

MY CAR CONSULTANT PTE LTD

Address: 53 Ubi Avenue 1, Paya Ubi Industrial Park

BY HAND

#01-33 S(408934)

Email: Admin@mycar.sg

(Company Registration No: 201605878Z)

27th March 2020

Our reference: SLP1482J Your reference: SHA2897R

First Capital Insurance Ltd

6 Raffles Quay Singapore048580

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant

JASON NG CONG RONG

Address

212 PETIR ROAD #04-465 S670212

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on <u>08/03/2020</u> along involving our client's vehicle registration number <u>SLP1482J</u> and vehicle registrations number <u>SHA2897R</u> driven by you/your insured's driver at the material time.

As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair : \$3,350.00

Loss of Rental : \$750.00

GIA Search : \$29.00

LTA Search \$7.49

Total : \$4,136.49

A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Letter Of Authorisation;
- e) Rental Agreement & Official Receipt;
- f) LTA Search Results & Official Receipt;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Yours faithfully,

My Car Consultant

MY CAR CONSULTANT PTE LTD

INVOICE

1-Stop Solution For All Automotive Needs

53 Ubi Avenue 1, Paya Ubi Industrial Park #01-33/02-33 S(408934)

Tel: 9888 8885 / 8866 8832 | Fax: 6925 5219

DATE:

28-Mar-20

INVOICE #

MCC2020-506

FOR: SLP1482J TOYOTA

ALLION

REMARKS:

Bill To:

FIRST CAPITAL INSURANCE LIMITED

| DESCRIPTION | | AMOUNT |
|------------------|-------|------------|
| COSTS OF REPAIRS | \$ | 3,350.00 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| · | | |
| | TOTAL | \$3,350.00 |

Make all cheques payable to MY CAR CONSULTANT PTE LTD

Payment terms: Due upon receipt

THANK YOU FOR YOUR BUSINESS!



Name:

NRIC No:

MY CAR CONSULTANT PTE LTD (Co Reg No. 201605878Z)

53 Ubi Ave 1 #01-33 Paya Ubi Industrial Park S408934.

Tel: +65 9888 8885 / +65 8330 0060

LETTER OF AUTHORIZATION

| In consideration of Repairer Workshop My Car Consultant Pte Ltd, 53 Ubi Ave 1 Paya Ubi Industrial Park #01-33 Singapore 408934 |
|---|
| of NRIC/Passport number/ROC number: |
| I/We hereby instruct and authorize you to claim direct from my/our insurance company on my/our behalf for all monies due to you, I undertake to pay you for the excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my/our behalf in the event that my/our claim is unsuccessful. |
| I/We also irrevocably authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. |
| I/We irrevocably 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. |
| 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 or 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 your consent. |
| In the event the third party's insurers forward me/us the settlement monies, I undertake to pay you the sum claimed in relation to my property damage claim. |
| Dated this (day) of (month) <u>20</u> (year) |
| |
| Owner's signature (Company stamp if applicable) |

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

09 Mar 2020 / 14:22:12

Receipt Date/Time: 09 Mar 2020 / 14:22:12

Tax Invoice/Receipt

Receipt No.: ITNET-00000-200309-002151

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 - SJR7337U | | | | |
| | As at 06 Mar 2020/14:45:00 | | | | |
| | Insurance Co: NTUC INCOME INS CO-OP | LTD | | | |
| | 1 Insurance Enquiry - SJR7337U | | | color transpar | |
| | Enquiry Fee 20200309142051282814 | | 7.00 | 0.49 | 7.49 |
| | 20200309142031262614 | Sub-Total | 7.00 | 0.49 | 7.40 |
| | Decult of Incurance Enquiry, CLM9226T | Sub-Total | 7.00 | 0.49 | 7.49 |
| | Result of Insurance Enquiry - SLM8336T As at 07 Mar 2020/01:05:00 | | | | |
| | Insurance Co: TOKIO MARINE INSURANC | SE SINGADODE LTD | | | |
| | 2 Insurance Enguiry - SLM8336T | DE SINGAPORE LID | | | |
| | Enquiry Fee | | 7.00 | 0.49 | 7.49 |
| | 20200309142051330992 | | | | |
| | | Sub-Total | 7.00 | 0.49 | 7.49 |
| | Result of Insurance Enquiry - SLK4259U | | | | |
| | As at 08 Mar 2020/13:30:00 | | | | |
| | nsurance Co: FWD SINGAPORE PTE. LT | D. | | | |
| | 3 Insurance Enquiry - SLK4259U | | | | |
| | Enquiry Fee | | 7.00 | 0.49 | 7.49 |
| | 20200309142051371524 | 0.1.7.1 | 7.00 | 0.40 | |
| | | Sub-Total | 7.00 | 0.49 | 7.49 |
| | Result of Insurance Enquiry - SHA2897R | | | | |
| | As at 08 Mar 2020/00:00:00 | ANGELIMITED | | | |
| | Insurance Co: MS FIRST CAPITAL INSURA | ANCE LIMITED | | | |
| | 4 Insurance Enquiry - SHA2897R Enquiry Fee | | 7.00 | 0.49 | 7.49 |
| | 20200309142051418815 | | 7.00 | 0.43 | 7.43 |
| | | Sub-Total | 7.00 | 0.49 | 7.49 |
| | Result of Insurance Enquiry - FBE170S | | | | |
| | As at 02 Mar 2020/19:30:00 | | | | |
| | Insurance Co: NTUC INCOME INS CO-OP | LTD | | | |
| | 5 Insurance Enquiry - FBE170S | | | | |
| | Enquiry Fee | | 7.00 | 0.49 | 7.49 |
| | 20200309142051454288 | | | | |
| | | Sub-Total | 7.00 | 0.49 | 7.49 |
| | | Total Before Rounding | 35.00 | 2.45 | 37.45 |



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-20-042912

Date of Request:

12/03/2020

Your Ref No:

WALK IN IU

MY CAR CONSULTANT PTE LTD - UBI

53 UBI AVE 1, #01-33 PAYA UBI INDUSTRIAL PARK

SINGAPORE 408934

Dear Sir/Madam,

Your Vehicle No:

SLP1482J

Date of Accident:

08/03/2020

Place of Accident:

RAFFLES BLVD

Involving Vehicle No: SHA2897R

| 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 [X] Cash [] Cheque



RECORDS MANAGEMENT CENTRE

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-20-042913

Date of Request:

12/03/2020

Your Ref No:

WALK IN IU

MY CAR CONSULTANT PTE LTD - UBI

53 UBI AVE 1, #01-33 PAYA UBI INDUSTRIAL PARK

SINGAPORE 408934

Dear Sir/Madam.

Date of Accident:

08/03/2020

Vehicle No:

SLP1482J

Place of Accident:

RAFFLES BLVD

Involving Vehicle No: SHA2897R

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\$) | |
|------------------|-------------------|---------------|------|--------------|-------|
| SHA2897R | RAFFLES BLVD | 14.0 | 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.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque



OPERATING LEASE AGREEMENT

53 Ubi Avenue 1, Paya Ubi Industrial Park #01-33 S408934 Tel: (+6583300060/(+6598888885)

Email: Admin@mycar.sg (Company Registration No: 201605878Z)

VEHICLE RENTAL AGREEMENT

| HIRER'S PARTICULARS | | ADDITIO | NAL HIRER'S PARTICULARS | |
|--|---|---|-------------------------|--|
| Name (As in NRIC) : | | Name (As in | NRIC): | |
| Jason Ng Cong Rond | j | | | |
| NRIC/Passport No : | | NRIC/Passpo | ort No : | |
| Date of birth : Age : | | Date of birth | n: Age: | |
| | | | _ | |
| Address : | | Address : | | |
| 212 peter Road #04-4 | 65 | | | |
| Mobile No : | | Mobile No : | 9 | |
| | | | | |
| Type of driving license: Local / International | | Type of driving license : Local / International | | |
| VEHICLE DETAIL | S | 1 | | |
| Make & Model : | | Vehicle No : | | |
| BMW 328i | | SKE 4789E | | |
| Vehicle Out Date : | | Vehicle Return Date: しょ Mar 2020 | | |
| Time Out : | | Time Return : | | |
| Daily - 5 Day/s | @ S\$ 150 | Per Day | \$ 750 | |
| Weekly - Week/s | @ \$\$ | Per Week | \$ | |
| Monthly - Month/s | @ \$\$ | Per Month | \$ | |
| Deposit : | | | \$ | |
| Delivery Service : | Photological Photological Control Control | | \$ | |
| chivery bervice. | | | | |
| Others : | | | | |