



**PROGRESSIVE**  
CAR CARE PTE LTD

**Progressive Car Care Pte Ltd**

(Co. Reg. No. 201006949C)

Blk 3022A Ubi Road 1 #01-45/ 46 S408716

T: +65 6741 5336 | F: +65 6741 7208

E: [claims@procarcare.com.sg](mailto:claims@procarcare.com.sg)

W: [www.procarcare.com.sg](http://www.procarcare.com.sg)

08.04.2020

OUR REF : TP 0320-5929

**MS FIRST CAPITAL INSURANCE LIMITED**

36 Robinson Road #16-01

City House

Singapore 068877

**Attn: Motor Claims Department**

Dear Sir,

**ACCIDENT INVOLVING VEHICLE: SLA 4175 E & SHA 4468 H ON 18.03.2020**

We are the authorized repair workshop for the owner of motor vehicle no: **SLA 4175 E**, which was involved in the above captioned accident with your insured vehicle: **SHA 4468 H**. The vehicle owner has requested and authorized us to assist him in presenting the claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

01)	Cost of Repair (incl gst)	\$	2,300.50
02)	Reimbursement - Loss of Rental (5 days x \$100/days)	\$	500.00
		\$	<b>2,800.50</b>

We enclosed herewith the following documents to support the claims:-

- a) Letter of Authorisation / GIA report(s) / Insurance Certificate, etc...
- b) Final Tax Invoice / Car rental No 7618

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

**Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.**

Thank you  
Yours faithfully

Pei Wen

**Progressive Car Care Pte Ltd**

**Email: [claims@procarcare.com.sg](mailto:claims@procarcare.com.sg)**



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T: +65 6741 5336 | F: +65 6741 7208  
E: claims@procarcare.com.sg  
W: www.procarcare.com.sg

Date : 8 April 2020  
Our Ref : TP0320-5929

I / We Lim Soh Koon Nric No S1627069E  
Residing at Blk 507 Canberra Drive #05-20 S768127 owner of

Vehicle No SLA4175E hereby authorize PROGRESSIVE CAR CARE PTE LTD at

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716 to resolve the above matter.

In respect of this authorization, I / We confirmed to accept whatsoever settled or agreed by them

and also agreed that all Payments include Loss of Use to make in favour of

PROGRESSIVE CAR CARE PTE LTD.

I / We am/are fully aware that all settlement made in respect of the accident occurred on

18/3/2020 Along / at Commonwealth Drive will be full and

Final discharge of the claims inclusive of damages, loss of use etc.



SIGNATURE OF OWNER

**DISCHARGE RECEIPT**

Without Prejudice  
to any claim for  
personal injury

CLAIM REFERENCE : D20001563MFSH/1  
ACCIDENT DATE : 18/03/2020  
ACCIDENT LOCATION : COMMONWEALTH DRIVE TOWARDS COMMONWEALTH AVE  
INSURED : COMFORT TRANSPORTATION PTE LTD  
INSURED DRIVER : LIM THIAM HENG  
INSURED VEHICLE : SHA4468H  
INVOLVED PARTY : SLA4175E  
SETTLEMENT SUM : \$2,600.00

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 : LIM SOH KOON

Signature and Date :



WITNESS :

Signature and Date :

**PROGRESSIVE CAR CARE PTE LTD**  
Blk 3022A Ubi Road 1 # 01-45/46  
Singapore 408716  
Tel: 6741 5336 Fax: 6741 7208  
Email: claims@procarcare.com.sg





# Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716  
TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg  
GST:201006949C RCB NO:201006949C

M/S: MS FIRST CAPITAL INSURANCE LIMITED  
6 Raffles Quay  
#21-00  
Singapore 048580  
TEL: 62222311 FAX: 62223547  
ATTN: Motor Claim Department

Your Ref No: TP 0320-5929  
Claim Type: Third Party  
Accident Date: 18/03/2020  
TP Veh Reg No: SHA 4468 H

Claim No: EST1505897  
Final No: PS1504212  
Date: 08 Apr 2020  
Policy No: 2100501277  
Veh Reg No: SLA4175E  
Make/Model: HONDA VEZEL 1.5X  
CVT  
Chassis No: RU11107923  
Engine No: L15B4027924  
Reg. Date: 29/02/2016

## Final Repair BillSLA4175E

Description	Quantity	Price S\$	Amount S\$
<b>Spare Parts</b>			
1 LUMP SUM REPAIR	1 JOB	2,150.00	
		2,150.00	2,150.00
Total			S\$ 2,150.00
Add GST @ 7%			150.50
Total Amount Payable			S\$ 2,300.50

TOTAL: SINGAPORE DOLLAR TWO THOUSAND THREE HUNDRED AND CENTS FIFTY ONLY

For Progressive Car Care Pte Ltd  
PROGRESSIVE CAR CARE PTE LTD  
Blk 3022A Ubi Road 1 # 01-45/46  
Singapore 408716  
Tel: 6741 5336 Fax: 6741 7208  
Email: claims@procarcare.com.sg  
AUTHORISED SIGNATURE

**EXPRESS RENTAL**

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6841 8055 (2 Lines) Fax: 6741 7208

TP0370-5929  
SLA4175E**RENTAL AGREEMENT NO: 7618**

HIRER'S PARTICULAR		GUARANTOR / ADD. DRIVER	
Name :	Lim Soh Koon	Name :	Chin Yoon Cheng.
Address :	Blk 507 Canberra Drive #05-20 (768127)	Address :	Blk 501 #01-248 West Coast Dr S (120501)
Nric No :	S1627069E.	Nric No :	F2783962 Q.
Tel (R) :		Tel (R) :	
H/P :		H/P :	91968085
Off :		Off :	
Licence Expiry :	Class : 3.	Licence Expiry :	Class : 3.
Driving Experience :	Age :	Driving Experience :	Age :
Co.Name/ Address :		Co.Name/ Address :	
Occupation:		Occupation:	
Make :	Toyota Altis.	Vehicle No:	SJV 9943 K.
<b>RENTAL CHARGES</b>		<b>METHODS OF PAYMENT</b>	
Hours @\$	per hour	Cash	Cheque No.
5 Days @\$ 100	per day	500	
Weeks @\$	per week		
Monthly @\$	per month		
<b>SUB-TOTAL</b>		Bill Co:	
Deposit		Credit Card No:	
<b>TOTAL CHARGE</b>	500	Exp. Date	
		Type:	
<b>INSURANCE EXCESS CLAUSE</b>			
Hirer is responsible for the first S\$ 3000/- (i.e. EXPRESS RENTAL'S) vehicle and also first S\$ party's vehicle for each and every accident / damage.		excess for collision / damage / fire & theft for the first party excess for collision / damage / fire & theft to third	
<b>CHECK OUT</b>		<b>CHECK IN</b>	
Date Out	23/3/2020 Time Out 1510.	Date In	28/3/20 Time In 1520 hrs.

**HIRER'S DECLARATION**

I have read the terms & conditions on overleaf of this rental agreement. I acknowledge receipt of vehicle in good condition plus accessories and if I opt to pay by credit/charge card, my signature here is to deemed to have been made on the application credit card charge slip. I am aware that Express Rental may have to take necessary steps by contact my employer in order to qualify me as a hirer.

Hire's Signature

EXPRESS RENTAL



## EXPRESS RENTAL

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6841 8055 (2 Lines) Fax: 6741 7208

## OFFICIAL RECEIPT

No: **5743**

Date: 30/3/2020

Received from Lim Soh Koon

the sum of Dollars Five Hundred only

being payment of RA 7618 (SV 9943K)

\$ 500/-  
Cash/Cheque No.

*All receipts subject to the clearance of cheque.*

EXPRESS RENTAL

L  
Authorised Signature



## Khanchna (LKK Auto)

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**From:** Rachel Wu <RachelWu@msfirstcapital.com.sg>  
**Sent:** 11 August 2020 11:21 AM  
**To:** Khanchna (LKK Auto)  
**Cc:** Admin A  
**Subject:** RE: MANDATE REQUEST ON QUANTUM- D20001563MFSH/1 /SHA4468H/ EXPRESS SETTLEMENT. DOA 18-03-2020  
**Attachments:** LKK Survey Photos.pdf; LKK Reinspection Photos.pdf; LKK Adjustment Report.pdf; LKK Inspection Report.pdf; TP LOD.pdf

Dear Khanchna,

Please offer as per below:

COR : \$2,300.50  
LOR : \$300-\$450 (\$100 x 03-04.5 days)  
**Total : \$2,600.50 to \$2,750.50**

Thank you

Best Regards

Rachel Wu  
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Tel: 6507 3848 | DID : 6507 3862  
| Fax No. : 6507 3849 | Email: [rachelwu@msfirstcapital.com.sg](mailto:rachelwu@msfirstcapital.com.sg) | Company Regn. No. 195000106C  
A Member of **MS&AD Insurance Group**

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**From:** Khanchna (LKK Auto) <khanchna@lkkauto.com>  
**Sent:** Monday, 27 July 2020 9:35 am  
**To:** Rachel Wu <RachelWu@msfirstcapital.com.sg>  
**Cc:** Admin A <admin-a@lkkauto.com>  
**Subject:** MANDATE REQUEST ON QUANTUM- D20001563MFSH/1 /SHA4468H/ EXPRESS SETTLEMENT. DOA 18-03-2020

**YOUR REF:** CC4/FCI20004444/Uka3q2  
**LKK REF:** D20001563MFSH/1

Dear Sir/Madam,

We refer to the above matter.

We seek your approval to offer third party repairer “**PROGRESSIVE CAR CARE PTE LTD**” at **\$2,600.50 ~ 2,800.50 (all in)**.

The summary is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair (W/GST)	\$ 4,029.79	\$ 2,300.50
2. Loss of Rental ( 5 days x \$100)	\$ 500.00	\$ 300.00 ~ 500.00 ( 3 ~ 5 days x \$100)
<b>Total</b>	<b>\$ 4,529.79</b>	<b><u>\$ 2,600.50 ~ 2,800.50</u></b>

Surveyor recommended 3 days for repair + 2 PRS = 5 days

Enclosed herewith all the documents for your perusal.

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

Thank you.

***Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.***

Best Regards,

**Khanchna** | Case Handler

**LKK Auto Consultants Pte Ltd**

DID: **6841 2360** | email: [Khanchna@lkkauto.com](mailto:Khanchna@lkkauto.com) | Fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Rachel Wu <[RachelWu@msfirstcapital.com.sg](mailto:RachelWu@msfirstcapital.com.sg)>

**Sent:** Monday, April 6, 2020 2:20 PM

**To:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>

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

**Subject:** RE: SURVEY ASSESSMENT - D20001563MFSH/1 /SHA4468H/ EXPRESS SETTLEMENT. DOA 18-03-2020

Dear Mei Kwan,

Please proceed with express settlement.



Best Regards

Rachel Wu  
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Tel: 6507 3848 | DID : 6507 3862 | Fax No. : 6507 3849 | Email: [rachelwu@msfirstcapital.com.sg](mailto:rachelwu@msfirstcapital.com.sg) | Company Regn. No. 195000106C  
A Member of **MS&AD Insurance Group**

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**From:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>  
**Sent:** Friday, March 27, 2020 8:01 PM  
**To:** Rachel Wu <[RachelWu@msfirstcapital.com.sg](mailto:RachelWu@msfirstcapital.com.sg)>  
**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; Khanchna (LKK Auto) <[khanchna@lkkauto.com](mailto:khanchna@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D20001563MFSH/1 // EXPRESS SETTLEMENT

**YOUR REF: D20001563MFSH**  
**LKK REF: CC4/FCI20004444/Uka3**

Dear Sir / Madam,

We refer to the above matter.

We had inspected TP vehicle SLA 4175E 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](mailto:MeiKwan@lkkauto.com) | fax: 67414108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Admin-D (LKKAuto) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>  
**Sent:** Tuesday, 24 March, 2020 1:05 PM  
**To:** 'CWS Motor Claims' <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; assignments

<[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>

**Cc:** 'Rachel Wu' <[RachelWu@msfirstcapital.com.sg](mailto:RachelWu@msfirstcapital.com.sg)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Subject:** RE: SURVEY ASSESSMENT - D20001563MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

**G.NIVITHA**

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>

**Sent:** Tuesday, 24 March 2020 12:17 PM

**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)

**Cc:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; Rachel Wu <[RachelWu@msfirstcapital.com.sg](mailto:RachelWu@msfirstcapital.com.sg)>

**Subject:** PRI: SURVEY ASSESSMENT - D20001563MFSH/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

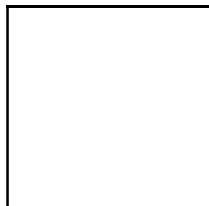
Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849

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