JOB SUMMARY REPORT

ACE AUTOLUTION PTE LTD 13 KAKI BUKIT ROAD 4 BARTLEY BIZ CENTRE #03-29, SINGAPORE 417807.

BILLING

BILL to -

Vehicle NO:

SKW 8304 U

Repair Type:

LUMPSUM

Repair As Per Surveyor Report:

3,500.00

Material Cost:

Less Repair Items/Adjustment

Special Nett Items:

Total Repair Cost:

3,500.00

Final Repair Cost:

3,500.00

Others

Search Fees (LTA)

7.45

Surveyor Fees

\$

\$

\$

Loss of Rental

1,260.00 7 days (include Sat,Sun&waiting PRI)

Loss Of Use

\$

Purcahse 3rd party report

Total Amount Bill:

4,796.45

29.00

Approved By:

QUEK YONG PHENG

Date: 28/4/2022

ACE AUTOLUTION PTE LTD

13,KAKI BUKIT ROAD 4,BARTLEY BIZ CENTRE #03-29,SINGAPORE 417807.

COMPANY REG. NO: 201403869W EMAIL: admin@aceauto.com.sg

TEL: 6844 1184 FAX: 6702 4202

ADDRESS

NAME : LEE WEI CHYE DATE :

TE: 28/4/2022

PROFORMA INVOICE: JOB NO.

ACE-025-2022

BLK 207D COMPASSVALE LANE #07-52

SINGAPORE 547207

VEHICLE NO. MAKE & MODEL : SKW 8304 U

TOYOTA WISH

| ITEM | DESCRIPTION | QTY | RATE | AMOUNT |
|------|---------------------------------------|------|------|-------------|
| 1 | COST OF REPAIR AS AGREE WITH SURVEYOR | QTT | RATE | \$ 3,500.00 |
| | | TOTA | | \$3,500.00 |

IMPORTANT

Please remit payment within 7 days from the due date
An interest of 1.5% per month will be levied on all overdue amounts
All cheques must be made payable to ACE AUTOLUTION PTE LTD
(WE ARE NOT GST REGISTERED)

This a computer generated document. No signature is required.

| | | E E | NVOICE | ************************************** | | ······································ | *************************************** | |
|---------------------------------|--|---------------------------------------|----------|--|--------------|--|---|-----------------|
| | | | INV | INVOICE No: A / 2725 / R | | | Dated: November 19, 2020 | |
| paerice Alltr | | | | Car Plate No: Terms of Payment: Due upon receipt | | | ment: | |
| | ISE CAR RENTAL PT Bukit Avenue 6 #02-34 | | Mak | ke: | | | Model: | |
| Singa Mobile | pore Singapore - 41788; e no: 94897930 Phone n carleasing@preciseaut | 3 o: 67457367 | | | í | | | |
| ACE 13 KA BIZ C | omer Details AUTOLUTION AKI BUKIT ROAD 4, , #0 ENTRE, Singapore 417 e no: 86119101 | 3-29, #03-30, BARTLEY 807 | ADI | HAN DRE | SS : BLK 207 | D COM | IYE PASSVALE L/ | ANE #07-52 |
| S.No | Product | Description | From D | ate | To Date | Qty | Price (SGD) | Amount (SGD) |
| 1 | SJY2691S | RENTAL (7 DAYS) YOUR REF : SKW 8304 L | 11/11/20 | 020 | 18/11/2020 | 7 | 180.00 | 1,260.00 |
| | | | | | | 7 - | · | 1,260.00 |
| 1 | unt in words : Thousand Two Hundre | d Sixty Singapore Doll | ar (SGD) | | | | Total (SGD) | 1,260.00 |
| Decl We d actua are tr | pany's REGN NO: 2018 aration: eclare that this custom in the goods destructed and correct. | | ulars | | | | Chingin of a sternature | E, LTD. |

A late fee of \$50.00 per day will be imposed on all overdue invoices. Credit term, if any, will be as stated in the invoice.

1/1



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-20-139395

Date of Request:

11/11/2020

Your Ref No:

Online Purchase

Car Times Autolution Pte Ltd 160 Sin Ming Drive #02-04 AutoCity

Singapore 575722

Dear Sir/Madam,

Your Search Criteria:

Date of Accident:

09/11/2020

Place of Accident:

BLK 251 HOUGANG AVENUE 3

Client Vehicle No:

SKW8304U

| 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:

[X] GIRO [] Cash [] Cheque



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-20-139415

Date of Request:

11/11/2020

Your Ref No:

Online Purchase

Car Times Autolution Pte Ltd 160 Sin Ming Drive #02-04 AutoCity

Singapore 575722

Dear Sir/Madam,

Date of Accident:

09/11/2020

Vehicle No:

SKW8304U

Place of Accident:

BLK 251 HOUGANG AVE 3.

Involvina Vehicle No:

GZ4598X

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\$) |
|--------------------|-------------------|---------------|-----|--------------|
| GZ4598X | 13.08 | | | |
| GST Amount | 0.92 | | | |
| Total Amount Due (| 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:

[X] GIRO [] Cash [] Cheque

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

SKW 8304 U

Print Date/Time: 09 Nov 2020 / 15:40:26

Receipt Date/Time: 09 Nov 2020 / 15:40:26

Tax Invoice/Receipt

Receipt No.: ITNET-00000-201109-002533

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 - GZ4598X As at 09 Nov 2020/10:15:00 Insurance Co: LONPAC INSURANCE BHD 1 Insurance Enquiry - GZ4598X | | | | |
| Enquiry Fee 20201109153850870670 | | 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 | | | |
| | 20201109153907219 | Direct Debit: eNE (Internet Banking | | 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.



13 Kaki Bukit Road 4, #03-29, Bartley Biz Centre Singapore 417807
Tel: 6702 4282, 6844 1184 Fax: 6702 4202
Email: admin@aceauto.com.sg
Website: www.aceauto.com.sg

LETTER OF AUTHORISATION

(Company's Stamp if applicable)

| | TO:MR / MRS | | | | |
|---|--|--|--|---|---|
| | RE:ACCIDENT INVOLVING VEHICLE NOS: SKW 8304 V & | GZ | 4598× | ALONG | |
| | BLK DSI HOUGANG AVE3 | ON | 09 11 20 | 20 10:15 am. | |
| | I/WE LEE WEI CHYE Owner of vehicle no. SKW 8304 repair to the said vehicle forthwith. | | sport No: hereby autho | 97132863E orize you to commence | |
| 1 | I/We hereby irrevocably authorize you to settled/payable by the insurance and /of in my name for the costs of repair and los respect for the accident claims and all an absolutely to you. I/We agree to assign the my/our Solicitor(to be appointed by you authorization to pay the amount compensions of the claims to as successful conclusion. | third party or as of use,etc a any amount on the whole prod on my/our be sated direct t | to commence and you appoince claimed, receinceeds of my/o chalf)shall acce to you after de | e legal proceeding, if ne nting any Solicitor to act ved and/or settled shall ur third party claims to y ept this as my/our irrevo eduction of their costs o | t for me in belong you and ocable n a |
| 2 | I/We also irrevocably authorize you to si papers in connection with the above claim appoint such a firm of Solicitors on my/ou party/own insurer's claim. | ms in my/our | absence. I/W | e irrevocable authorize y | you to |
| 3 | I/We undertake to inform you and/or the third party's insurance company commun- further undertake not to accept any mon- without first communicating with you and | nicate with mailes or offer o | e/us directly, f settlement f | orally and in writing and | I I/We |
| 4 | My vehicle is repaired by the repairer on m | y own will wit | hout any induc | ement, threat or promise | |
| 5 | Upon settlement of the third party claim the third party's insurance. I/We undertal settled and related expenses and disburse | ke to pay you | and my / our | | |
| | + | | _ | | |
| | Owner's Signature | | | Witness Signature / | Name |



A U T D L U T I D N P T E L T

13 Kaki Bukit Road 4, #03-29, Bartley Biz Centre Singapore 417807

Tel: 6702 4282, 6844 1184 Fax: 6702 4202

Email: admin@aceauto.com.sg

Website: www.aceauto.com.sg

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| PAYMENT AUTHORISATION FORM |
|---|
| Date: |
| Attn: Motor Claims Department |
| |
| |
| Dear Sir/Mdm |
| r |
| ACCIDENT ON 09 /11 /2020 10:15 AM |
| INVOLVING VEHICLE NOS: SKW 8304U & GZ 4578 x |
| ALONG BLK 251 HOUGANG AVE 3 |
| |
| I/We (Name) LEE WEI CHYE,NRIC/Passport No: S7132863E, |
| The registered owner/driver of vehicle regn.no. SKW 83 040 which was involved In the above accident with your insured motor vehicle reg.no. GF 4598 × |
| mate above accident with your mount vernor regime. |
| I/We also hereby authorize that any payment due to me/us from the foresaid claim to be paid to M/S ACE AUTOLUTION PTE LTD. |
| I/We hereby indemnify M/S ACE AUTOLUTION PTE LTD against all claims and /or damages |
| which may arise from all action taken for and on my/our behalf. |
| I/We hereby affirmed that above-mentioned statement to be true and correct. |
| Yours faithfully, |
| |
| Owner's Signature |

(Company's stamp if applicable)