



AUTOMOTIVE REPAIR CENTRE PTE LTD
38 WOODLANDS INDUSTRIAL PARK E1
#05-18 SINGAPORE 757700
TEL: 64688834 / FAX: 64622278
E-MAIL: info@automotiverepaircentre.com.sg

MS First Capital Insurance Limited
Attn: Motor Claims Dept

Dear Sir/ Madam

LETTER OF DEMAND

ACCIDENT INVOLVING VEHICLE NO SLB7467M & SHC1098B
ALONG YISHUN AVENUE 9 IN FRONT YISHUN POLYCLINIC ON 08/07/2020.

We understand that you are the insurer of vehicle SHC1098B.

I/We wish to inform you that my/our vehicle SLB7467M have been completed repairs to my/our satisfaction by M/s AUTOMOTIVE REPAIR CENTRE PTE LTD. I/We therefore propose to claim from your as follows:

1.	Cost of Repair	S\$ 14,445.00 (w/GST 7%)
2.	Loss of Rental(S\$120.00 x 09 days + 01 weekend)	S\$ 1,284.00 (w/GST 7%)
3.	Medical Expenses	S\$ 92.47
4.	LTA Search Fee/GIA Reports	S\$ 7.45
	TOTAL	S\$15,828.92

Please let us have your reply soonest possible.

Thank you.

Yours faithfully



07/08/2020

LETTER OF AUTHORISATION

I/We, MAHAMUDA BEE BINTE MOHAMED ISMAIL ("claimant") of BLK 816 YISHUN STREET 81 #05-708 SINGAPORE 760816 (address), owner of SLB7467M (vehicle no.) hereby authorize AUTOMOTIVE REPAIR CENTRE PTE LTD ("the workshop"), to act on behalf of me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") for my/our vehicle no. SLB7467M that was damaged pursuant to the accident which occurred on 08/07/2020 (date) ALONG YISHUN AVENUE 9 IN FRONT YISHUN POLYCLINIC (location) involving vehicle no/s SHC1098B ("the accident").


I/We further authorize the workshop to settle my/our above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my/our claim with payment cheque/s being made in favour of the workshop.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 24 (day) of July (month) 2020 (year)



Signed by "the claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

DISCHARGE RECEIPT

CLAIM REFERENCE : D20002715MFSH
ACCIDENT DATE : 08/07/2020
ACCIDENT LOCATION : T JUNCTION OF YISHUN AVE 9 AND YISHUN POLYCLINIC
INSURED : COMFORT TRANSPORTATION PTE LTD
INSURED DRIVER : MUSTAFFA BIN ABDUL RAHMAN
INSURED VEHICLE : SHC 1098B
INVOLVED PARTY : SLB 7467M
SETTLEMENT SUM : \$ 15,400.00

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 : MAHAMUDA BEE BINTE MOHAMED ISMAIL

Signature and Date :



15/09/2020

WITNESS :



Signature and Date :



15/09/2020

This Discharge Voucher applies strictly for claimant's claim for property damages only and does not constitute a full discharge for any other claims or further claims whatsoever present of future that may manifest arising directly or indirectly from this accident.
This Settlement terms herein is without an admission of liability on the part of the claimant and/or his driver and the settlement terms and should not be used as evidence in any related suits or claims arising from this accident.



AUTOMOTIVE REPAIR CENTRE PTE LTD

Company Reg No: 201312913C GST Reg No: 201312913C

38 Woodlands Industrial Park E1

#05-18 Singapore 757700

Tel: 6468 8834 Fax: 6462 2278

Email: info@automotiverepaircentre.com.sg

Tax Invoice

Invoice No: 00002266

Date: 6/8/2020

Reference: SLB7467M

Terms:

Page: 1

Bill To:

MS FIRST CAPITAL INSURANCE LIMITED

36 ROBINSON ROAD

#16-01

CITY HOUSE

SINGAPORE 068877

No	DESCRIPTION	AMOUNT
1	COST OF REPAIR (LUMP SUM)	\$13,500.00
Customer Signature & Co. Stamp		Sub-Total: \$13,500.00 GST @ 7%: \$945.00 Amount Due: \$14,445.00

This is an electronically generated invoice, no signature is required

TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
CHARLES SIMON S/O N SUBRAMANIAM EDWIN BLK 816 YISHUN STREET 81 #05-708 SINGAPORE 760816

DATE	INVOICE NO.
28-Jul-2020	A 41816

	VHA NO.	DUE DATE	VEH NO.
	A 41816	28-Jul-2020	SBT 32 D
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 14 JULY 2020 TO 24 JULY 2020 YOUR REF: SLB 7467 M	10	120.00	1,200.00
GST @ 7%			\$84.00
TOTAL			\$1,284.00

All cheques must be made payable to BKW Rent A Car Pte Ltd.
Please write the vehicle and invoice number on the reserve.

VEHICLE HIRING AGREEMENT

HIRER'S PARTICULARS

Name (as in I/C): **CHARLES SIMON N. S. EDWIN**
 NRIC/Passport No: [REDACTED] Date of Birth: **19/12/1959**
 Address: **BLK 816 YISHUN ST #11/05-708** Age: **760816**
 Name & Address of Employer: [REDACTED]
 Occupation: **ARC** Driving Exp: **10/9/1979**
 Driving Licence No: [REDACTED] Passed Date: **10/9/1979**
 D/L Type: Local/Int'l/Others: [REDACTED]

DRIVER'S PARTICULARS

Name (as in I/C): **FEROZ QAMAR CHARLES SYARIF**
 NRIC/Passport No: [REDACTED] Date of Birth: **18/2/1995**
 Address: **BLK 816 YISHUN STREET #11/05-706** Age: **760816**
 Occupation: [REDACTED] Driving Exp: **15/7/2014** Yrs: **15**
 Driving Licence No: [REDACTED] Passed / Expiry Date: **15/7/2014**
 D/L Type: Local/Int'l/Others: [REDACTED] Contact No: [REDACTED]

Hirer's Own Vehicle No: SLB 7467M		Replace Veh No:	
Loan Vehicle No: SLB 7467M		VR No:	
Make & Model: # M. Lancer		Auto/Manual Group:	
CHARGES \$ cts			
Daily	10 day	@ \$ 120	Per day \$1200
Weekly/Monthly	week	@ \$	Per week/Monthly
Others			
CDW/PAI	@ \$	Per day/Monthly	
Delivery/Collection Svc			
GST 7% \$84			
OR No:		(A) SUB-TOTAL \$1284	
Petrol Level & Surcharge	OUT	E	1/4
	IN		
First 10 km FREE per day		GST	
Excess mileage is chargeable at 10 cents per km		TOTAL CHARGES	



NON WAIVER EXCESS (Subject to GST): \$ **2000**

ACCESSORIES CHECK

☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge

☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature: [Signature] Additional Driver's Signature: [Signature]

SINGAPORE Use Only

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be Borne by the Hirer/the Authorized Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
14/7/2020	1030	80660	Abdul	IC/OL with GY
Return Of Vehicle: The Hirer Driver is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"				
Date In	Time In	Mileage	Check By	Remarks
24/7/2020	1330	81191		

Hirer's/Driver Signature: [Signature]

Hirer's/Driver Signature: [Signature]

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 08 Jul 2020 / 15:29:23

Receipt Date/Time : 08 Jul 2020 / 15:29:14

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200708-002295

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 - SHC1098B				
As at 08 Jul 2020/09:45:00				
Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHC1098B Enquiry Fee 20200708152758714424	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				
	552038XXXXXX2776	eNETS Credit Card		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.



National Healthcare Group

POLYCLINICS

Advancing Family Medicine Transforming Primary Healthcare

GST Reg No.: M9-0004581-Y

Reg No.: 52929305J

For payment using PayNow, please refer
to note 1 on PAYING YOUR BILLS

TAX INVOICE

**CHARLES SIMON S/O N SUBRAMANIAM EDWIN @ MUHAMMAD
SYARIFF BIN**
816 YISHUN STREET 81
#05-708
SINGAPORE 760816

MRN: S1375672D
CLINIC: YISHUN POLYCLINIC
VISIT NO: N0I20070825244Z
VISIT DATE: 08/07/2020 09:46
BILL DATE: 08/07/2020 20:12
BILL NO: 0I20257962
TERMS: IMMEDIATE

SERVICES RENDERED	UNIT	GROSS(\$)	SUBSIDY(\$)	AMT PAYABLE(\$)
CONSULTATION				
#Consultation	1	48.10	34.90	13.20
NURSING				
Nursing Triage	1	0.00	0.00	0.00
MEDICATION/RETAIL ITEMS				
STANDARD LIST 1				
#Ketoprofen 2.5% Gel 30G (Fastum)	1	2.70	1.35	1.35
#Orphenadrine 35Mg/Paracet 450Mg Tab	40	4.00	2.60	1.40
Total Charges		54.80		
Government Subsidy			38.85	
Government Subsidy for Merdeka (additional 25% off for items marked with "#")			3.99	
Amount Payable Before Tax				11.96
7% GST				0.84
Amount Payable After Tax				12.80
GST absorbed by Government				0.84
TOTAL AMOUNT PAYABLE				11.96
TOTAL DUE AFTER PAYMENT				11.96

Please note that the Dental Appointment Deposit will be forfeited if you DO NOT:

- Turn up for your appointment
- Reschedule or cancel your appointment 3 working days in advance

Amount paid for packages are not refundable nor transferrable
Medicines, goods and services sold are non-refundable and non-exchangeable

~ Eligible for CHAS Subsidy, + Eligible for MAF/MAF Plus
Subsidy

* Indicates this Medical Service is medisave claimable

^ 3rd party claimable

@ Eligible for PG Subsidy

Eligible for MG Subsidy

SERVED BY: EPOS SYSTEM

08/07/2020



S1375672D



0I20257962



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National Healthcare Group

PLEASE SEE OVERLEAF FOR PAYMENT AND /OR OTHER INFORMATION/ INSTRUCTIONS.
KINDLY KEEP THIS DOCUMENT AS PROOF OF PAYMENT

NHGP/MF59-01A



National Healthcare Group

POLYCLINICS

Advancing Family Medicine Transforming Primary Healthcare

GST Reg No.: M9-0004581-Y

Reg No.: 52929305J

For payment using PayNow, please refer to note 1 on PAYING YOUR BILLS

TAX INVOICE

MAHAMUDA BEE BINTE MOHAMED ISMAIL
816 YISHUN STREET 81
#05-708
SINGAPORE 760816

MRN: S1557129B
CLINIC: YISHUN POLYCLINIC
VISIT NO: N0120070824954F
VISIT DATE: 08/07/2020 09:06
BILL DATE: 08/07/2020 20:11
BILL NO: 0120257684
TERMS: IMMEDIATE

SERVICES RENDERED	UNIT	GROSS(\$)	SUBSIDY(\$)	AMT PAYABLE(\$)
CONSULTATION				
Consultation	1	48.10	34.90	13.20
NURSING				
Nursing Triage	1	0.00	0.00	0.00
MEDICATION/RETAIL ITEMS				
STANDARD LIST 1				
*Ketoprofen 2.5% Gel 30G (Fastum)	1	2.70	1.35	1.35
*Orphenadrine 35Mg/Paracet 450Mg Tab	40	4.00	2.60	1.40
RADIOLOGY				
Foot, Right	1	133.70	66.80	66.90
Ribs, Left (Chest Frontal And Oblique)	1			
Ribs, Right (Chest Frontal And Oblique)	1			
Total Charges		188.50		
Government Subsidy			105.65	
Government Subsidy for Pioneers (additional 50% off for items marked with "@")				
Amount Payable Before Tax				82.85
7% GST				5.80
Amount Payable After Tax				88.65
GST absorbed by Government				5.80
TOTAL AMOUNT PAYABLE				82.85
PAYMENT BY				
MEDISAVE (ESTIMATED AMOUNT PENDING APPROVAL BY CPF BOARD)			08/07/2020	2.34
TOTAL DUE AFTER PAYMENT				80.51

ADDITIONAL INFORMATION

MEDISAVE A/C HOLDER	CPF NO	AMT TO BE DEDUCTED(\$)	EXPIRY DATE	MEDISAVE TYPE
MAHAMUDA BEE BINTE MOHAMED ISMAIL	S1557129B	2.34	31/12/2099	CDMP



National Healthcare Group

POLYCLINICS

Advancing Family Medicine Transforming Primary Healthcare

GST Reg No.: M9-0004581-Y

Reg No.: 52929305J

For payment using PayNow, please refer
to note 1 on PAYING YOUR BILLS

Please note that the Dental Appointment Deposit will be forfeited if you DO NOT:

- Turn up for your appointment
- Reschedule or cancel your appointment 3 working days in advance

Amount paid for packages are not refundable nor transferrable

Medicines, goods and services sold are non-refundable and non-exchangeable

~ Eligible for CHAS Subsidy, + Eligible for MAF/MAF Plus Subsidy

* Indicates this Medical Service is medisave claimable

^ 3rd party claimable

@ Eligible for PG Subsidy

Eligible for MG Subsidy

SERVED BY : EPOS SYSTEM

08/07/2020



S1557129B



0120257684



A Member of the
National Healthcare Group

Jia Le (LKK Auto)

From: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Sent: Friday, 11 September 2020 12:46 PM
To: Jia Le (LKK Auto)
Cc: Admin A
Subject: RE: SEEK MANDATE QUANTUM [Express Settlement via LKK] - D20002715MFSH // Our ref: CC4/FCI20007974/Uds3 [ACCIDENT INVOLVING SHC1098B AND SLM7467M ON 08/07/2020]
Attachments: LKKInspection.pdf; LKKAdjustment1.pdf; SURVEY PHOTO.pdf; RESURVEY PHOTO.pdf; LOD.pdf

Dear Jia Le,

Please offer as per below:

COR	:	\$14,445.00
LOR	:	\$535-\$856 (\$100 x 05-08 + 7% GST)
LTA	:	\$7.45
Medical Fee	:	\$92.47
Total	:	\$15,079.92 - \$15,400.92.

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 | Company Regn. No. 195000106C
A Member of  Insurance Group

Personal Data Protection Act 2012 ("PDPA"):

Under the PDPA, there are various requirements that regulate the processing of your personal data. Please refer to <http://www.msfirstcapital.com.sg> for details of PDPA Personal Data Collection Statement.

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From: Jia Le (LKK Auto) <JiaLe@lkkauto.com>
Sent: Wednesday, September 9, 2020 5:04 PM
To: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Cc: Admin A <admin-a@lkkauto.com>
Subject: SEEK MANDATE QUANTUM [Express Settlement via LKK] - D20002715MFSH // Our ref: CC4/FCI20007974/Uds3 [ACCIDENT INVOLVING SHC1098B AND SLM7467M ON 08/07/2020]

Claim No: D20002715MFSH
LKK Ref: CC4/FCI20007974/Uds3

Dear Sirs/Madam,

ACCIDENT INVOLVING SHC 1098B AND SLM 7467M ON 08/07/2020

We refer to the above matter.

We seek your approval to offer Third Party repairer “AUTOMOTIVE REPAIR CENTRE PTE LTD” at \$15,828.92(all-in).

The summary is as follows:-

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	\$ 27,820.00	\$ 14,445.00
2. Loss of Rental (10days x \$120)(w/GST)	\$ 1,284.00	\$ 1,284.00 (10days x \$120)(w/GST)
3. LTA Search Fee	\$ 7.45	\$ 7.45
4. Medical Fee	\$ 92.47	\$ 92.47
Total	\$ 29,203.92	\$ 15,828.92

Surveyor recommended 9 days for repair + 1Sunday = 10days.

Enclosed here with all the relevant documents for your perusal.

Kindly let us have your approval/instruction.

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,

Chan Jia Le | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6749 5792 | email: Jiale@lkkauto.com | fax: 6741-4108

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

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

Sent: Friday, 7 August 2020 12:34 PM

To: Su Li (LKK Auto)

Cc: Admin A; Jia Le (LKK Auto)

Subject: FW: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M. EXPRESS SETTLEMENT

Dear LKK,

Please assist below email.

Third party had sent in LOD.

For your necessary action.

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 | Company Regn. No. 195000106C

A Member of MS&AD Insurance Group

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From: shujuan@automotiverepaircentre.com.sg <shujuan@automotiverepaircentre.com.sg>
Sent: Friday, 7 August 2020 10:58 am
To: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Cc: 'ARC Raymond' <raymond@automotiverepaircentre.com.sg>; kenguan@automotiverepaircentre.com.sg; CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Subject: RE: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Dear Rachel & Team,

Please find enclosed our supporting documents for above claim.
Kindly advise if original copies for mailing required.

Meanwhile await your offer / DV if applicable.
Thank you.

Regards,
Lin Shu Juan

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18 Singapore 757700
Tel: +65 6468 8834 Fax: +65 6462 2278

From: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Sent: Monday, 13 July 2020 6:09 pm
To: shujuan@automotiverepaircentre.com.sg
Cc: 'ARC Raymond' <raymond@automotiverepaircentre.com.sg>; kenguan@automotiverepaircentre.com.sg; CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Subject: RE: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

WITHOUT PREJUDICE


Dear Shu Juan,

Kindly proceed with direct settlement with quantum to be agreed with our surveyor.

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 | Company Regn. No. 195000106C
A Member of  Insurance Group

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From: shujuan@automotiverepaircentre.com.sg <shujuan@automotiverepaircentre.com.sg>
Sent: Monday, 13 July 2020 9:45 am
To: Rachel Wu <RachelWu@msfirstcapital.com.sg>; CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Cc: 'ARC Raymond' <raymond@automotiverepaircentre.com.sg>; kenguan@automotiverepaircentre.com.sg
Subject: RE: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Dear Rachel & Team,

Refer to my last email dated 09.07.2020 with enclosed of video footage.

Our workshop is trying to secure the case for direct settlement if the conditions that your insured's liability is down.

In the case our client may or may not use our workshop in between this waiting period,
we appreciate your kind assistance and liability confirmation soonest possible in order for us to ensure to our client.

Looking forward to your revert.

Thank you.

Regards,
Lin Shu Juan

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18 Singapore 757700
Tel: +65 6468 8834 Fax: +65 6462 2278

From: shujuan@automotiverepaircentre.com.sg <shujuan@automotiverepaircentre.com.sg>
Sent: Thursday, 9 July 2020 10:06 PM
To: Claim Workflow System <cwsmotorclaims@msfirstcapital.com.sg>
Cc: rachelwu@msfirstcapital.com.sg; Claim Workflow System <cwsmotorclaims@msfirstcapital.com.sg>; 'ARC Raymond' <raymond@automotiverepaircentre.com.sg>; Ken ARC <kenguan@automotiverepaircentre.com.sg>
Subject: Re: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Dear person in charge,

Please find enclosed the video footage provided by a witness.

Kindly revert soonest possible the liability details upon reviewing the evidence.
Thanks.

Regards,
Shujuan

From: Claim Workflow System <cwsmotorclaims@msfirstcapital.com.sg>
Sent: Thursday, 9 July 2020, 9:51 pm
To: shujuan@automotiverepaircentre.com.sg
Cc: rachelwu@msfirstcapital.com.sg; cwsmotorclaims@msfirstcapital.com.sg
Subject: RE: Advise liability SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Without Prejudice

Dear Sir/Madam,

The liability is currently unclear until further evidence are provided.

Kindly forward us your client's video footage .

Regards,
Admin Team
Claim Workflow System
Motor Claims Department
MS First Capital Insurance Limited

From: shujuan@automotiverepaircentre.com.sg <shujuan@automotiverepaircentre.com.sg>
Sent: Thursday, 9 July 2020 3:27 pm
To: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Cc: 'ARC Raymond' <raymond@automotiverepaircentre.com.sg>; kenguan@automotiverepaircentre.com.sg
Subject: FW: SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Dear Rachel,

Our client's vehicle **SLB7467M** wants to make a third party claim against **SHC1098B** which is insured by **MS First Capital Insurance Ltd.**

Appreciate if you may update us the liability details of our client's claim.

***FYI, Vehicle completed survey this late noon.**

Thank you.

Regards,

Lin Shu Juan

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18

Singapore 757700

Tel: +65 6468 8834

Fax: +65 6462 2278

From: Claim Workflow System <cwsmotorclaims@msfirstcapital.com.sg>
Sent: Thursday, 9 July 2020 12:02 pm
To: SHUJUAN@AUTOMOTIVEREPAIRCENTRE.COM.SG
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; RACHELWU@MSFIRSTCAPITAL.COM.SG
Subject: SURVEYOR APPOINTED; OUR REF : D20002715MFSH ; YOUR REF: SLB7467M

Dear Sir/Madam

PRI Request For **SLB7467M** Accident Involving **SHC1098B** On 08-07-2020 AT 09:30:00HRS.

Please find below details for your reference

- **Claim number :** D20002715MFSH
- **Insured vehicle number :** SHC1098B
- **Accident date :** 08-07-2020
- **Third-party vehicle number :** SLB7467M
- **Assignment type :** WITHOUT PREJUDICE
- **Surveyor :** LKK AUTO CONSULTANTS PTE LTD
- **Officer-in-Charge :** RACHELWU LIMEI

PS: This is a system generated mail. Please do not reply to this mail.

Regards,
Admin Team
Claim

Workflow System
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849