore 1955

Tel : 9069 0948
Fax : -

Attention: Mr Eric

Registration No. : 53354814D
Invoice No. : ECO/20/015
Date : 16/7/2020
Payment Term : COD

5mm8334L

S/N	DESCRIPTION	No. of Days/Wks/Mths	Per Days/Wks/Mths Rental Charges \$(SGD)	Total \$(SGD)
1	Rental of Hyundai Elantra - Car Plate No. : SMF 7302Y - Period : 10/3/2020 - 16/3/2020	6 Days	\$120.00	\$720.00
	Sub Total \$ (SGD)			\$ 720.00
	Grand Total \$ (SGD)			\$ 720.00

All Cheque are to be crossed and made payable to ECO AUTOMOBILE LEASING.

THANK YOU FOR YOUR PAYMENT

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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-20-036317
Date of Request: 02/03/2020

Your Ref No: Online Purchase

Car Times Autolution Pte Ltd
160 Sin Ming Drive #02-04
AutoCity
Singapore 575722

Dear Sir/Madam,

Date of Accident: 24/02/2020
Vehicle No: SMM8334L
Place of Accident: BLK 339 ANG MO KIO AVE 1 OPEN CARPARK
Involving Vehicle No: SH/942T

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\$)
SH7942T	BLK 339 ANG MO KIO AVE 1 OPEN CARPARK	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.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

3/2/2020

Invoice



**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-20-036304
Date of Request: 02/03/2020

Your Ref No: Online Purchase

Car Times Autolution Pte Ltd
160 Sin Ming Drive #02-04
AutoCity
Singapore 575722

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 24/02/2020
Place of Accident: 339 AMK AVE 1 OPEN CARPARK
Client Vehicle No: SMM8334L

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