

Volkswagen Centre Singapore



247 Alexandra Road Singapore 159934
Fax: 64743643 Tel: 63057299

Biz Reg. No. 53103069E
GST No. M20098505-2

LETTER OF DEMAND

Your Ref :
Our Ref : SGG739J
To: LONPAZ

Dear Sirs,

ACCIDENT INVOLVING SGG739J & JQ26863D ON 15/08/2020

We are claiming on behalf of our client LIU BING LIANG owner of
vehicle number SGG739J involved in accident on 15/08/2020
with vehicle JQ26863D along/at SENTIA LINK

Description of claims:

Cost of Repairs	\$ <u>3927.03</u> (Incl 7% GST)
Loss of Use/Rental	\$ <u>120</u> X <u>3</u> Days = \$ <u>360</u>
Medical Fee	\$ <u>-</u> (Incl 7% GST)
Search Fee	\$ <u>2</u> (Incl 7% GST)
TOTAL	\$ <u>4289.03</u>

We are claiming in full and final settlement of \$ 4289.03 payable to
Volkswagen Centre Singapore.

**Kindly send us a written acknowledgement within 14 days from receipt of this document.
Please note that finalization/settlement offer of this claim should be within 8 weeks from the
date of this document. Please email all settlement offers to meiy.wong@vw.com.sg**

Dated this _____ of 30/09/2020



LETTER OF AUTHORITY

Biz Reg. No. 53103069E
GST No. M20098505-2

ACCIDENT INVOLVING SGG239J and SJQ6863D on 25/08/2020
along Senja Link
Own vehicle's number Other vehicle's number Date of accident Accident location

BY THE LETTER OF AUTHORITY, I/we, Liu Bing Liang
of SXXXX165J owner of Vehicle Registration
Name of Policy Holder & IC / Passport number

Number SGG239J hereby irrevocable appoint **Volkswagen Group Singapore Pte Ltd**
Own vehicle's number
(hereinafter refer to VGS), a company incorporated in Singapore and having its registered office at **247 Alexandra Road, Singapore 159934**, its agents of any person authorized by VGS to be *my / our Attorney and in * my / our name(s) 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 number _____ taken up by *me/us and pay the **compulsory excess** in respect of the cost repairs suffered by *me/us arising from the Accident (loss and damage)/.
2. 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 favour of **Volkswagen Group Singapore Pte Ltd** and give a valid receipt and discharge therefore.
3. For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
4. Generally do all such acts as it shall deem necessary for the purpose of settling such claim.

*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on *my/our behalf by the Attorney, its agents or any person authorized by VGS in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if 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 **letter of authority hereby conferred shall remain irrevocable.**

*I/We further confirm that the acceptance by VGS 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 sign this 25 of the month

09 Year 2020

Signed & Delivered By:

[Signature]
Policy Holder

Witness By:
