

# SUPREME AUTO SERVICE PTE LTD

176 Sin Ming Drive, #02-01 Sin Ming Autocare Singapore 575721

Email: admin@supreme.sg

•TEL: 6452 8211 •FAX: 6451 7420

## Direct Settlement THIRD PARTY CLAIM

Your ref:

Our ref: SMP 3165 A

### **AXA INSURANCE PTE LTD**

Attn: Officer In Charge  
(Motor Claim Department)

15/09/2020

Dear Sir,

### **RE : ACCIDENT INVOLVING SMP3165A & SKS9063D ON 22/03/2020.**

We have been authorized by CYCLOPS CARS, the registered owner of vehicle number SMP3165A, which was involved in the above accident and at the material time to make a 3<sup>rd</sup> party claims against vehicle number SKS9063D.

The accident was clearly caused by your insured's negligence. We, therefore seeking compensation from you for our client financial losses as itemized below: -

Repair cost	S\$	3,850.00
Loss of Use (8days x \$150) 1 Day PRI & one Sunday involved	S\$	1,200.00
Search Fee	S\$	2.00
Total	S\$	5,052.00

We have enclosed copies of relevant documents to support our claims.

Please settle this matter within 7 days.

Your prompt settlement of our claim would be much appreciated.

Do contact us at 64528211 for any clarification.

Thank you.

Yours faithfully,

Supreme Auto Service Pte Ltd





# Supreme Auto Service Pte Ltd

176, Sin Ming Drive #02-01 Singapore 575721  
Office: 6452 8211 Workshop : 6452 0715 Fax : 6451 7423  
Company Reg. No.: 199404214H

## INVOICE

No. : **INV-73640**

AXA INSURANCE PTE LTD

Vehicle No : TOYOTA NOAH

Make & Model : SMP 3165 A

Mileage (KM) : -

Terms : C.O.D.

Date : 24/08/2020

Page : 1 of 1

TEL :

FAX :

Item	Description	Qty	UOM	U/ Price S\$	Disc.	Amount S\$
1	DATE OF ACCIDENT: 22/03/2020	1	DETAILS			0.00
2	Lump sum repair for the above mentioned vehicle.	1	Serv	3,850.00		3,850.00

SINGAPORE DOLLAR THREE THOUSAND EIGHT HUNDRED FIFTY ONLY

Total **3,850.00**

Notes :

- All cheques should be crossed and made payable to SUPREME AUTO SERVICE PTE LTD
- ALL Works done are per vehicle owner's instruction and decision.
- The workshop bears no responsibilities for any modification done against the advise of the workshop.

Payment Mode:

Bank Account: UOB 314-301-933-9

PayNow: 199404214H

Supreme Auto Service Pte Ltd

Authorised Signature

E & OE

Customer's Signature

# **CYCLOPS CARS PTE LTD**

## **VEHICLE LEASE AGREEMENT**

This **VEHICLE LEASE AGREEMENT** ("The Agreement") is made on 24/03/2020 (DATE)

Between **Cyclops Cars Pte Ltd (Co. Registration 201912074Z)**  
**73 UBI ROAD 1, #08-65 OXLEY BIZHUB; SINGAPORE 408733**  
*Hereinafter referred to as "The Owner" of the one part*

And **Name : TING MENG WEI THOMAS**  
**NRIC # : S7803635D**  
**Address : 440 Yishun Avenue 11 #10-468 Singapore 760440**  
**Date of Birth : 15/02/1978**  
**Driving License**  
**Issue Date : 15/02/2011**  
**Tel. : 83228703**  
**Email Address : tt@efi-tech.com.sg**

*Hereinafter also known as the "The Hirer" of the other part*

The Owner will lease to The Hirer the vehicle with the below details, hereinafter referred to as "The Vehicle" with the terms & conditions set out in The Agreement contained herein: -

### **1. DESCRIPTION OF VEHICLE**

- a) **Make & Model : TOYOTA NOAH HYBRID 1.8X CVT**  
b) **Registration No. : SMN3682J**

### **2. LEASE PERIOD**

- a) **Period : 24/03/2020 – 31/03/2020 ( 8 DAYS )**  
b) **Effective from : 24/03/2020**

### **3. AMOUNTS OF RENTAL FEE / SECURITY DEPOSIT / ADVANCE PAYMENT**

It is hereby agreed between both parties that:

- a) The rental fee (herein after "The Rental") shall be **S\$ 150** per day.  
b) The security deposit (hereinafter "The Deposit") shall be **S\$ 0** .  
c) The amount of **S\$ 0** as the 1<sup>st</sup> week's advance rental payment shall be paid by The Hirer and has been received by The Owner (hereinafter referred to as "Advance Payment").

Owner Initials  
(vla1)



Page 1 of 8

Hirer's Initial

d) The Hirer declares this is Non Private Hire Use. \_\_\_\_\_ Hirer to Initial If So.

e) The Hirer declares this is for Private Hire Use (PDVL/TDVL to be furnished).

#### 4. AMOUNTS OF RENTAL FEE AND SECURITY DEPOSIT

- a) The Rental shall be paid **promptly EVERY 7 days** regardless whether the day is a weekend or public holiday. This shall be paid before the receipt of any invoice or bill. Invoices from The Owner will be sent either weekly or monthly, and in all cases shall be sent no less than once a month. The Rental fee shall include: -
- i) Unlimited mileage;
  - ii) Road Tax;
  - iii) Motor Insurance Coverage (Excess applicable);
  - iv) 24-hours breakdown and emergency service (in Singapore only);
- b) **For payment through Bank Transfers, The Hirer shall provide The Owner with a copy of bank book page or an uploaded photograph of the transfer statement with details.**
- c) Without prejudice to the Owner's other rights, the Hirer will be liable to pay an **administrative fee of S\$50.00** and a **late payment interest computable at a rate of 5% per month**, if The Rental Fee and/or other payment(s) remain(s) unpaid for more than **three (3) calendar days or by every Thursday 2359hrs for weekly payment hirers**. Thereafter, the Owner at its sole discretion, will reserve all rights to re-possess The Vehicle by way of lodging a lost vehicle report with the police and/or activation of a vehicle re-possession team to retrieve the vehicle. All belongings in the vehicle will not be returned. Consequentially, the Hirer will be deemed to have breached The Agreement rendering it null & void, including the forfeiture of security deposit that has been withheld by The Owner, and will also be liable to reimburse to The Owner the cost of re-possessing the vehicle (see Clause 10(b)(v)), all outstanding amount in arrears, all cost for debt collection services and all other obligations to the Owner under The Agreement.
- d) All payments due hereunder shall be made to The Owner at its address stated herein or at such address The Owner may from time to time communicate to The Hirer. Any payments sent by post will be at the risk of The Hirer. Payment can only be made by way of **CASH**, or **NETS** to the Owner. Any other form of payment requires the express consent of the Owner.

**CYCLOPS CARS PTE LTD**

**UOB 310-309-512-1**

**PayNow UEN No : 201912074ZUOB**

#### 5. SECURITY DEPOSIT

- a) Without prejudice to The Owner's other rights, The Owner shall be entitled to forfeit and/or retain any part of The Deposit in the event The Hirer breaches, fails or neglects to pay any sums or charges due to or owing to The Owner.









**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-20-049004  
 Date of Request: 24/03/2020

Your Ref No: Online Purchase

Supreme Auto Service Pte Ltd  
 176 Sin Ming Drive #02-01  
 Sin Ming Autocare  
 Singapore 575721

Dear Sir/Madam,

Enquiry Date 24/03/2020  
 Enquiry By Yuki Ho  
 TP Vehicle No. SKS9063D  
 Accident Date 22/03/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

---

For GIARMC Official use:

Date:

GIRO  Cash  Cheque



**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-20-049004

Date of Request: 24/03/2020

Your Ref No: Online Purchase

Supreme Auto Service Pte Ltd  
176 Sin Ming Drive #02-01  
Sin Ming Autocare  
Singapore 575721

Dear Sir/Madam,

Enquiry Date 24/03/2020

Enquiry By Yuki Ho

TP Vehicle No. SKS9063D

Accident Date 22/03/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

---

For GIARMC Official use:

Date:

GIRO  Cash  Cheque

To: Supreme auto service  
SINGAPORE

Letter of Authorisation

RE: ACCIDENT INVOLVING SMP3165A A SKS9063D  
ALONG/AT Lentor Ave Towards Ang mo Kio Ave 6 Junction  
ON 22/3/20.

1. I/We, CYCLOPS CARS (NRIC No. 201912074Z),  
owner/driver of motor vehicle no. SMP3165A, & residing at \_\_\_\_\_

respectively in consideration of your workshop Supreme auto service repairing my/our vehicle, I/we hereby authorise you to claim on my/our behalf for the costs of repair and loss of use. I/We further confirm and authorise you to use my/our name/s to engage the said service of a solicitor to proceed with negotiation with the defaulting party's insurance company for payment of the same and in the event negotiation fails, to instruct the solicitor to issue Summons on my/our behalf and in my/our name/s to claim for the same. Irrespective whether the claim is successful or not, all legal costs incurred shall be borne by you, provided we rendered our assistance as per second paragraph stated herein below:

2. I/We understand that by signing this Letter of Authorisation, I/we has/have to render whatever reasonable assistance to you including signing all relevant Court's document and attendance in Court to give evidence to enable the claim to succeed. If I/we failed or neglected to do so despite request from you, you shall be entitled to claim from me/us the repair costs together with legal costs, other incidental costs and expenses pertaining the issuance of Summons in order to obtain payment from defaulting party.

3. You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my/our claim, you are authorised to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our full authority to collect all compensation monies pertaining to the above-mentioned accident from insurance company or any other party, directly to your workshop M/s Supreme auto service.

4. In the event the claim is settled or judgment is obtained against the defaulting party, payment after deducing all costs and disbursements incurred should be drawn in your name or my/our name/s (at your discretion) and will be forwarded to you.

5. This letter of Authorisation is irrevocable.



Signature: \_\_\_\_\_

Name: \_\_\_\_\_

NRIC NO: \_\_\_\_\_

Date this 24 day of 3 2020.

1. Accident Information

DATE OF ACCIDENT: 05/15/2021  
LOCATION OF ACCIDENT: 1234 Main St, Anytown, CA 90210  
POLICE REPORT NO.: 123456789

NAME: [Redacted]  
ADDRESS: [Redacted]  
CITY: [Redacted] STATE: [Redacted] ZIP: [Redacted]

1. I hereby certify that the information provided above is true and correct to the best of my knowledge and belief. I understand that this information will be used for the purpose of processing my claim and that I may be contacted for further information. I agree to release and hold harmless the insurance company and its agents, brokers, and adjusters from and against all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against them by any third party as a result of my negligence or the negligence of any other party involved in this accident.

2. I understand that by signing this form of Acknowledgment, I am releasing the insurance company from and against all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against them by any third party as a result of my negligence or the negligence of any other party involved in this accident. I understand that this information will be used for the purpose of processing my claim and that I may be contacted for further information.

3. You have agreed to release and hold harmless the insurance company and its agents, brokers, and adjusters from and against all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against them by any third party as a result of my negligence or the negligence of any other party involved in this accident. I understand that this information will be used for the purpose of processing my claim and that I may be contacted for further information.

4. In the event the claim is settled or judgment is entered against the defendant party, payment will be made to the claimant and the insurance company shall be released from all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against them by any third party as a result of my negligence or the negligence of any other party involved in this accident.

5. This form of Acknowledgment is provided for your information.

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

