

Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel : **(65) 6476 3333**
Fax : (65) 6271 5891
www.mova.com.sg

Workshop Dept:

Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722

VIA EMAIL**WITHOUT PREJUDICE**

Tel : **(65) 6272 3892**
Fax : (65) 6270 8314

Co. Reg. 198904033G
GST Reg. M2-0088864-2

Our Ref : SLP3644X / T090520
Your Ref : CC4/EQI20005816/ea3

Date : 7 July 2020

EQ INSURANCE CO LTD
5 Maxwell Road
#17-00 Tower Block MND Complex
Singapore 069110.

Attn: Motor Claims Department

Dear Sir/Mdm

ACCIDENT INVOLVING: SLP3644X & GBD3842Y

DATE OF ACCIDENT: 15 MAY 2020

ALONG: TAMPINES STREET 22 CARPARK

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$ 5,724.50
Loss of Use (\$ __x __days)	\$
Loss of Rental (\$ <u>120.00</u> x <u>05</u> days) + 7% GST	\$ 642.00
Surveyor Fees	\$
Taxi Fees / E-License / Others	\$
Police Report/GIA	\$ 2.00
Medical Fees	\$
Towing Fees	\$
Grand Total	\$ 6,368.50

Car date in: 18/05/2020 Car date out: 23/05/2020

Authorized Repair Days: 05 (~~TP/OD/WS/Recovery of Incidental Costs~~)

Please pay the amount of **S\$ 6,368.50** in favor of **MOVA AUTOMOTIVE PTE LTD.**

If you have any enquiries, please call Ms Suann @ 62723892 or email suann@moval.com.sg

Yours faithfully,
MOVA AUTOMOTIVE PTE LTD
For Claims Manager

NOTE: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

- This is a computer generated letter and does not need a signature.

ACCIDENT INVOLVING GBD 3842Y AND SLP 3644X ON 15/05/2020

Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>

Wed 5/20/2020 10:44 AM

To: HUANGXIAOYA060324@HOTMAIL.COM <HUANGXIAOYA060324@HOTMAIL.COM>

Our Ref: CC4/EQI20005816/ea3

20 MAY 2020

H&Y BUSINESS PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING GBD 3842Y AND SLP 3644X ON 15/05/2020

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Asher

Case Handler

DID: 6841 6051

FAX: 6741 4108

Email: Ashersng@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

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.

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POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SLP 3644 X and (Third
 Party's Vehicle No.) GBD3842 Y on 15/5/20 along
Tampines street 22 carpark

BY THIS POWER OF ATTORNEY, *I/We, Loh Kia Kin
 NRIC/Passport No. S 1254674B (Address)
BLK 288 Tampines ST 22 #05-344 / S(520288)

a company incorporate in Singapore and having its registered office at
 (Address)* _____ owner of Vehicle Registered No.

SLP 3644X hereby irrevocably appoint MOVAAUTOMOTIVE PTE LTD,
 (MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah
 Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be *my/our Attorney and in *my/our
 name(s) and on *my/our behalf to do all or any of the following :

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. _____ taken up by *me/us (subject to approval by my Insurance Company) in respect of the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by *me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as *my/our Attorney shall in MOVA absolute **discretion, deem fit**.
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of **MOVA AUTOMOTIVE PTE LTD** and to give a valid receipt and discharge thereof.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of MOVA.**

*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

*I/We further confirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

***IN WITNESS WHEREOF.** *I/We have hereunto to set *my/our hand and seal this day 18 of the month of 5, Year Two Thousand - (20 20)).

Signed, Sealed & Delivered By



Customer's Name: Loh Kia Kin
 NRIC No: J1254674B
 Co's Rubber Stamp, where applicable.

MOVA's copy

***delete as appropriate.**

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Tax Invoice

16/07/2020

EQ INSURANCE CO LTD
5 MAXWELL ROAD
#17-00 TOWER BLOCK MND COMPLEX
SINGAPORE 069110

Page # :- 1

Veh # :- SLP3644X

Veh Model :- NISAN SYLPHY 1.6

Tax # :- CK633687

Claim # :- T090520

ACC. Date :- 15/05/20

Terms :- C.O.D Days

Remarks :-

Attention :- XA039

No.	Description	Qty	U.Price	Amounts S\$
SPECIAL NET ITEMS :				
	COST OF REPAIR			5,350.00
SPECIAL NET TOTAL S\$				5,350.00

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$ 5,350.00

GST @ 7 % 374.50

AMOUNT DUE S\$ 5,724.50

Customer's Signature/Co. Stamp **MOVA AUTOMOTIVE PTE LTD**

**MOVA**

AUTOMOTIVE PTE LTD

Website: www.mova.com.sg
Co. Reg. No.: 198904033G**Automotive Pte Ltd**Main Office: No. 22 Jalan Kilang, Singapore 159419
Bukit Merah Branch:
Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122
Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792
Tel: (65) 6476 3333 Fax: (65) 6270 8314
24 Hours Breakdown Service: (65) 9799 8888
Bedok Branch: 219 Bedok Central #01-138, Singapore 460219
Tel: (65) 6604 7877**RENTAL AGREEMENT**RA NO.: I 12867 ✓
RECEIVED 29 MAY 2020

154313

RENTAL DETAILS			INSURANCE EXCESS AMOUNT		
Vehicle Make/Model:	Sylphy	Vehicle No: SKF7439L	Singapore	Malaysia	Signature
Date/Time Out:	✓ 18/05/20 10.25		S\$ 2,500	S\$ 3,500	
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		Per Accident	Per Accident	
Date/Time In:	✓ 23/5/20 1405 pm		Charges		
Petrol Level In:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		Months @\$	Per Month	
Change Over 1:	Date:	Initial:	Weeks @\$	Per Week	
Change Over 2:	Date:	Initial:	5 Days @\$ 120	Per Day	600.00
KM Out:	111901	KM In: 112270	Hours @\$	Per Hour	
HIRER DETAILS			Sub-Total		
Named Hirer			Less Discount	%	
Name:	Loh Kia Kin		Rental Charges		
Address:	288 Tampines St. 22 #05-344		CDW @\$	per day / week / month	
			PAI @\$	per day / week / month	
			Petrol Top-Up		
			Misc Charges		
Identity Card No:	51254674 B		GST 7%		42.00
Date of Birth:	20/2/1957		Total 642.00		
Driving License:	51254674 B		VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS	
Country of Issue:	SG		Pre-Payment		
Tel:	(HP) 91261134	(O)	Downpayment and Deposit		
Nationality:	SG		Amount Refunded/ Due		
Effective Date:	26/7/1977		Signature of Refund		
Additional Hirer			Remarks:		
Name:			Surann / SLF3644X / claims		
Address:			Invoice No:	Ref. No:	
			Checked Out By:	Checked In By:	Checked By:
Identity Card No:					
Date of Birth:			Sales-In Charge:		
Driving License:			Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/>		
Country of Issue:					
Tel:	(HP)	(O)			
Nationality:					
Effective Date:					

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/ credit card voucher given above. All above information given by me are true in connection to this agreement.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered as a day rental.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.



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

Third Party Insurer Enquiry

Our Ref No: GR-20-064019

Date of Request: 18/05/2020

Your Ref No: Online Purchase

Mova Automotive Pte Ltd
Blk 1008, #01-04/06/08/94
Bukit Merah Lane 3
Singapore 159722

Dear Sir/Madam,

Enquiry Date 18/05/2020
Enquiry By SUANNE Chiu Nyet Fah
TP Vehicle No. GBD3842Y
Accident Date 15/05/2020

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GBD3842Y	EQ Insurance Company Ltd	30/09/2019-29/09/2020	6223 9433

Thank You.

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.

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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-20-064019

Date of Request: 18/05/2020

Your Ref No: Online Purchase

Mova Automotive Pte Ltd
Blk 1008, #01-04/06/08/94
Bukit Merah Lane 3
Singapore 159722

Dear Sir/Madam,

Enquiry Date 18/05/2020
Enquiry By SUANNE Chiu Nyet Fah
TP Vehicle No. GBD3842Y
Accident Date 15/05/2020

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:

☒ [X] GIRO ☐ [] Cash ☐ [] Cheque