



Your Ref: SHB4882P  
Our Ref : TPDS21007 – SLA6407Z

1st February 2021

By Postage

**MS FIRST CAPITAL INSURANCE LTD**

36 Robinson Road #16-01  
City House  
Singapore 068877

Attention: Motor Claims Department

Dear OIC,

**ACCIDENT INVOLVING VEHICLE: SLA6407Z AND SHB4882P AT BLK 348B YISHUN AVE 1 NEAR LAMP POST NO. 4 ON 06.12.2020.**

We are the authorized repair workshop for the owner of motor vehicle no. **SLA6407Z** which is involved in the captioned accident with your insured vehicle **SHB4882P**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

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

1	Cost of Repair as agreed with surveyor	S\$ 6,313.00 (inclusive GST)
2	5 days of Loss of Rental@ \$150.00	S\$ 750.00
3	LTA Report fee	S\$ 7.45
	Total	<u>S\$ 7,070.45</u>

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

- a. Proforma Invoice
- b. LTA/GIA Report fee
- c. Rental agreement
- d. GIA Report

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

**Gan Li Hui**  
For Complete VMS Pte Ltd

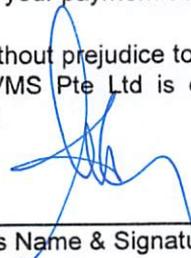
To: Complete VMS Pte Ltd  
176, Sin Ming Drive,  
#03-14, Sin Ming Autocare Complex  
Singapore 575721

**LETTER OF AUTHORIZATION**

RE: ACCIDENT BETWEEN SLA6407Z / SHB4882P (Vehicle Numbers)  
ON 06/12/2020 <sup>1710 hrs</sup> (Date of Accident) AT Yishun Avenue 1 - Near Lamp post  
NO. 4

1. I/We, the owner of vehicle no. SLA6407Z hereby appoint you to act for me to repair and recover damages sustained to my vehicle in the above accident from the third party driver and / or his / her insurers.
2. In this respect, I/We have authorized you to repair, correspond, negotiate and settle on my behalf, all claims against the parties involved in the subject accident. All final financial awards in my favor pertaining to the subject accident claim are to be paid to Complete VMS Pte Ltd.
3. By way of this Letter of Authorization, I/We also further authorized you to sign all Discharge Vouchers and any other related documents in settlement of the subject accident claims. I/We hereby undertake to ratify and reaffirm such signing of Discharge Vouchers and/or documents from any third party insurers by us.
4. During the settlement process with the third party insurers / drivers, you may act fully on my behalf and all negotiations and correspondences given by you to the third party insurers / driver are as if given directly from me. With regards to the settlement of the above subject accident claim, I/We agree and undertake to ratify all correspondences and negotiations given by you to the third party insurers / driver and further agree and undertake to be bound by all acts performed or carded out by you.
5. I/We understand that should the subject accident claims fail or not able to reach an amicably settlement with the third party insurers or driver, I/We will have to appointed a solicitors by way of signing a warrant to act in present of the appointed solicitor to further pursue the matter and to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable). I/We further agrees that should I/We fails or disagrees to appoint a solicitors at that stage, I/We shall be fully liable for all costs incurred to you until that point of time.
6. I/We further confirm my/our understanding that I/We shall render my/our full co-operation pertaining to the settlement of the subject accident and method of repair adopted shall be in accordance to the standard practices of the industry and will be at the full discretion of you.
7. I/We hereby agree that upon settlement of the above subject accident claim, I/We are required to sign Discharge Voucher/s issued by the third party insurers. After which all settlement monies shall be used to settle all costs and fee incurred to carry out the above subject accident repairs and claims. This settlement monies shall constitute a full discharge of your payment obligation to us.
8. Any indemnity / discharge voucher signed by the workshop is without prejudice to my rights to claim for compensation for my personal injury (if any). Complete VMS Pte Ltd is only authorized to negotiate and finalized with Third Party for my property damages

Signature :  \_\_\_\_\_

  
Witness's Name & Signature

Name : Rashseyd Bin Mohamad

Date : 7/12/2020

Company Stamp (if applicable) : \_\_\_\_\_

Email: \_\_\_\_\_

**DISCHARGE RECEIPT**

CLAIM REFERENCE : D20004943MFSH  
ACCIDENT DATE : 06/12/2020  
ACCIDENT LOCATION : YISHUN AVE 1 TWDS YISHUN AVE 8  
INSURED : CITYCAB PTE LTD  
INSURED DRIVER : LIM LI LI  
INSURED VEHICLE : SHB 4882P  
INVOLVED PARTY : SLA 6407Z  
SETTLEMENT SUM : \$6,920.45

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 : RASHSEYD BIN MOHAMAD

Signature and Date:  7/6/2021

WITNESS : 

Signature and Date :  7/6/2021

This indemnity is signed without prejudice  
to my rights to claim for compensation  
for my personal injury.

# TAX INVOICE

MS First Capital Insurance Ltd  
36, Robinson Road  
#16-01 City House  
SINGAPORE 068877

**Invoice Date**  
07 Jun 2021

**Account Number**

**Invoice Number**  
INV-VM016523

**Reference**  
SLA6407Z / DOA:6/12/2020

**GST**  
200416180E



Complete VMS Pte Ltd  
176 Sin Ming Drive, #03-14,  
Sin Ming Autocare  
SINGAPORE SINGAPORE  
575721  
SINGAPORE

Description	Quantity	Unit Price	Discount	Amount SGD
Cost of Repair As Agreed At	1.00	5,900.00		5,900.00
			Subtotal	5,900.00
			Total Local supply of goods and services 7%	413.00
			Invoice Total SGD	6,313.00
			Total Net Payments SGD	0.00
			<b>Amount Due SGD</b>	<b>6,313.00</b>

**Due Date: 21 Jun 2021**

PayNow / SGQR





## Invoice

SLA6407Z  
RASHSEYD BIN MOHAMAD

Invoice No : GPLIN0002081  
Invoice Date : 11/12/2020  
Due Date : 11/12/2020  
VHA No : 2411  
Referral ID : C033

Description :	Amount
Rental for 5 Day/s @ \$150 per Day \$	750.00

Vehicle No : SLR8194J

Vehicle Description : Toyota Wish 1.8X A

Rental Period : 07/12/2020 to 11/12/2020

Total Amount Payable : \$ 750.00

# GOOD WAY RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875  
Tel: 6315 8479 H/P: 9833 0807

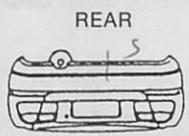
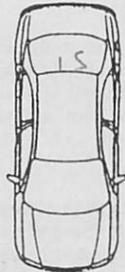
VHA No: 2411

Invoice No: GPLIN 2081

Hirer's Vehicle No :

UEN: 201505120D

## VEHICLE RENTAL AGREEMENT

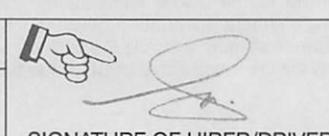
<p><b>HIRER'S PARTICULARS</b></p> <p>Name: (as in I/C) <u>Rashsyd bin Mchamad</u></p> <p>NRIC / FIN No: <u>S8722115F</u></p> <p>Address (Res): <u>Blk 216B, compassvale Drive #06-546 S242216</u></p> <p>Name &amp; Address of Employer: _____</p> <p>Occupation: _____ Driving Exp: _____</p> <p>Singapore Driving Licence No: _____</p> <p>Issue Date: _____ Date of Birth: _____</p> <p>Tel: (O) _____ (R) _____ HP: _____</p> <p><b>ADDITIONAL DRIVER'S PARTICULARS</b></p> <p>Name: (as in I/C) _____</p> <p>NRIC / FIN No: _____</p> <p>Address (Res): _____</p> <p>Occupation: _____ Driving Exp: _____</p> <p>Singapore Driving Licence No: _____</p> <p>Issue Date: _____ Date of Birth: _____</p> <p>Tel: (O) _____ (R): _____ H/P: _____</p> <p><b>VEHICLE CHECK LIST</b></p> <p style="font-size: small;">INDICATE: D - DENTS S - SCRATCHES A - ACCIDENTS</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  RIGHT         </div> <div style="text-align: center;">  REAR         </div> <div style="text-align: center;">  TOP         </div> <div style="text-align: center;">  LEFT         </div> </div> <p style="font-size: small;">FRONT</p> <p><b>MISSING / FAULTY ACCESSORIES / PARTS</b></p> <p>REMARKS : _____</p>	<p>Vehicle No: <u>SLR 8194J</u> Replace Veh No: _____</p> <p>Mileage Out: <u>63240</u> Mileage Out: _____</p> <p>Make &amp; Model: <u>TOYOTA WISH 1.8A</u> Auto / Manual</p> <p>Out : Date <u>7/12/2020</u> Time: <u>09:05</u></p> <p>HIRE / PERIOD EXPIRY Time: _____</p> <p>NON-WAIVER EXCESS=\$ <u>3000/-</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">CHARGES</th> <th></th> <th></th> </tr> <tr> <td>Daily</td> <td><u>5</u> @\$ <u>150</u> per day</td> <td><u>\$750</u></td> <td><u>-</u></td> </tr> <tr> <td>Weekly</td> <td>@ \$ _____ per week</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td>@ \$ _____ per month</td> <td></td> <td></td> </tr> <tr> <td>Hours</td> <td>@ \$ _____ per hour</td> <td></td> <td></td> </tr> <tr> <td>Extension</td> <td>@ \$ _____</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Delivery/Collection Service</td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>SUB-TOTAL \$</b></td> <td></td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="10" style="text-align: center;">PETROL LEVEL</th> </tr> <tr> <td>Out</td> <td>E</td> <td>1/8</td> <td>1/4</td> <td>3/8</td> <td>1/2</td> <td>5/8</td> <td>3/4</td> <td>7/8</td> <td>F</td> <td></td> </tr> <tr> <td>In</td> <td>E</td> <td>1/8</td> <td>1/4</td> <td><u>3/8</u></td> <td>1/2</td> <td>5/8</td> <td>3/4</td> <td>7/8</td> <td>F</td> <td></td> </tr> <tr> <td colspan="10">Fuel</td> </tr> <tr> <td colspan="10">Traffic / Parking Fines</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>TOTAL CHARGES \$</b></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p>Hirer's Signature </p> <p>Additional Driver's Signature _____</p>	CHARGES				Daily	<u>5</u> @\$ <u>150</u> per day	<u>\$750</u>	<u>-</u>	Weekly	@ \$ _____ per week			Monthly	@ \$ _____ per month			Hours	@ \$ _____ per hour			Extension	@ \$ _____			Delivery/Collection Service				<b>SUB-TOTAL \$</b>				PETROL LEVEL										Out	E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F		In	E	1/8	1/4	<u>3/8</u>	1/2	5/8	3/4	7/8	F		Fuel										Traffic / Parking Fines										<b>TOTAL CHARGES \$</b>										
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I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given GOOD WAY RENT-A-CAR PTE LTD in connection with this agreement is true.

**\*IMPORTANT**

1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
5. IN CASE OF ACCIDENT. THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES. A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY GOOD WAY RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN " SIGNATURE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO GOOD WAY RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	
<u>11/12/20</u>	<u>4:20 PM</u>	<u>63510</u>			 SIGNATURE OF HIRER/DRIVER

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 07 Dec 2020 / 10:45:09

Receipt Date/Time : 07 Dec 2020 / 10:45:09

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-201207-000969

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 - SHB4882P As at 06 Dec 2020/00:00:01 Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHB4882P Enquiry Fee 20201207104439001262	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				-0.04
<b>Total Amount Payable</b>				7.45

Paid By			
kb5zx0gz--2LT530789H942581VCredit Card			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.

**RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK REF : CC4/FCI20013500/Krs3**

Merina Chia <MerinaChia@msfirstcapital.com.sg>

Wed 4/14/2021 12:13 PM

To: Jaslin Kok (LKK Auto) <jaslinkok@lkkauto.com>

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

Dear Jaslin,

Please proceed to negotiate from **\$6,920.45-\$7,070.45**.

- To get final tax invoice bill to MS FCIL
- To get letter of authorisation
- Loss of rental - \$120-\$150 x 5 days

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: [merinachia@msfirstcapital.com.sg](mailto: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.*

*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:** Tuesday, 9 March 2021 4:51 PM

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

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

**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK REF : CC4/FCI20013500/Krs3

Dear Sirs/Mdm,

**ACCIDENT INVOLVING SHB 4882P (FCI) AND SLA 6407Z (TP) ON 06/12/2020**

We refer to the above matter.

We seek your approval to offer repairer "**COMPLETE VMS PTE LTD**" at **\$ 7,070.45 (all-in)**.

The summary is as follows: -

	Amount Claimed	Amount Revised
1. Cost of Repair	\$ 12,864.47	\$ 6,313.00 (\$5,900.00 + 7% GST)

2. Loss of Rental (5 days x \$150.00)	\$ 750.00	\$ 750.00 (5 days x \$150.00)
3. LTA Search Fee	\$ 7.45	\$ 7.45
<b>Total</b>	\$ 4,139.20	<b>\$ 7,070.45</b>

Surveyor recommended 5 days for repair.

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:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>

**Sent:** Monday, 8 February 2021 12:36 PM

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

**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
REF : CC4/FCI20013500/Krs3

Dear Jaslin,

We are agreeable with your proposal on liability.

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: [merinachia@msfirstcapital.com.sg](mailto:merinachia@msfirstcapital.com.sg) | Company Regn. No. 195000106C

A Member of **MS&AD** Insurance Group

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

**Sent:** Friday, 5 February 2021 8:46 AM

**To:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>

**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
**REF :** CC4/FCI20013500/Krs3

Dear Merina

**Enclosed for your perusal is:**

- **preliminary advice**

Liability: 100%

Remarks: Insured driver rear ended TP

Kindly let us have your approval on liability.

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:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>

**Sent:** Tuesday, 5 January 2021 11:43 AM

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

**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
**REF :** CC4/FCI20013500/Krs3

Dear Jaslin,

Any prelim report with parts price?

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: [merinachia@msfirstcapital.com.sg](mailto:merinachia@msfirstcapital.com.sg) | Company Regn. No. 195000106C

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**From:** Jaslin Kok (LKK Auto) <[jaslinkok@lkkauto.com](mailto:jaslinkok@lkkauto.com)>  
**Sent:** Tuesday, 5 January 2021 11:25 AM  
**To:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>  
**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
REF : CC4/FCI20013500/Krs3

Dear Merina

We refer to the above matter.

Liability: 100%

Remarks: Insured driver rear ended TP

Kindly let us have your approval on liability.

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)

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**From:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>  
**Sent:** Tuesday, 5 January 2021 11:20 AM  
**To:** Su Li (LKK Auto) <[suli@lkkauto.com](mailto:suli@lkkauto.com)>  
**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; Jaslin Kok (LKK Auto) <[jaslinkok@lkkauto.com](mailto:jaslinkok@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
REF : CC4/FCI20013500/Krs3

Dear Su Li,

Attached our insured GIA report for your perusal.

Please let us have 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: [merinachia@msfirstcapital.com.sg](mailto: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.

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.

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**From:** Su Li (LKK Auto) <[suli@lkkauto.com](mailto:suli@lkkauto.com)>  
**Sent:** Wednesday, 23 December 2020 9:45 AM  
**To:** Merina Chia <[MerinaChia@msfirstcapital.com.sg](mailto:MerinaChia@msfirstcapital.com.sg)>  
**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; Jaslin Kok (LKK Auto) <[jaslinkok@lkkauto.com](mailto:jaslinkok@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
REF : CC4/FCI20013500/Krs3

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](mailto: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)

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**From:** Su Li (LKK Auto)  
**Sent:** Wednesday, 9 December 2020 2:31 PM  
**To:** [MERINACHIA@MSFIRSTCAPITAL.COM.SG](mailto:MERINACHIA@MSFIRSTCAPITAL.COM.SG)  
**Cc:** Admin A; Jaslin Kok (LKK Auto)  
**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1 // EXPRESS SETTLEMENT // LKK  
REF : CC4/FCI20013500/Krs3

**YOUR REF: D20004943MFSH**

**LKK REF: CC4/FCI20013500/Krs3**

Dear Sir / Madam,

We refer to the above matter.

We have inspected third party vehicle SLA 6407Z at M/s COMPLETE VMS PTE LTD on a WP basis and TP repairer proposed for a EXPRESS SETTLEMENT.

**Enclosed for your perusal is:**

- **Estimated cost of repair (incomplete – no parts price)**

- **TP GIA report**

We will revert to you on preliminary advice in due course.

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

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

***To check availability of the case handler, you may contact the undersigned.***

***"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](mailto: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)

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**From:** Admin-D (LKKAuto)

**Sent:** Tuesday, 8 December 2020 10:24 AM

**To:** 'Claim Workflow System'; assignments; Admin A

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

**Subject:** RE: SURVEY ASSESSMENT - D20004943MFSH/1

Dear Sir/Madam,

Thank you for the assignment.

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

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:** Tuesday, 8 December, 2020 9:07 AM

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

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

[MERINACHIA@MSFIRSTCAPITAL.COM.SG](mailto:MERINACHIA@MSFIRSTCAPITAL.COM.SG)

**Subject:** PRI: SURVEY ASSESSMENT - D20004943MFSH/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.**