EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C #01-68 SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: em1autopteltd@gmail.com COMPANY/GST REG. NO: 201316380R

LETTER OF DEMAND

MS First Capital Insurance Ltd Motor Claim Department 36 Robinson Road #16-01 City House Singapore 068877

Attn: Asher Sng

Date of Accident

22-Nov-2020

Our Client's Vehicle Number:

SLV 7934B

Vehicle Make/ Model

MAZDA 3 HB DELUXE

Your Insurer

SHB 2285B

Without Prejudice

DESCRIPTION	SUB-AMOUNT	GST 7%	AMOUNT (SGD)
Lump Sum Repair Cost(Recommend By LKK Taufikh)	5,250.00	367.50	5,617.50 SR
GIA Fee	27.10	1.90	29.00 SR
LTA Fee	6.97	0.49	7.46 SR
Loss of (Rental/Use)(4 Days X \$120)	480.00		480.00 ES

SGD (Six Thousand One Hundred Thirty-Three And Cents Ninety-Five only)

GRAND TOTAL

6,133.95

Subject to 7% GST

369.88

Authorised Signature and Company Stamp.

	LETTER OF AUTHORISATION
AC	CIDENT INVOLVING (any vehicle) SLV 7934B and SHB 2285B
ON	22/11/2020 ALONG MCNAIR ROAD (BIK122) CARPARK
I,	TAN KOK HAN , NRIC No. / Company Reg. No. 16801213 of (address)
8	6801213I of (address)
Pos	stal Code, the registered owner (or authorised agent) of motor vehicle registration number
SI	V 7934B hereby authorise your workshop EM-1 Auto Pte Ltd (Company/GST REG.No.: 201316380R)
Bll	x 8 #01-68 Sector C Sin Ming Industrial Estate Singapore 575643 to :-
1. 2. 3.	Begin or commence repairs to my/our motor vehicle; Start or initiate third party claims for damages incurred by me against third party(ies) responsible for the accident. To instruct EM-1 Auto Pte Ltd on my/our behalf to negotiate a settlement with the third party and/ or his insurers
4. 5.	as you deem fit. To appoint vehicle surveyor on my/our behalf to determine reasonable costs of repair and period of repair. To act on my/our behalf for any documents mailed to EM-I Auto Pte Ltd by the third party and/or his insurers for the

I am prepared to attend at my/our solicitors' office or to attend Court in connection with my/our claim, if necessary, I shall give my full co-operation and support for the claim for cost of repair and loss of use and shall keep you informed of any correspondences and/or summons that I may receive due to this action before agreeing to pay up or receive any monies due to this claim.

I authorise you to claim for the period of loss of use as specified by the motor surveyor or such shorter period due to accelerated work. I further authorise you to accelerate the repair period with overtime work and additional resource, I will pay you a reasonable amount to reflect the additional period of time to shorten. I, further authorize that the monies to be made payable to EM-1 Auto Pte Ltd.

I agree to keep you informed of any document(s), including cheques, mailed to me by third party and/or his insurers before taking any action. I also will not bank in any cheques issued by third party insurance and/or his insurers without the approval of EM-1 Auto Pte Ltd, and should I get approval from EM-1 Auto Pte Ltd to bank in the said cheques, I agree to pay EM-1 Auto Pte Ltd the full settlement amount as stated on the cheques within 5 working days.

Should my/our claim be partly successful or unsuccessful or cannot be proceeded with and/or if any judgement or settlement is not honoured or satisfied by third party, I/We:

- Agree to pay you the sum of monies (as agreed) or as certified by the surveyor appointed, being the costs of repairs, survey fees and/or any other expenses reasonably incurred by you on my/our behalf. You may use the recovered amount from my claim for loss of us to partially offset the difference.
- Agree to pay you such increased cost for additional resources and overtime work to shorten the period of repair.
- Will pay for any shortfall that may result in the settlement amount.

claim of my vehicle, if I am not contactable.

In the event that EM-1 Auto Pte Ltd or the Repairer is compelled to enforce this undertaking, I/We agree that I/we shall pay on a full indemnity basis, the legal costs incurred by EM-1 Auto Pte Ltd or the Repairer.

Signature:	Name: Tan Kok Li	an
Company Stamp:	NRIC No: 86801213I	
(if applicable)	Contact No: 9761 2062	
	Date: 23 11/3020	



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

DISCHARGE RECEIPT

CLAIM REFERENCE

D20004795MFSH

ACCIDENT DATE

22/11/2020

ACCIDENT LOCATION

MCNAIR ROAD (BLK 122) CARPARK

INSURED

CITYCAB PTE LTD

INSURED DRIVER

ONG AH MUA

INSURED VEHICLE

SHB 2285B

INVOLVED PARTY

SLV 7934B

SETTLEMENT SUM

\$5,890.00

I/We, the undernoted 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: TAN KOK LIAN

WITNESS : Chia Sin Mak

Signature and Date: 21/05/2021
Signature and Date: 21/05/2021

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.

EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C #01-68 SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: em1autopteltd@gmail.com

COMPANY/GST REG. NO: 201316380R

TAX INVOICE

M/S TAN KOK LIAN

Invoice No

: 21/00029/5560TP

Date

: 11-May-2021

MS First Capital Insurance Ltd Motor Claim Department 36 Robinson Road #16-01 City House Singapore 068877

Attn: Asher Sng

Date of Accident

22-Nov-2020

Our Client's Vehicle Number:

SLV 7934B

Vehicle Make / Model

MAZDA 3 HB DELUXE

Your Insurer

SHB 2285B

DESCRIPTION	SUB-AMOUNT	GST 7%	AMOUNT (SGD)
Lump Sum Repair Cost(Recommend By LKK Taufikh)	5,250.00	367.50	5,617.50 SR

SGD (Five Thousand Six Hundred Seventeen And Cents Fifty only)

GRAND TOTAL

5,617.50

Subject to 7% GST

367.50

Authorised Signature and Company Stamp

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

SL497348

Print Date/Time:

23 Nov 2020 / 12:07:12

Receipt Date/Time: 23 Nov 2020 / 12:07:12

Tax Invoice/Receipt

Receipt No.: ITNET-00000-201123-001496

Previous Receipt No.:

S/N	Item Description/		Amount	GST	Amount
	Business Transaction Reference		Before	Amount	After GST
	No.		GST (S\$)	(S\$)	(S\$)
Resu	It of Insurance Enquiry - SHB2285B				
As at	22 Nov 2020/11:45:00				
Insur	ance Co: MS FIRST CAPITAL INSURA	NCE LIMITED			
1	Insurance Enquiry - SHB2285B				
	Enquiry Fee		7.00	0.49	7.49
	20201123120527277420				
		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			
		20201123129606237	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.



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-20-145533

Date of Request:

23/11/2020

Your Ref No:

PURCHASE BY EMAIL

EM1 AUTO PTE LTD

BLK 8 #01-68 SIN MING INDUSTRIAL ESTATE SECTOR C

SINGAPORE 575643

Dear Sir/Madam,

Date of Accident:

22/11/2020

Vehicle No:

SLV7934B

Place of Accident:

MCNAIR ROAD (BLK 122) CARPARK

Involving Vehicle No: SHB2285B

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\$)
SHB2285B	MCNAIR ROAD (BLK 122) CARPARK	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 [X] 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-20-145532

Date of Request:

23/11/2020

Your Ref No:

PURCHASE BY EMAIL

EM1 AUTO PTE LTD

BLK 8 #01-68 SIN MING INDUSTRIAL ESTATE SECTOR C

SINGAPORE 575643

Dear Sir/Madam,

Your Vehicle No:

SLV7934B

Date of Accident:

22/11/2020

Place of Accident:

MCNAIR RD

Involving Vehicle No: SHB2285B

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 [X] Cash [] Cheque

Asher Sng (LKKAuto)

From: Eric Woo < Eric Woo@msfirstcapital.com.sg>

Sent: Friday, 7 May 2021 5:23 PM **To:** Asher Sng (LKKAuto)

Subject: RE: [MANDATE REQUEST] RE: SURVEY ASSESSMENT - D20004795MFSH/1 //

EXPRESS SETTLEMENT

Follow Up Flag: Follow up Flag Status: Completed

Dear Asher.

You have our mandate to settle as follow:

Cost of Repair : \$5,617.50

Loss of Use : \$200 - \$240 (\$50 - \$60 x 4days)

LTA : \$36.45

To offer : \$5,853.95 - \$5,893.95

Thank you.

Eric Woo

Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Email:

EricWoo@msfirstcapital.com.sg | Company Regn. No. 195000106C | TEL: 6507 3848

A Member of MS&AD 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: Asher Sng (LKKAuto) < Asher Sng@lkkauto.com>

Sent: Monday, 12 April 2021 11:49 AM

To: Merina Chia < Merina Chia @msfirstcapital.com.sg >

Cc: Admin A <admin-a@lkkauto.com>

Subject: [MANDATE REQUEST] RE: SURVEY ASSESSMENT - D20004795MFSH/1 // EXPRESS SETTLEMENT

Your ref : **D20004795MFSH**

Our ref: CC4/FCI20012968/T1es3q2

Dear Sirs,

ACCIDENT INVOLVING SHB 2285B (OI) AND SLV 7934B (TP) ON 22/11/2020

We refer to the above matter.

The accident occurred when our insured reversed into the minor road and third party vehicle.

Basing on the reports of the circumstance of the accident, we propose to settle third-party claim at 100% liability.

We seek your approval to offer repairer "EM-1 AUTO PTE LTD" at \$ 6,053.95 (all-in).

The summary is as follows: -

Amount Claimed Amount Revised

1. Cost of Repairs (w/GST) \$ 8,524.65 \$ 5,617.50

2. Loss of Rental (4days x \$120) \$ 480.00 \$ 400.00 (4days x \$100)

3. LTA Search Fee \$ 36.45 \$ 36.45

Total \$ 9,041.10 **\$** 6,053.95

Surveyor recommended 4days for repair.

Enclosed here with all the relevant documents for your perusal.

Kindly let us have your approval / instruction.

Thank You.

Best Regards,

Asher Sng | Case Handler LKK Auto Consultants Pte Ltd

email: <u>ashersng@lkkauto.com</u> | fax: 6741-4108 | did: 6841-6051 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | \$(408933)

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.

From: Asher Sng (LKKAuto)

Sent: Friday, 12 March 2021 5:58 PM

To: Merina Chia < Merina Chia @msfirstcapital.com.sg >

Cc: Admin A <admin-a@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D20004795MFSH/1 // EXPRESS SETTLEMENT

Dear Sir/Madam,

We refer to the above matter.

Liability: 100%

.j. 10070

Remark: B: NIL OID REVERSED INTO MINOR ROAD HIT TP

Kindly let us have your approval on liability.

Thank You.

Best Regards,

Asher Sng | Case Handler LKK Auto Consultants Pte Ltd

email: ashersng@lkkauto.com | fax: 6741-4108 | did: 6841-6051

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

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.

From: Merina Chia < Merina Chia @msfirstcapital.com.sg >

Sent: Tuesday, 5 January 2021 11:15 AM **To:** Su Li (LKK Auto) <<u>suli@lkkauto.com</u>>

Cc: Admin A <admin-a@lkkauto.com>; Asher Sng (LKKAuto) <<u>AsherSng@lkkauto.com</u>> Subject: RE: SURVEY ASSESSMENT - D20004795MFSH/1 // EXPRESS SETTLEMENT

Dear Su Li,

Attached our insured GIA report for your perusal.

Please let us have your proposal on liability the soonest.

Thank you.

Best Regards, Merina Chia (Ms) Motor Claims Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Tel: 6507 3848 | DID : 6507 3856 | Fax No. : $6507\ 3849$ | Email: $\underline{\text{merinachia@msfirstcapital.com.sg}}$ | Company Regn. No. 195000106C

A Member of MS&AD Insurance Group

As a response to the COVID19 outbreak, we are observing staggered working hours and some of us are on Work From Home arrangement. However, we are actively working to support our clients and partners. We have access to e-mails and will work to respond in a timely manner.

We appreciate your kind understanding. Stay safe.

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.

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From: Su Li (LKK Auto) < suli@lkkauto.com > Sent: Wednesday, 23 December 2020 9:43 AM
To: Merina Chia < MerinaChia@msfirstcapital.com.sg >

Cc: Admin A <admin-a@lkkauto.com>; Asher Sng (LKKAuto) <<u>AsherSng@lkkauto.com</u>> Subject: RE: SURVEY ASSESSMENT - D20004795MFSH/1 // EXPRESS SETTLEMENT

Dear Merina,

We refer to the above matter.

Kindly advise whether insured has reported. If so, kindly let us have a copy of insured's accident report for our necessary action.

"Best Wishes for Merry Christmas & Happy New Year 2021"

* 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,

Su Li | Admin Support

LKK Auto Consultants Pte Ltd

Phone: 6841 1467 Email: SuLi@lkkauto.com | Fax: 6271 8802

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

Branch : Blk 1007, Bukit Merah Lane 3, #01-11 | S(159721)

From: Su Li (LKK Auto)

Sent: Wednesday, 25 November 2020 2:54 PM **To:** MERINACHIA@MSFIRSTCAPITAL.COM.SG

Cc: Admin A; Asher Sng (LKKAuto)

Subject: RE: SURVEY ASSESSMENT - D20004795MFSH/1 // EXPRESS SETTLEMENT

YOUR REF: D20004795MFSH LKK REF: CC4/FCI20012968/T1es3

Dear Sirs / Madam,

We refer to the above matter.

We have inspected third party vehicle SLV 7934B at M/s EM-1 AUTO PTE LTD on a WP basis and TP repairer proposed for a EXPRESS SETTLEMENT.

Enclosed for your perusal is:

- TP estimated cost of repair
- Preliminary advice

Meanwhile, kindly provide us a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Asher.

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,

Su Li | Admin Support

LKK Auto Consultants Pte Ltd

Phone: 6841 1467 Email: SuLi@lkkauto.com | Fax: 6271 8802

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

Branch: Blk 1007, Bukit Merah Lane 3, #01-11 | S(159721)

From: Admin-D (LKKAuto)

Sent: Tuesday, 24 November 2020 12:06 PM

To: 'Claim Workflow System'; assignments; Admin A; SUR **Cc:** <u>MERINACHIA@MSFIRSTCAPITAL.COM.SG</u>

Subject: RE: SURVEY ASSESSMENT - D20004795MFSH/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 | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |

S(408933)

From: Claim Workflow System < cwsmotorclaims@msfirstcapital.com.sg>

Sent: Tuesday, 24 November, 2020 12:00 PM **To:** ASSIGNMENTS@LKKAUTO.COM

Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; MERINACHIA@MSFIRSTCAPITAL.COM.SG

Subject: PRI: SURVEY ASSESSMENT - D20004795MFSH/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.