



聯成汽車維修

SUCCESS UNITED PTE LTD

2 Kaki Bukit Ave 2, #01-33 / #02-29 Kaki Bukit AutoHub Singapore 417921

Tel: 6746 1515 / 6747 1787 Fax: 6748 5015

www.successunited.com.sg Co. / GST Reg: 200402570G

Your Ref: SME 3887H

25th Jan 2021

M/s. **AIG Asia Pacific Insurance Pte Ltd**

AIG Building

78 Shenton Way, #07-16

Singapore 079120

Attn: Motor Claims

Dear Sir

Re: Acc Invlg SKA 2226S & SME 3887H on 10.11.20

We refer to the above accident which was caused due to the negligence of your insured driver of Veh No. SME 9887H

We are claiming for the following costs and losses incurred:

1)	Cost of Repairs (Inc. 7% GST)	\$	214.00
2)	GIA Search Fee	\$	2.00
3)	Loss of Use (\$70 x 2 days)	\$	140.00
Total:		<u>\$</u>	<u>356.00</u>

Enclosed herein the following documents for your perusal.

- 1) Final Repair Bill No. TP20-096F
- 2) GIA Search Fee
- 3) Letter of Authorization

We appreciate your prompt attention and response.

Yours faithfully

Email: sirina@successunited.com.sg

SUCCESS UNITED PTE LTD

2 Kaki Bukit Ave 2, #01-33/02-29 Kaki Bukit AutoHub S(417921)

Tel: 67461515 / 67461787 Fax: 67485015

CO/GST Regn No. 200402570G

Final Repair Bill : **TP20-096F**

M/s. **AIG Asia Pacific Insurance Pte Ltd**

Date : 13th Jan 2021

AIG Building

78 Shenton Way, #07-16

Singapore 079120

Vehicle No : **SKA 2226S**

Make/ Model : Toyota Vios

Attn : Motor Claims

Chassis No : MR2B23F3101189251

Date of Acc. : 10.11.2020

Tel : 64191053

Fax : 68357416

Your Ref. :

<i>S/n.</i>	<i>Qty</i>	<i>Particulars</i>	<i>Unit Price</i>	<i>Amount</i>
		To repair & respray painting on rear bumper & rear fender RH	\$	200.00



for Success United Pte Ltd

Sub Total :	\$	200.00
Add GST 7% :	\$	14.00
TOTAL DUE :	\$	214.00

Third Party Insurer Enquiry

Our Ref No: GR-20-139326

Date of Request: 11/11/2020

Your Ref No:

Online Purchase

Success United Pte Ltd
2 Kaki Bukit Ave 2 #01-33
Kaki Bukit AutoHub
Singapore 417921

Dear Sir/Madam,

Enquiry Date 11/11/2020

Enquiry By Teo Wee Keong

TP Vehicle No. SME3887H

Accident Date 10/11/2020

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SME3887H	AIG Asia Pacific Insurance Pte. Ltd.	27/09/2020-26/09/2021	65-6419-3000

Thank You.

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.

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RECORDS MANAGEMENT CENTRE

**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-20-139326

Date of Request: 11/11/2020

Your Ref No:

Online Purchase

Success United Pte Ltd
2 Kaki Bukit Ave 2 #01-33
Kaki Bukit AutoHub
Singapore 417921

Dear Sir/Madam,

Enquiry Date 11/11/2020
Enquiry By Teo Wee Keong
TP Vehicle No. SME3887H
Accident Date 10/11/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

LETTER OF AUTHORISATION

To: **Success United Pte Ltd**
Singapore

RE: **ACCIDENT INVOLVING VEHICLE NOS: SKA 2226S & SME 3887H**
ALONG Tampines Ave 10 ON 10.11.2020

I, **Ng Hen Ngiuk** **NRIC No: S1577388Z**
of **32 Lorong Mydin #12-05 Singapore 416826**

the owner of vehicle no. **SKA 2226S** hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request:

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident claim and all and any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My insurer is **Aviva Ltd**
Policy No. **10939858**

Expiry Date : **29.09.2021**

Date : **16.12.2020**

Excess : **N/A**



Owner's Signature/Co's stamp
Ng Hen Ngiuk
NRIC No : **S1577388Z**



Witness Signature/Name