

AUTOEXCEL ENGINEERING PTE LTD
160, Sin Ming Drive
Sin Ming Auto City #06-15
Singapore 575722
Tel: 64535654, 64591630
Fax: 64591698
Email: aeexcel@singnet.com.sg

ATTN: MOTOR CLAIM DEPARTMENT (T.P)

WITHOUT PREJUDICE

ADDRESS: India International Insurance Pte Ltd

Dear Sir/ Mdm :

Accident involving our vehicle No : SML 1146P & your insure vehicle SHD 4233C


Date Of Accident 09/11/2020 . Along / At Tampines Street 34.



Refer to the matter . The accident was caused solely by the negligence of your insured and as a result the following costs and losses had incurred.:

		AMOUNT
1	FINAL REPAIR BILL INCLUDE GST	S\$ <u>\$8560.00</u>
2	SURVEYOR REPORT FEE	S\$ <u>LKK</u>
3	RENTAL BILL : <u>14 days x \$120 =</u> L.O.U. <u>—</u>	S\$ <u>\$1680.00</u> <u>—</u>
4	T.P INSURANCE SEARCH : <u>CTA SEARCH</u>	S\$ <u>—</u>
5	OTHER DOCUMENT.: <u>Invoice for Parts</u> <u>Proof Parts Delay.</u>	S\$ <u>—</u>
	TOTAL :	S\$ <u>\$10,240.00</u>

Please kindly let us have your confirmation to settle our claim within **30 days**.
Kindly contact Ryan Soh regarding the above matter.



Ryan Soh
Hp : 93825367
Tel : 64535654



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TAX INVOICE

GST Reg. No. 19-9603355-R

INVOICE NO : TP 6599

DATE : 10/12/2020

VEH NO :

SML 1146P

TO : INDIA INTERNATIONAL INSURANCE PTE LTD
64, CECIL STREET
#04-05, IOB BUILDING
SINGAPORE 049711

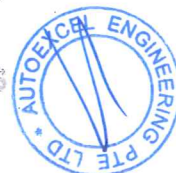
MODEL :

MERCEDES

PAYMENT TERM :

C200

JOB NO :



Date Accident : 09/11/2020

Lump Sum Repair, Supply Parts &
Labour to do spray painting, etc

\$ 8,000.00

Sub - Total \$ 8,000.00

GST 7% \$ 560.00

\$ 8,560.00

NOTE : All cheques must be crossed and make
payable to Autoexcel Engineering Pte Ltd

RECEIVED VEHICLE IN GOOD ORDER

TOTAL

for Autoexcel Engineering Pte Ltd

LETTER OF AUTHORITY & INDEMNITY

To : **AUTOEXCEL ENGINEERING PTE LTD**

ACCIDENT INVOLVING VEHICLE NO. SML 1146P SHD 4233C
ALONG Tampines St 34 ON 09/11/2020

1. I/We, the owner of vehicle no. SML 1146P hereby instruct and authorise you to commence repairs to the said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. 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 authorised 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.
4. Upon resolving my/our claim, you are authorised to agree with my/our solicitors on the amount of their professional costs and disbursements for acting for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account.
5. In the event that I/we am/are required to attend at my/our solicitors' office or to attend Court in connection with my/our claim, I/we shall render full co-operation.
6. In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with, I/we authorise you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respect, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/We shall also be personally liable to bear all Legal Costs incurred by you in claiming back for the repair costs by your Solicitors.
7. If for whatever reason, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I/we agree and 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.
8. In the event that the third party's insurance company send a cheque for the settlement amount directly to you, you have to pay **Autoexcel Engineering Pte Ltd** our repair costs and others, which is included in the settlement amount. Failure to do so may result in us commencing legal action against you to recover for our repair costs and others.

Dated this _____ day of _____ 201

X

Name SOH SHARMAINE SARAH

NRIC No. SS990470F

ROC No.

(company stamp, if applicable)

Address :

Contact No. H-P 91283193

Witness By : _____

Remark : _____

- Driver Injure claim settle by
his own lawyer
- Vehicle Provide for Owner.