



**PROGRESSIVE**  
CAR CARE PTE LTD

**Progressive Car Care Pte Ltd**

(Co. Reg. No. 201006949C)

Blk 3022A Ubi Road 1 #01-45/ 46 S408716

T: +65 6741 5336 | F: +65 6741 7208

E: [claims@procarcare.com.sg](mailto:claims@procarcare.com.sg)

W: [www.procarcare.com.sg](http://www.procarcare.com.sg)

04.02.2021

OUR REF : TP 1120-6129

**MS FIRST CAPITAL INSURANCE LIMITED**

36 Robinson Road #16-01

City House

Singapore 068877

**Attn: Motor Claims Department**

Dear Sir,

**ACCIDENT INVOLVING VEHICLE: SMJ 3128 P & SHC 8487 R ON 01.11.2020**

We are the authorized repair workshop for the owner of motor vehicle no: **SMJ 3128 P**, which was involved in the above captioned accident with your insured vehicle: **SHC 8487 R**. The vehicle owner has requested and authorized us to assist him in presenting the claim against the party responsible for the damage to the vehicle.

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

01)	Cost of Repair (incl gst)	\$	7,294.96
02)	Reimbursement - Loss of Rental (09 days x \$100/days)	\$	900.00
		\$	<b>8,194.96</b>

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

- a) Letter of Authorisation / GIA report(s) / Insurance Certificate, etc...
- b) Final Tax Invoice / Car rental No 7742

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

Pei Wen

**Progressive Car Care Pte Ltd**

**Email: [claims@procarcare.com.sg](mailto:claims@procarcare.com.sg)**



**PROGRESSIVE**  
CAR CARE PTE LTD

Progressive Car Care Pte Ltd

(Co. Reg. No. 201006949C)

Blk 3022A Ubi Road 1 #01-45/ 46 S408716

T: +65 6741 5336 | F: +65 6741 7208

E: claims@procarcare.com.sg

W: www.procarcare.com.sg

Date : 4 February 2021

Our Ref : TP 1120-6129

I/we Paranjothy Charles Joseph Nric No S0134137E

Residing at Blk 22 Euros Crescent #12-3009 S400022 owner of

Vehicle No SMJ3128P hereby authorize PROGRESSIVE CAR CARE PTE LTD at

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716 to resolve the above matter.

In respect of this authorization, I / We confirmed to accept whatsoever settled or agreed by them

and also agreed that all Payments include Loss of Use to make in favour of

PROGRESSIVE CAR CARE PTE LTD.

I / We am/are fully aware that all settlement made in respect of the accident occurred on

1/11/2020 Along / at Jalan Datok will be full and

Final discharge of the claims inclusive of damages, loss of use etc.

SIGNATURE OF OWNER

**DISCHARGE RECEIPT**

CLAIM REFERENCE : D20004474MFSH  
ACCIDENT DATE : 01/11/2020  
ACCIDENT LOCATION : ALONG JLN DATOH  
INSURED : COMFORT TRANSPORTATION PTE LTD  
INSURED DRIVER : ONG LAI CHUAN  
INSURED VEHICLE : SHC 8487R  
INVOLVED PARTY : SMJ 3128P  
SETTLEMENT SUM : \$7,890.00

I/We, the undersigned 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 : PARANJOTHY CHARLES JOSEPH

Signature and Date :



19/4/2021

WITNESS : Lily Lim.

**PROGRESSIVE CAR CARE PTE LTD**

Signature and Date : [Signature]

20024 Ubi Road 1 # 01-45/46

Singapore 408716

Tel: 6741 3130 Fax: 6741 7208

Email: [claims@procarcare.com.sg](mailto:claims@procarcare.com.sg)

19/4/2021



# Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716  
TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg  
GST:201006949C RCB NO:201006949C

M/S : MS FIRST CAPITAL INSURANCE LIMITED  
6 Raffles Quay  
#21-00  
Singapore 048580  
TEL: 62222311 FAX: 62223547  
ATTN: Motor Claim Department

Claim No: EST1506359  
Final No: PS1504682  
Date: 04 Feb 2021  
Policy No: 1900258471  
Veh Reg No: SMJ3128P  
Make/Model: HONDA FREED  
HYBRID 7-SEATER 1.5G  
AUTO  
Chassis No: GB71080203  
Engine No: LEB5616505  
Reg. Date: 02/01/2019

Your Ref No: TP 1120-6129  
Claim Type: Third Party  
Accident Date: 01/11/2020  
TP Veh Reg No: SHC 8487 R

## Final Repair BillSMJ3128P

Description	Quantity	Price	Amount
		<u>S\$</u>	<u>S\$</u>
<b>List Price</b>			
1 FRONT BUMPER	1 PC	1,050.90	
2 FRONT BUMPER SIDE HOLDER - LH	1 PC	25.00	
3 FRONT BUMPER CLIPS	10 PC	39.00	
4 FRONT BUMPER GRILLE	1 PCS	165.00	
5 FRONT GRILLE ASSY W/HONDA LOGO	1 PC	750.90	
6 FRONT HEADLAMP - LH	1 PC	1,950.90	
7 FRONT HEADLAMP LOWER RETAINER - LH	1 PC	40.80	
8 BONNET	1 PC	720.80	
9 BONNET HINGE - LH/RH	2 PC	91.20	
10 FRONT FENDER - LH	1 PC	440.60	
11 FRONT FENDER 'HYBRID' LOGO - LH	1 PCS	65.60	
12 FRONT REINFORCEMENT	1 PC	297.60	
13 SUPPORT PANEL ASSY	1 PCS	752.60	
		6,390.90	
	Less 20%	1,278.18	5,112.72
<b>Special Net</b>			
14 FRONT NUMBER PLATE WITH CASING	1 PC	35.00	
		35.00	35.00
<b>Labour</b>			
15 TO REPLACE FRONT SUPPORT PANEL & REMOVE, REPLACE LH WHEELHOUSE & FENDER, INCLUDING AFFECTED ATTACHMENTS AND FITTINGS, CUT/WELD AND REALIGN	1 JOB	700.00	
16 TO CHECK FRONT WIRING, SOCKETS INCLUDING FOCUS OF HEADLAMP	1 JOB	30.00	
17 TO RESPRAY PAINT ON ACCIDENT PORTIONS INCLUDING SUPPORT PANEL	1 JOB	800.00	
18 TO REMOVE, REPLACE RIM & REBALANCING	1 JOB	30.00	
19 TO TUFF-KOTE	1 JOB	30.00	
20 TO 4 WHEEL ALIGNMENT	1 JOB	80.00	
		1,670.00	1,670.00

# Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716  
TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg  
GST:201006949C RCB NO:201006949C

M/S : MS FIRST CAPITAL INSURANCE LIMITED  
6 Raffles Quay  
#21-00  
Singapore 048580  
TEL: 62222311 FAX: 62223547  
ATTN: Motor Claim Department

Claim No: EST1506359  
Final No: PS1504682  
Date: 04 Feb 2021  
Policy No: 1900258471  
Veh Reg No: SMJ3128P  
Make/Model: HONDA FREED  
HYBRID 7-SEATER 1.5G  
AUTO  
Chassis No: GB71080203  
Engine No: LEB5616505  
Reg. Date: 02/01/2019

Your Ref No: TP 1120-6129  
Claim Type: Third Party  
Accident Date: 01/11/2020  
TP Veh Reg No: SHC 8487 R

## Final Repair BillSMJ3128P

Description	Quantity	Price	Amount
		S\$	S\$
	Total		S\$ 6,817.72
	Add GST @ 7%		477.24
	Total Amount Payable		S\$ 7,294.96

TOTAL: SINGAPORE DOLLAR SEVEN THOUSAND TWO HUNDRED NINETY FOUR AND CENTS NINETY SIX ONLY

For Progressive Car Care Pte Ltd  
PROGRESSIVE CAR CARE PTE LTD  
Blk 3022A Ubi Road 1 # 01-45/46  
Singapore 408716  
Tel: 6741 5336 Fax: 6741 7208  
Email: claims@procarcare.com.sg  
AUTHORISED SIGNATURE

**EXPRESS RENTAL**

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6841 8055 (2 Lines) Fax: 6741 7208

**OFFICIAL RECEIPT****No: 5854**Date: 11/11/2020

Received from Paranjothy Charles Joseph  
the sum of Dollars One Hundred Only

being payment of RA 7742 / SMR 5769J

\$ 900/-  
Cash/Cheque No.

*All receipts subject to the clearance of cheque.*

**EXPRESS RENTAL**

Authorized Signature



RENTAL AGREEMENT NO: **7742**

<b>HIRER'S PARTICULAR</b> <i>Joseph.</i> Name : <i>Paranjothy Charles</i> Address : <i>Blk 22 Eunos #12-3009 (400022)</i>  Nric No : <i>50134137E</i> Tel (R) : <i>917113515</i> H/P : <i>917113515</i> Off : Licence Expiry : Class : <i>3</i> Driving Experience : Age : Co.Name/ Address :  Occupation:  Make : <i>Hyundai Avante</i>		<b>GUARANTOR / ADD. DRIVER</b> Name : Address :  Nric No : Tel (R) : H/P : Off : Licence Expiry : Class : Driving Experience : Age : Co.Name/ Address :  Occupation:  Vehicle No: <i>SMR 1769J</i>																						
<b>RENTAL CHARGES</b> <table style="width: 100%;"> <tr> <td>Hours @ \$</td> <td>per hour</td> <td></td> </tr> <tr> <td><i>9</i> Days @ \$ <i>100</i></td> <td>per day</td> <td><i>900</i></td> </tr> <tr> <td>Weeks @ \$</td> <td>per week</td> <td></td> </tr> <tr> <td>Monthly @ \$</td> <td>per month</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>SUB-TOTAL</b></td> <td></td> </tr> <tr> <td colspan="2">Deposit</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>TOTAL CHARGE</b></td> <td><i>900</i></td> </tr> </table>		Hours @ \$	per hour		<i>9</i> Days @ \$ <i>100</i>	per day	<i>900</i>	Weeks @ \$	per week		Monthly @ \$	per month		<b>SUB-TOTAL</b>			Deposit			<b>TOTAL CHARGE</b>		<i>900</i>	<b>METHODS OF PAYMENT</b> Cash <span style="float: right;">Cheque No.</span> Bill Co: Credit Card No: Exp. Date Type:	
Hours @ \$	per hour																							
<i>9</i> Days @ \$ <i>100</i>	per day	<i>900</i>																						
Weeks @ \$	per week																							
Monthly @ \$	per month																							
<b>SUB-TOTAL</b>																								
Deposit																								
<b>TOTAL CHARGE</b>		<i>900</i>																						
<b>INSURANCE EXCESS CLAUSE</b>																								
Hirer is responsible for the first S\$ <i>3000/-</i> (i.e. EXPRESS RENTAL'S) vehicle and also first S\$ party's vehicle for each and every accident / damage.		excess for collision / damage / fire & theft for the first party excess for collision / damage / fire & theft to third																						
<b>CHECK OUT</b> Date Out <i>02/11/20</i> Time Out <i>1200</i>		<b>CHECK IN</b> Date In <i>11/11/2020</i> Time In <i>1000</i>																						

**HIRER'S DECLARATION**

I have read the terms & conditions on overleaf of this rental agreement. I acknowledge receipt of vehicle in good condition plus accessories and if I opt to pay by credit/charge card, my signature here is to deemed to have been made on the application credit card charge slip. I am aware that Express Rental may have to take necessary steps by contact my employer in order to qualify me as a hirer.

*Pharlyn*  
 Hire's Signature

EXPRESS RENTAL

## Jaslin Kok (LKK Auto)

---

**From:** Lim Gan Koon (Chris) <ChrisLim@msfirstcapital.com.sg>  
**Sent:** Wednesday, 14 April 2021 10:00 AM  
**To:** Jaslin Kok (LKK Auto)  
**Cc:** Admin A  
**Subject:** RE: SURVEY ASSESSMENT - D20004474MFSH/1 // EXPRESS SETTLEMENT - Accident Involving SHC8487R (OI : FCI - D20004474MFSH) and SMJ3128P (TP : LKK REF - CC4/FCI20012067/T1da3) on 01/11/2020


Dear Jaslin,

Pls offer as per below :

COR - \$7,294.96  
LOR - \$500 to \$700 (\$100 x 5 to 7 days)  
Total - \$7,794.96 to \$7,994.96

Regards

Chris Lim  
Motor Claims Dept.

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877  
| Tel: 6507 3848 | DID : 6507 3853 | Fax No. : 6507 3849 | Email: [ChrisLim@msfirstcapital.com.sg](mailto:ChrisLim@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.

Confidentiality Notice: This e-mail is confidential. It may also be legally privileged. If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it. If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

---

**From:** Jaslin Kok (LKK Auto) <jaslinkok@lkkauto.com>  
**Sent:** Thursday, 1 April 2021 3:05 pm  
**To:** Lim Gan Koon (Chris) <ChrisLim@msfirstcapital.com.sg>  
**Cc:** Admin A <admin-a@lkkauto.com>; Karen Tan <karentan@msfirstcapital.com.sg>  
**Subject:** RE: SURVEY ASSESSMENT - D20004474MFSH/1 // EXPRESS SETTLEMENT - Accident Involving SHC8487R (OI : FCI - D20004474MFSH) and SMJ3128P (TP : LKK REF - CC4/FCI20012067/T1da3) on 01/11/2020

Dear Sirs/Madam,

### ACCIDENT INVOLVING SHC 8487R AND SMJ 3128P ON 01/11/2020

We refer to the above matter.

We seek your approval to offer Third Party repairer **"PROGRESSIVE CAR CARE PTE LTD"** at **\$ 7,994.96 (all-in)**.



The summary is as follows:-

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	\$ 12,027.68	\$ 7,294.96 (\$6,817.72 + 7% GST)
2. Loss of Rental (9days x \$100.00)	\$ 900.00	\$ 700.00 (7 days x \$100.00)
Total	<b>\$ 12,927.68</b>	<b>\$ 7,994.96</b>

Surveyor recommended 5 days for repair + 1 Sunday + 1 PRS = 7days

Enclosed here with all the relevant documents for your perusal.

**Kindly let us have your approval/instruction.**

Thank you.

Best Regards,

**Jaslin Kok** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841 2157 | email: [JaslinKok@lkkauto.com](mailto:JaslinKok@lkkauto.com) | fax: 6741 4108

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

---

**From:** Jaslin Kok (LKK Auto) <[jaslinkok@lkkauto.com](mailto:jaslinkok@lkkauto.com)>

**Sent:** Thursday, 5 November 2020 12:48 PM

**To:** [CHRISLIM@MSFIRSTCAPITAL.COM.SG](mailto:CHRISLIM@MSFIRSTCAPITAL.COM.SG)

**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; [KARENTAN@MSFIRSTCAPITAL.COM.SG](mailto:KARENTAN@MSFIRSTCAPITAL.COM.SG); Jia Le (LKK Auto) <[JiaLe@lkkauto.com](mailto:JiaLe@lkkauto.com)>

**Subject:** RE: SURVEY ASSESSMENT - D20004474MFSH/1 // EXPRESS SETTLEMENT - Accident Involving SHC8487R (OI : FCI - D20004474MFSH) and SMJ3128P (TP : LKK REF - CC4/FCI20012067/T1da3) on 01/11/2020

**YOUR REF: D20004474MFSH**

**LKK REF: CC4/FCI20012067/T1da3**

Dear Sir / Madam,

We refer to the above matter.

We have inspected TP vehicle SMJ 3128P on a WP basis and TP repairer proposed for express settlement.

Enclosed for your perusal is:

- Estimated cost of repair
- Preliminary advice

**Meanwhile, kindly provide a copy of your insured's Accident Video for our necessary action**

Please take note that the case handler in-charge is Jia Le and she can be contacted at DID: 6749 5792.

***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,

**Jaslin Kok** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6841 2157 | email: [JaslinKok@lkkauto.com](mailto:JaslinKok@lkkauto.com) | fax: 6741 4108

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

---

**From:** Admin-D (LKKAuto) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>

**Sent:** Wednesday, 4 November 2020 3:10 PM

**To:** 'Claim Workflow System' <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Cc:** [CHRISLIM@MSFIRSTCAPITAL.COM.SG](mailto:CHRISLIM@MSFIRSTCAPITAL.COM.SG)

**Subject:** RE: SURVEY ASSESSMENT - D20004474MFSH/1

Dear Sir/Madam,

Thank you for the assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

**From:** Claim Workflow System <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>

**Sent:** Wednesday, 4 November, 2020 3:07 PM

**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)

**Cc:** [CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG](mailto:CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG); [CHRISLIM@MSFIRSTCAPITAL.COM.SG](mailto:CHRISLIM@MSFIRSTCAPITAL.COM.SG)

**Subject:** PRI: SURVEY ASSESSMENT - D20004474MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

**Note: All the accident reports are uploaded into CWS for your perusal.**

Best Regards,

Admin Team

Claim Workflow System

Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849

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