COMPLETE VMS PTE LTD *The Premier One-Stop Vehicle Accident Claims Centre*
176 Sin Ming Drive, #03-14, Sin Ming Autocare Complex, Singapore 575721
(**Tel**) 6455 0012 (**Fax**) 6554 0012 (**Email**) main@completevms.com.sg
(**Web**) www.completevms.com.sg

Your Ref: SHC7547H
Our Ref : TPDS20034 – SMN7758Z

23rd March 2020 By Postage

MS FIRST CAPITAL INSURANCE LTD
36 Robinson Road #16-01
City House
Singapore 068877

Attention: Motor Claims Department

Dear OIC,

ACCIDENT INVOLVING VEHICLE: SMN7758Z AND SHC7547H ALONG ANG MO KIO AVE 6 (BEFORE TRAFFIC LIGHT JUNCTION) ON 15.02.2020.

We are the authorized repair workshop for the owner of motor vehicle no. **SMN7758Z** which is involved in the captioned accident with your insured vehicle **SHC7547H**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

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

1	Cost of Repair as agreed with surveyor	S$	2,086.50	(inclusive GST)
2	3days of Loss of Rental@ $200.00	S$	600.00	
3	LTA Report fee	S$	7.45	
	Total	S$	2,693.95	

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

a. Proforma Invoice
b. LTA/GIA Report fee
c. Rental agreement

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

Chiu Siong Lim
For Complete VMS Pte Ltd

To: Complete VMS Pte Ltd
176, Sin Ming Drive,
#03-14, Sin Ming Autocare Complex
Singapore 575721

LETTER OF AUTHORIZATION

RE: ACCIDENT BETWEEN SMN7758Z / SHC7547H (Vehicle Numbers)

ON 15/2/2020 (Date of Accident) AT Ang Mo Kio Ave 6

1. I/We, the owner of vehicle no. SMN7758Z hereby appoint you to act for me to repair and recover damages sustained to my vehicle in the above accident from the third party driver and / or his / her insurers.

2. In this respect, I/We have authorized you to repair, correspond, negotiate and settle on my behalf, all claims against the parties involved in the subject accident. All final financial awards in my favor pertaining to the subject accident claim are to be paid to Complete VMS Pte Ltd.

3. By way of this Letter of Authorization, I/We also further authorized you to sign all Discharge Vouchers and any other related documents in settlement of the subject accident claims. I/We hereby undertake to ratify and reaffirm such signing of Discharge Vouchers and/or documents from any third party insurers by us.

4. During the settlement process with the third party insurers / drivers, you may act fully on my behalf and all negotiations and correspondences given by you to the third party insurers / driver are as if given directly from me. With regards to the settlement of the above subject accident claim, I/We agree and undertake to ratify all correspondences and negotiations given by you to the third party insurers / driver and further agree and undertake to be bound by all acts performed or carded out by you.

5. I/We understand that should the subject accident claims fail or not able to reach an amicably settlement with the third party insurers or driver, I/We will have to appointed a solicitors by way of signing a warrant to act in present of the appointed solicitor to further pursue the matter and to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable). I/We further agrees that should I/We fails or disagrees to appoint a solicitors at that stage, I/We shall be fully liable for all costs incurred to you until that point of time.

6. I/We further confirm my/our understanding that I/We shall render my/our full co-operation pertaining to the settlement of the subject accident and method of repair adopted shall be in accordance to the standard practices of the industry and will be at the full discretion of you.

7. I/We hereby agree that upon settlement of the above subject accident claim, I/We are required to sign Discharge Voucher/s issued by the third party insurers. After which all settlement monies shall be used to settle all costs and fee incurred to carry out the above subject accident repairs and claims. This settlement monies shall constitute a full discharge of your payment obligation to us.

8. Any indemnity / discharge voucher signed by the workshop is without prejudice to my rights to claim for compensation for my personal injury (if any). Complete VMS Pte Ltd is only authorized to negoitate and finalized with Third Party for my property damages

Signature : _____ : _____
Witness's Name & Signature

Name : Soh Poh Ling

Date : 15/2/2020

Company Stamp (if applicable) : _____

Email: : _____

MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3547
Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
Tel: (65) 6507 3848 Fax: (65) 6507 3849
www.msfirstcapital.com.sg

DISCHARGE RECEIPT

CLAIM REFERENCE	:	D20001038MFSH
ACCIDENT DATE	:	15/02/2020
ACCIDENT LOCATION	:	ANG MO KIO AVE 6 JUNCTION OF AVE 5
INSURED	:	CITYCAB PTE LTD
INSURED DRIVER	:	KOI SENG SOON
INSURED VEHICLE	:	SHC 7547H
INVOLVED PARTY	:	SMN 7758Z
SETTLEMENT SUM	:	$ 2,393.95

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 : SOH POH LING

Signature and Date : 14/09/2020

WITNESS : CHU SIONG LIM

Signature and Date : 14/09/2020

This indemnity is signed without prejudice to my rights to claim for compensation for my personal injury.

COMPLETE VMS PTE LTD

176 Sin Ming Drive, #03-14 / 07, Sin Ming Autocare Complex, S575721
Tel: 6455 0012 Fax: 6554 0012 Email: main@completevms.com.sg
Business Reg. No. 200416180E GST Reg. No.: 200416180E

MS FIRST CAPITAL INSURANCE LTD
36 ROBINSON ROAD #16-01 CITY HOUSE
SINGAPORE 068877

Attention : MOTOR CLAIMS DEPT
Contact : 62222311 Fax No. : 62223547

Invoice : TP006947

Date : 23/03/2020
Vehicle Num. : SMN7758Z
Make/Model : MERCEDES C180-2012
Chassis/Eng# : WDD2040452A719080/27191031355418
Accident Date : 15/02/2020
Claim No. :
Reference :
Policy No. :

	Amount S$
COST OF REPAIR AS AGREED	1,950.00

SingDollars : Two Thousand Eighty-Six & Cents Fifty Only

Total S$:	1,950.00
GST S$.	136.50
Amount Due S$:	2,086.50

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COMPLETE VMS PTE LTD

COMPLETE*LEASING*

35 Eden Grove, Singapore 539085
Co. Reg. No.: 200717924R

INVOICE

No: **2542**

To: SOH POH LING

c/o Complete VMS Pte Ltd

Date: 23. Mar. 2020

Vehicle No: SJV6086D

QTY	DESCRIPTION	UNIT PRICE	AMOUNT
1	Rental for 3 days	$200.00	$600.00
	24/2/2020 to 27/2/2020		
	Reference: SMN7758Z		

Cheques should be crossed and made payable to "COMPLETE LEASING PTE LTD"

TOTAL $600.00

I/ We hereby confirm the order

for **COMPLETE LEASING PTE LTD**

Authorized Signature & Company's Stamp

Order checked & accepted by

SMN7758Z

COMPLETE LEASING

35 Eden Grove, Singapore 539085
Co.Reg. No.: 200717924R

VEHICLE RENTAL AGREEMENT

STA No: 002543

HIRER'S PARTICULAR

Name : (as in I/C) Soh Poh Ling

NRIC / Passport No: S8405225F

Address:

ADDITIONAL DRIVER'S PARTICULARS

Name : (as in I/C) Jeffrey Ong Wei Siang

NRIC / Passport No: S8909875J

Address:

Veh. No: SJV6086D Replace Veh. No:

Mileage Out: Mileage Out:

Out : Date 24.2.2020 Out : Date

Out : Time 4.15pm. Out : Time

RENTAL CHARGES		
Daily 3	@ $ 200	$ 600.00
Monthly	@ $	
Delivery Charges	@ $	$ 0
Others	@ $	
	SUB TOTAL $	600.00

PETROL: Empty , 1/8 , 1/4 , 3/8 , 1/2 , 5/8 , 3/4 , 7/8 , Full

REMARKS

INSURANCE EXCESS PAYABLE ON CLAIM

Hirer is responsible for the first $ $2000- excess for Collision / Damages to 1st party (i.e.) COMPLETE LEASING P/L vehicle (inc. windscreen) and also first $ $2000- excess for Collision / Damages to 3rd party's vehicle for each and every accident / damages.

Hirer's Signature:

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.

IMPORTANT

1. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. VEHICLE IS STRICTLY FOR USE IN SINGAPORE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT FROM THE COMPANY COMPLETE LEASING PTE LTD
3. IN THE EVEN OF AN ACCIDENT, THE HIRER OF AUTHORIZED DRIVER;
   (i) shall report all accidents involving the said vehicle to the owner immediately,
   (ii) shall NOT admit liability or sign any settlement documents with any 3rd parties
4. THIS AGREEMENT IS SUBJECT TO THE CONDITIONS PRINTED ON THE REVERSE SIDE

EXCESS:
ADDITIONAL $2500
FOR 23 TO 27 &
ABOVE 65 YEARS OLD

DATE IN	TIME IN	CHECKED BY	
27.2.2020	9.30am		SIGNATURE OF HIRER / DRIVER

> **Back to OneMotoring**

Land Transport Authority

Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 17 Feb 2020 / 16:49:44
Receipt Date/Time : 17 Feb 2020 / 16:49:44

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200217-002821

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 - SHC7547H As at 15 Feb 2020/00:00:01 Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED			
1	Insurance Enquiry - SHC7547H Enquiry Fee 20200217164903167041	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			
	xxxxxxxxxxxx2417 Credit Card: Visa/MasterCard			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.

Jia Le (LKK Auto)

From: Eric Woo <EricWoo@msfirstcapital.com.sg>
Sent: Wednesday, 15 July 2020 5:33 PM
To: Jia Le (LKK Auto)
Cc: Admin A; Mei Kwan (LKKAuto); Serene Ler
Subject: RE: SEEK MANDATE ON QUANTUM [Express Settlement] Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Without Prejudice

Dear Jia Le,

You have our mandate to settle as follow:

COR : $2,086.50
LOR : $200 - $300
LTA Search fee : $7.45
To offer : $2,293.95 - $2,393.95

Previously, you have billed us for the survey fee, able to bill us the difference for Express Settlement fee?

Thank you.

Eric Woo
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email: EricWoo@msfirstcapital.com.sg |Company Regn. No. 195000106C
A Member of MS&AD Insurance Group

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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: Friday, May 29, 2020 3:33 PM
To: Eric Woo <EricWoo@msfirstcapital.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>; Serene Ler <Sereneler@msfirstcapital.com.sg>
Subject: RE: SEEK MANDATE ON QUANTUM [Express Settlement] Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Claim No: D20001038MFSH
LKK Ref: CC4/FCI20002886/Kda3

Dear Sirs/Madam,

ACCIDENT INVOLVING SHC 7547H AND SMN 7758Z ON 15/02/2020

We refer to the above matter.

Insured driver rear ended third party. Our surveyor confirm the damage is consistent to the accident.

We seek your approval to offer Third Party repairer "COMPLETE VMS PTE LTD" at $2,453.95(all-in).

The summary is as follows:-

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	$ 5,741.45	$ 2,086.50
2. Loss of Rental (3days x $200)	$ 600.00	$ 360.00 (3days x $120)
3. LTA Search Fee	$ 7.45	$ 7.45
Total	$ 6,348.90	$ 2,453.95

Surveyor recommended 02 days for repair + 1PRS = 3days.

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: Eric Woo [mailto:EricWoo@msfirstcapital.com.sg]
Sent: Wednesday, 27 May 2020 12:44 PM
To: Jia Le (LKK Auto)
Cc: Admin A; Mei Kwan (LKKAuto); Serene Ler
Subject: RE: Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Without Prejudice

Dear Jia Le,

I believe this is an Express Settlement case.

Please give us your mandate for approval.

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Sent: Thursday, February 27, 2020 7:52 PM
To: Rachel Wu <RachelWu@msfirstcapital.com.sg>
Cc: Jia Le (LKK Auto) <JiaLe@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D20001038MFSH/1 // EXPRESS SETTLEMENT

YOUR REF: D20001038MFSH
LKK REF: CC4/FCI20002886/Kda3

Thank you.

Eric Woo
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email: EricWoo@msfirstcapital.com.sg |Company Regn. No. 195000106C
A Member of MS&AD Insurance Group

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From: Jia Le (LKK Auto) <JiaLe@lkkauto.com>
Sent: Wednesday, 27 May 2020 12:09 pm
To: Eric Woo <EricWoo@msfirstcapital.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Subject: RE: Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Dear Eric,

We have informed OIC Rachel that we will submit the survey report on 14/05/2020.

Attached herewith the survey report of SHC 7547H.

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,
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: Eric Woo [mailto:EricWoo@msfirstcapital.com.sg]
Sent: Wednesday, 13 May 2020 2:07 PM
To: Jia Le (LKK Auto)
Cc: Admin A; Mei Kwan (LKKAuto)
Subject: RE: Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Without Prejudice

Dear Jia Le,

Kindly refer to email below.

Would appreciate if you provide us your final survey report on urgent basis.

Thank you.

Eric Woo
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email: EricWoo@msfirstcapital.com.sg |Company Regn. No. 195000106C
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From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Sent: Sunday, 3 May 2020 4:48 pm
To: Eric Woo <EricWoo@msfirstcapital.com.sg>; Jia Le (LKK Auto) <JiaLe@lkkauto.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020 *** LKK REF: CC4/FCI20002886/Kda3

Dear Sir / Madam,

Thank you for your email.

Our respective case handler will look into the matter and get back to you in due course.

Hi Jia Le,

Kindly assist.

To check availability of the case handler, you may contact the undersigned.

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.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

From: Eric Woo [mailto:EricWoo@msfirstcapital.com.sg]
Sent: Sunday, 3 May 2020 4:46 PM
To: Mei Kwan (LKKAuto)
Subject: Our Ref: D20001038MFSH OIV: SHC7547H DOA: 15-02-2020

YOUR REF: D20001038MFSH

LKK REF: CC4/FCI20002886/Kda3

Without Prejudice

Dear Mei Kwan,

Kindly provide us a copy of the final survey report.

Thank you.

Eric Woo
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email: EricWoo@msfirstcapital.com.sg |Company Regn. No. 195000106C
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