

Letter Of Claim For Uninsured Loss

Insurance Company: _____

INDIA

Date: _____

21/6/2020

Address : _____

Attention : _____

Claims Department – Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number _____

SLK 4811A

&

GBH 206H

at _____

54 MARINE TERRACE CARPARK

on _____

02/03/2020

I am the owner of Vehicle Number _____

SLK 4811A

which was involved with the

accident as mentioned above.

As the accident was solely caused by your insured vehicle, bearing registration number GBH 206H, I hereby submit my claim against your company for the uninsured loss which are as follows:

Excess payment for OD claim

Loss of usage (S\$/day) for 6 days

K\$50

Car rental as per invoice attached

Search fee

Others

Cost of repair

Total claim amount

\$

\$

\$

\$

\$

\$

\$

250.00

7.45

4581.50

4838.95

Enclosed please find copies of GIA report, invoices and certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof, or alternatively let me have the full and final settlement for all uninsured loss which amounted to \$ 4838.95, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely

(Owner of motor vehicle)

Name :

Goh Lu Si

Address :

58 Bayshore Road

Telephone :

#02-01 98191018

S(469981)

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. SLK 4811A **AND** GBH 2064
ON 03/03/2020 **AT** 54 MARINE TERRACE CARPARK

1. I, the owner of vehicle no. SLK 4811A 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>Goh Lusi</u>		Company Name <u>TAN CHONG MOTOR SALES PTE LTD</u>	
Address <u>58 Bayshore Road</u>		Claim Officer's Name <u>_____</u>	
<u>#02-01, Spore 469981</u>		Telephone No <u>98191018</u>	
Telephone No <u>98191018</u>	Date <u>4/3/2020</u>	Date <u>4/3/2020</u>	
Company Stamp [For Co Regn Vehicle]	Authorized Signature <u>[Signature]</u>	Claim Officer Signature <u>[Signature]</u>	

> Back to OneMotoring



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

Print Date/Time : 04 Mar 2020 / 14:02:49

Receipt Date/Time : 04 Mar 2020 / 14:02:49

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200304-001891

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	Result of Insurance Enquiry - GBH206H As at 03 Mar 2020/17:55:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - GBH206H Enquiry Fee 20200304140144721765	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	xxxxxxxxxxxx9825		Credit Card: Visa/MasterCard	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

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.

> [Back to OneMotoring](#)

Enquire Vehicle's Insurance Particulars

Thank You!

The insurance details of the vehicle you enquired can be found below. If you have entered a valid email address, a copy would have been sent to you.

Vehicle No.	Incident Date/Time	Insurance Company Name
GBH206H	03 Mar 2020 / 17:55:00	INDIA INT'L INS PTE LTD

Save as PDF

OK →

Print



www.tanchong.com

Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
SERVICE CENTRES
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : INDIA INT'L INSURANCE PTE LTD
ADDRESS : 64 CECIL STREET
TELEPHONE : #04-05 IOB BUILDING S(049711)
MODEL : 63476100
ENGINE NO : TDWARDZE12EDAY407Z
CHASSIS NO : HR12214766B
VEHICLE NO : JN1TAAE12Z0972566
SLK4811A

INVOICE NO : W12141810
INVOICE DATE : 31-MAR-2020
TERMS : CREDIT
DATE REC'D : 11-MAR-2020
SA/SE : LAW
JOB NO : BG1082456
MILEAGE : 026527
YOUR REFERENCE : INS/IC/LAW/0078/

ITEMS	JOB DESCRIPTION	AMOUNT
2	TOC:DIRECT SETTLEMENT OUR REF:INS/IC/LAW/0078/2020	
3	SATISFACTION NOTE ATTACHED	
4	SURVEY BY:LKK STEVE ON 05.03.2020 @ 1115HRS RECOMMEND 4 DAYS REPAIR	
5	AUTHORISE BY:GABRIEL WEE (INDIA) ON 11.03.2020 @ 0904HRS	
6	*** OWNER CLAIM LOSS OF USE	
7	* 2 BILL	
8	REPAIR FROM 11.3.2020 - 16.3.2020	
Insurance Co : INDIA INT'L INSURANCE PTE LTD Policy No..... TP-GBH206H Claim Type ..: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA.....: 03-MAR-2020 Our Ref.....: INS/IC/LAW/0078/2020 Surveyor.....: M/S LKK ENGINEERING & MANAGEMENT SERVICES		
LABOUR :		2470.00
PARTS :		1811.78
SUBTOTAL :		4281.78
TOTAL :		4281.78
GST (7%) :		299.72
AMOUNT DUE :		4581.50

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)
DOLLARS: FOUR THOUSAND FIVE HUNDRED EIGHTY
ONE AND CENTS FIFTY 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



www.tanchong.com

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MILEAGE : 026527
YOUR REFERENCE : INS/IC/LAW/0078/

ITEMS	JOB DESCRIPTION	AMOUNT
4	GASKET HANDLE DOOR LH FRONT Qty:1 @ \$4.90 each (Special Nett Item)	4.90
5	TAPE-FR DOOR,LH Qty:1 @ \$19.50 each (Disc:20.00% After Disc:\$15.60each)	15.60
6	TAPE-FR DOOR,LH Qty:1 @ \$19.50 each (Disc:20.00% After Disc:\$15.60each)	15.60
7	ESCUT-OUTSIDE HANDLE LH FRONT Qty:1 @ \$19.50 each (Disc:20.00% After Disc:\$15.60each)	15.60
8	TAPE-RR DOOR,LH Qty:1 @ \$19.50 each (Disc:20.00% After Disc:\$15.60each)	15.60
9	TAPE-RR DOOR,LH Qty:1 @ \$25.50 each (Disc:20.00% After Disc:\$20.40each)	20.40
10	DOOR-FRONT LH Qty:1 @ \$919.60 each (Disc:20.00% After Disc:\$735.68each)	735.68
11	DOOR-REAR LH Qty:1 @ \$919.60 each (Disc:20.00% After Disc:\$735.68each)	735.68
12	SUNDRIES Qty:1 @ \$20.00 each (Special Nett Item)	20.00
	SUBTOTAL	1811.78
1	REMARKS AIG CLAIM AGAINST INDIA INSURANCE DOA:03.03.2020	

DOLLARS:

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MILEAGE : 026527
YOUR REFERENCE : INS/IC/LAW/0078/2

ITEMS	JOB DESCRIPTION	AMOUNT
	LABOUR	
1	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL	120.00
2	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA \$100/PANEL X 03	200.00
3	REPAIR LH REAR FENDER, LH CENTER PILLAR AND RENEW LH FRONT/REAR DOOR (REPAIR REAR BUMPER)	975.00
4	S/PAINT LH REAR FENDER, LH CENTER PILLAR, LH FRONT/REAR DOOR AND REAR BUMPER	1000.00
5	TRANSFER LH FRONT/REAR DOOR MECHNICAL PARTS TO NEW DOOR \$60/DOOR X 02	120.00
6	R/I REVERSE SENSOR TO ASSIST REPAIR - SUPPLEMENTARY	55.00
	SUBTOTAL :	2470.00
	PARTS	
1	LOCK & REMOTE C LH FRONT Qty:1 @ \$189.50 each (Disc:20.00% After Disc:\$151.60each)	151.60
2	GRIP-OUTSIDE LH FRONT Qty:1 @ \$98.40 each (Disc:20.00% After Disc:\$78.72each)	78.72
3	GASKET HANDLE OUTSIDE LH FRONT Qty:1 @ \$2.40 each (Special Nett Item)	2.40

DOLLARS:

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CUSTOMER

SATISFACTORY NOTE

TAN CHONG MOTOR SALES PTE LTD (TCMS)

☒

AUTOLUTION INDUSTRIAL PTE LTD (AIPL)

☐

TC AUTOCLINIC PTE LTD (TCAC)

☐

TYPE OF CLAIM:

DATE:

☐

OWN DAMAGE (OD)

OWNER NAME:

GOH LU SI

☐

OWN DAMAGE (OD) & UNINSURED LOSS
(EXCESS & LOSS OF USAGE) VIA
TCMS / AIPL / TCAC

NRIC NO.:

☐

THIRD PARTY THROUGH
TCMS / AIPL / TCAC

ADDRESS:

☒

THIRD PARTY - OWNER
DIRECT CLAIM AGAINST
THIRD PARTY INSURANCE

☐

WINDSCREEN / GLASS (W/S)

VEHICLE MODEL:

NO72

INSURANCE CO.:

AIPL - INDIA

REGN. NO.:

SLK 4811A

CLAIM NO.:

CHASSIS NO.:

POLICY NO.:

DATE OF ACCIDENT:

03/03/2020

DATE RECEIVED:

11/03/2020

DATE COMPLETED:

16/03/2020

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no further claim whatsoever against the above Company in respect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on*

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD [Non Claim Discount] may also be affected, subject to business policy of respective Insurance Company.

(NAME / SIGNATURE OF INSURED)

FOOTNOTE:

☐

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER
THROUGH TCMS'S LEGAL AID

☐

DEPOSIT PAID BY OWNER

☐

OWNER WILL MAKE CLAIM AGAINST
THIRD PARTY INSURANCE COMPANY

☐

DOCUMENTS RETURNED TO
OWNER

☐

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER UNINSURED LOSS. (EXCESS
PAYMENT & LOSS OF USAGE)

INSURANCE CO. COPY

* Delete When Necessary