



1 Kaki Bukit Ave 6, # 02-22/21/20 @ Autobay Blk D Singapore 417883

Company & GST Registration No : 201828067M

Proforma Inv : CAS/20/PI0152

Email: contact@casgarage.sg

18.12.2020

Our Ref : SMA 1496L

Your Ref No.: SMA 2856A

M/s India International Insurance Pte Ltd

**BY POST**

Motor Claims Department

64 Cecil Street

#05-01 IOB Building

Singapore 049711

Dear Sir/Mdm

**ACCIDENT INVOLVING SMA 1496L AND SMA 2856A ALONG PIE TOWARDS TUAS ON 04.09.2020**

Please refer to the above mentioned accident.

We are writing in on the behalf of **GOH BENG SAN** the registered owner of motor vehicle number **SMA 1496L** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle number **SMA 2856A** As a result of which, our client have suffered loss and and expenses.

We are instructed by our client to claim for :

1.	Lump Sum Repair (Recommended by LKK Adrian)	\$	7,383.00 (W/GST)
2.	GIA Search Fee	\$	29.00
3.	Loss of Rental ( 7 days x \$ 120)	\$	840.00

**TOTAL AMOUNT**

**\$ 8,252.00**

We enclsloed hereby the following documents for your consideration :

- ( A ) Proforma Invoice
- ( B ) GIA Search Invoice
- ( C ) Rental Agreement
- ( D ) Rental Invoice
- ( E ) Letter of Authority

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

**CAS GARAGE PTE LTD**

UEN 201828067M

1 KAKI BUKIT AVENUE 6 #02-22/21/20

Ms Nicole Chong

Administrator

Mobile: 65 97916119

Email: nicole@casgarage.sg



FAX: 6509 9501

Email: contact@casgarage.sg

## LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SMA 1496L AND SMA 2856A  
AT/ALONG PIE TOWARDS T45  
ON 04 DAY 09 MONTH 2020 YEAR

- I/We, the owner of vehicle no. SMA 1496L hereby instruct and authorize you to commence repair to the said vehicles.
- You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- 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 claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- I/we have read and understand the above statement and agreed.

Dated this 04 day 09 month 2020 year

Signature : [Signature]  
Name : GOH BENQ SAN  
NRIC/ROC No. : S1750131C  
Address : BLK 6050 TAMPINESE ST 61  
#09-358 S'524605.

Company Stamp



## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

**"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"**

India Ref: MPC2020D0001702  
Claimant Ref: SMA 1496L

We/I, CAS GARAGE PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 8,000.00 (global sum), ~~S\$                      (loss of use/rental), S\$                      (search fee)~~, vehicle no. SMA 1496L that was damaged pursuant to the accident which occurred on 04/09/2020 (date) at PIE TOWARDS TUAS (location) involving vehicle no. SMA 2856A (insured vehicle). This is pursuant to the inspection conducted on 08/09/2020 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner GOH BENG SAN ("the third party claimant") of vehicle no. SMA 1496L to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SMA 1496L (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 8,000.00 to CAS GARAGE PTE LTD.

Dated this 14 day of June 20 21

**CLAIMANT:**

Signature:



Name:

Elaine Chong

NRIC:

S82209866

Address:

**CAS GARAGE PTE LTD**  
UEN 201828067M  
**1 KAKI BUKIT AVENUE 6, #02-22 AUTOBAY,**  
**SINGAPORE 417883**

Nationality:

Singaporean

Occupation:

Claims Advisor

**WITNESS:**

Signature:



Mrb

Signed by appointed Surveyor

Name:

LKK AUTO CONSULTANTS PTE LTD

NRIC:

199607198R

Address:

51 UBI AVE 1 #01-25 PAYA LEBAR IND'L PAR  
SINGAPORE 408933

Nationality:

Occupation:



# TAX INVOICE

INDIA INTERNATIONAL INSURANCE PTE LTD

Invoice Date  
22 Dec 2020

Invoice Number  
TI-20-0121-1307TP

Reference  
SMA 1496L  
HYUNDAI ELANTRA

Tax Reference  
Number  
201828067M

CAS GARAGE PTE  
LTD  
1 KAKI BUKIT  
AVENUE 6  
#02-22 AUTOBAY  
SINGAPORE 417883

Description	Quantity	Unit Price	Tax	Amount SGD
LUMP SUM REPAIR COST (RECOMMENDED BY LKK RASUL)	1.00	6,900.00	7%	6,900.00
Subtotal				6,900.00
TOTAL LOCAL SUPPLY OF GOODS AND SERVICES 7%				483.00
TOTAL SGD				7,383.00

Due Date: 22 Dec 2020

## PAYMENT ADVICE

To: CAS GARAGE PTE LTD  
1 KAKI BUKIT AVENUE 6  
#02-22 AUTOBAY  
SINGAPORE 417883

Customer  
INDIA INTERNATIONAL  
INSURANCE PTE LTD

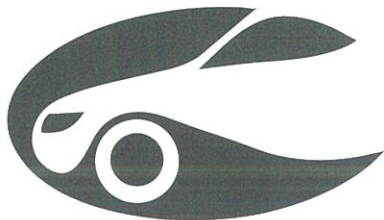
Invoice  
Number  
TI-20-0121-1307TP

Amount Due  
7,383.00

Due Date  
22 Dec 2020

Amount  
Enclosed

Enter the amount you are paying above



# CS CAR RENTAL

1 KAKI BUKIT AVENUE 6  
#02-38, AUTOBAY  
SINGAPORE (417883)  
TEL: 6484 2220 H/P: 9692 2220  
UEN NO.: 53394623M

**NO. 10094**

Date: 15/9/2020

## OFFICIAL RECEIPT

Received from Goh Beng San (SMA1496L)

the sum of Dollars Eight Hundred Forty Only.

being Payment Of 8mk3086 x (7 days x \$120)

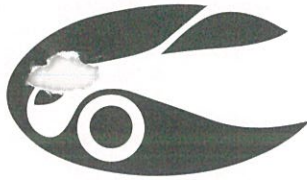
\$ 8007

Cash/Cheque No.

**CS CAR RENTAL**

Ch





# CS CAR RENTAL

SMA 1496 L

EXCESS OD \$3000

1 KAKI BUKIT AVENUE 6

#02-38, AUTOBAY

TP \$2000

SINGAPORE (417883)

TEL:6484 2220 H/P:9692 2220

SMK 3086 X

NO: 10120

UEN.: 53394623M

## VEHICLE RENTAL AGREEMENT

<b>HIRER'S PARTICULAR</b> Name: (as in I/C) <u>Goh Bep San</u> NRIC/PASSPORT No: <u>S1750131C</u> Address (Res) <u>BLK 605D Tampines St 61</u> <u>#09-358 S'554605</u> Name & Address of Employer _____ Occupation: _____ Driving Exp: _____ Driving Licence No: <u>S1750131C</u> D/L Type: <u>Local</u> / International Issue Date: <u>23/5/1991</u> Date of Birth: <u>28/29/1966</u> Tel:(O) _____ (R) _____ HP <u>96300796</u>		Vehicle No: <u>SMK3086X</u> Replace Veh No: _____ Mileage Out: _____ Mileage Out: _____ Make & Model: <u>H/Avante</u> Auto/Manual _____ Group: _____ Out : Date <u>08/09/2020</u> Time: <u>1910 HRS</u> HIRE / PERIOD EXPIRY _____ Time: _____ NON-WAIVER EXCESS=\$ <u>2000(TP) / 3000(OD)</u>																															
<b>ADDITIONAL DRIVER'S PARTICULARS</b> Name: (as in I/C) _____ NRIC/PASSPORT No: _____ Address (Res) _____ Driving License No: _____ D/L Type : Local / International Issue Date: _____ Date of Birth: _____ Occupation: _____ Driving Exp: _____		<table border="1"> <tr> <th colspan="3">CHARGES</th> </tr> <tr> <td>Daily</td> <td>@\$</td> <td>per day</td> </tr> <tr> <td>Weekly</td> <td>@\$</td> <td>per week</td> </tr> <tr> <td>Monthly</td> <td>@\$</td> <td>per month</td> </tr> <tr> <td>Hours</td> <td>@\$</td> <td>per hour</td> </tr> <tr> <td>Others</td> <td>@\$</td> <td></td> </tr> <tr> <td>CDW</td> <td>@\$</td> <td>per day/month</td> </tr> <tr> <td>PAI</td> <td>@\$</td> <td>per day/month</td> </tr> <tr> <td colspan="3">Delivery/Collection Service</td> </tr> <tr> <td colspan="3"><b>SUB-TOTAL \$</b></td> </tr> </table>		CHARGES			Daily	@\$	per day	Weekly	@\$	per week	Monthly	@\$	per month	Hours	@\$	per hour	Others	@\$		CDW	@\$	per day/month	PAI	@\$	per day/month	Delivery/Collection Service			<b>SUB-TOTAL \$</b>		
CHARGES																																	
Daily	@\$	per day																															
Weekly	@\$	per week																															
Monthly	@\$	per month																															
Hours	@\$	per hour																															
Others	@\$																																
CDW	@\$	per day/month																															
PAI	@\$	per day/month																															
Delivery/Collection Service																																	
<b>SUB-TOTAL \$</b>																																	
<b>VEHICLE CHECK LIST</b> D - DENTS S - SCRATCHES A - ACCIDENTS INDICATE: 		<b>PETROL LEVEL</b> <table border="1"> <tr> <td>Out</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> </table> <b>EXTENSION</b> Misc. _____ <b>TOTAL CHARGES \$</b> _____		Out	E	1/4	1/2	3/4	F	In	E	1/4	1/2	3/4	F																		
Out	E	1/4	1/2	3/4	F																												
In	E	1/4	1/2	3/4	F																												
<b>ACCESSORIES CHECK</b> <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S/Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio/Cass <input type="checkbox"/> CD <input type="checkbox"/> Cartridges		Hire's Signature Additional Driver's Signature _____																															

I have read and agree to the terms and condition on both sides of the 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 given CS CAR RENTAL in connection with this agreement is true.

### \*IMPORTANT

1. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
3. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
4. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
5. **VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY.** AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CS CAR RENTAL.

RETURN OF VEHICLE. THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SINGAPORE 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 CS CAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
<u>15/9</u>	<u>1100PM</u>				



**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-20-107898

Date of Request: 09/09/2020

Your Ref No:

PURCHASE BY EMAIL

CAS GARAGE PTE LTD  
NO.1, KAKI BUKIT AVE 6, #02-22 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Your Vehicle No: SMA1496L

Date of Accident: 04/09/2020

Place of Accident: PIE (TUAS)

Involving Vehicle No: SMA2856A

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

---

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

## TAX INVOICE

Our Ref No: GR-20-107899

Date of Request: 09/09/2020

Your Ref No:

PURCHASE BY EMAIL

CAS GARAGE PTE LTD  
NO.1, KAKI BUKIT AVE 6, #02-22 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Date of Accident: 04/09/2020

Vehicle No: SMA1496L

Place of Accident: PIE TOWARDS TUAS

Involving Vehicle No: SMA2856A

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SMA2856A	PIE TOWARDS TUAS	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

---

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque



## Print Received Message

This mail is associated with :

**\*SMA1496L (MPC2020D0001702)**

**[SMA2856A]**

TP

GOH BENG SAN

Sep 4 2020 10:00AM

[-]

Mova Automotive Pte Ltd

**From** India International Insurance Pte Ltd (HQ) (III\_SG), sent on **04/06/2021 14:49 PM**.  
**To** LKK\_HQ  
**Subject** Alert - Adj Mandate Approved (\$8000.00) - SMA1496L - Claim Handler: Gabriel Wee

Approved:8000.00:Dear Sir, Kindly negotiate settlement upto a global sum of \$8,000.00