

Letter Of Claim For Uninsured Loss

Insurance Company: LONDAC Date: 26/03/2021  
Address : \_\_\_\_\_  
Attention : Claims Department - Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number SLU7215Z & GBF39034  
at PIR NEAR EXIT 41 on 23/02/2021

I am the owner of Vehicle Number SLU7215Z which was involved with the accident as mentioned above.

As the accident was solely caused by your insured vehicle, bearing registration number GBF39034, I hereby submit my claim against your company for the uninsured loss which are as follows:

<del>Excess payment for OD claim</del> <u>car</u>	\$	<u>8476.71</u>
Loss of usage (\$\$/day) for _____ days	\$	_____
Car rental as per invoice attached	\$	<u>428.00</u>
Search fee	\$	<u>2.00</u>
Others <u>MEDICAL FEE</u>	\$	<u>68.48</u>
<b>Total claim amount</b>	\$	<u><b>8975.19</b></u>

Enclosed please find copies of GIA report, invoices and certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof, or alternatively let me have the full and final settlement for all uninsured loss which amounted to \$ 8975.19, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely

(Owner of motor vehicle)  
Name : LIM CHENG HAN  
Address : S1E 291C BT BATAK ST24  
#18-27 S(652291)  
Telephone : 97858741



**LETTER OF AUTHORITY AND INDEMNITY**

- Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623
- Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
- Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623
- TC Autoclinic Pte Ltd, 25, Leng Kee Road, Singapore 159097
- TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

**Type of Claim:**

- Third Party (Direct Settlement)
- Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SLU 72152 AND GBF39034  
 ON 23/02/2021 AT PIE EXIT 41 (NRA)

1. I, the owner of vehicle no. SLU 72152 hereby instruct you and authorise you to act for me with respect to the following: -
- (a) To submit my claims for all loses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
  - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
  - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
  - (d) To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my 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 agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
- a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
  - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

<b>Claimant's Particulars</b>		<b>Authorized Workshop</b> <u>LAURENCE TEO</u>	
Name <u>LIM CHENG HAN</u>		Company Name	
Address <u>BK 291C BT BATAK ST24</u>		Claim Officer's Name	
<u>#18-27 S' 652291</u>		<div style="border: 1px solid black; padding: 5px;">           TAN CHONG MOTOR SALES PTE LTD            913 BUKIT TIMAH ROAD            SINGAPORE 589623            TEL : 6466 7711 FAX : 6469 7472         </div>	
Telephone No <u>97858741</u>			
Date <u>24.02.2021</u>	Email <u>cheng.han.lim@tdtactics.com</u>	Date	
Company Stamp [For Co Regn Vehicle]	Authorized Signature <u>[Signature]</u>	Claim Officer Signature <u>[Signature]</u>	



# LONPAC INSURANCE BHD

CLAIM NO : 20/21/21/VC00/024264

DATE : 28 APRIL 2021

## DISCHARGE VOUCHER

I/We, LIM CHENG HAN confirmed acceptance from M/s **LONPAC INSURANCE BHD** and/or owner of GBF3903U the sum of Singapore Dollar Eight Thousand Nine Hundred Seventy Five and Cents Nineteen Only (**\$8,975.19**) in full and final satisfaction, liquidation and discharge of all property losses competent to me/us upon the said M/s **LONPAC INSURANCE BHD** in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving SLU7215Z and GBF3903U on 23/02/2021 along PIE NEAR EXIT 41.

I /We hereby agree to indemnify and keep indemnify (**LONPAC INSURANCE BHD/ KEW STRUCTURES PTE LTD AND/OR ZHENG DEJIAN**) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to **TAN CHONG MOTOR SALES PTE LTD.**

I/We hereby acknowledged that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.

 . 28.04.2021  
.....  
Signature of vehicle owner/Date

LIM CHENG HAN 28.04.2021  
.....  
Name of vehicle owner /Date



www.tanchong.com

## Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622  
 SERVICE CENTRES  
 913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
 17 LORONG 8 TOA PAYOH SINGAPORE 319254. TEL: 63570753/4/5

GST Regn No : 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : LONPAC INSURANCE BHD  
 ADDRESS : 300 BEACH RD  
 TELEPHONE : #17-04/07 THE CONCOURSE S(199555)  
 MODEL : 62507388  
 ENGINE NO : FRLARDWJ11USA--A--  
 CHASSIS NO : HRA2531456A  
 VEHICLE NO : SJNFEAJ11U2119610  
 SLU7215Z

INVOICE NO : W12142498  
 INVOICE DATE : 26-MAR-2021  
 TERMS : CREDIT  
 DATE REC'D : 05-MAR-2021  
 SA/SE : LAW  
 JOB NO : BG1099035  
 MILEAGE : 056349  
 YOUR REFERENCE : INS/IC/LAW/0055/

ITEMS	JOB DESCRIPTION	Credit terms	30 AMOUNT
1	LABOUR		
1	REMOVE/INSTALL & TEST REAR REVERSE CAMERA		120.00
2	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL \$120/PANEL X 03		120.00
3	SUPPLY & INSTALL REVERSE SENSOR		110.00
4	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA \$100/PANEL X 03		100.00
5	INSTALL ULTRAMAX SOLAR FILM - REAR W/SCREEN		150.00
6	RENEW REAR WINDSCREEN GLASS ASSY.		240.00
7	REPAIR LH/RH REAR FENDER AND RENEW TAILGATE, REAR BUMPER AND END PANEL		1170.00
8	S/PAINT REAR PORTION		850.00
9	CHECK LIGHTING		48.00
10	TRANSFER TAILGATE MECHNICAL PARTS		80.00
11	R/I REAR DVR TO ASSIST REPAIR		120.00
	SUBTOTAL	:	3108.00
	PARTS		
1	GROMMET BUMPER \$2.40 EA X 02		4.80
	Qty:2 @ \$2.40 each (Special Nett Item)		
2	CLIP FENDER ARC/BUMPER \$1.30 EA X 04		4.16
	Qty:4 @ \$1.30 each (Disc:20.00% After Disc:\$4.16each)		

DOLLARS:

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER



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SERVICE CENTRES  
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
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GST Regn No: 19-9106231-D

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GST REG: 19-9106231-D

NAME : LONPAC INSURANCE BHD  
ADDRESS : 300 BEACH RD  
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MODEL : 62507388  
ENGINE NO : FRLARDWJ11USA--A--  
CHASSIS NO : HRA2531456A  
VEHICLE NO : SJNFEAJ11U2119610  
SLU7215Z

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DATE REC'D : CREDIT  
SA/SE : 05-MAR-2021  
JOB NO : LAW  
MILEAGE : BG1099035  
YOUR REFERENCE : 056349  
INS/IC/LAW/0055/

ITEMS	2	JOB DESCRIPTION	Credit terms	30	AMOUNT
3		CLIP C/LAMP \$5.40 EA X 02 Qty:2 @ \$5.40 each (Disc:20.00% After Disc:\$8.64each)			8.64
4		GROMMET BUMPER \$2.70 EA X 04 Qty:4 @ \$2.70 each (Disc:20.00% After Disc:\$8.64each)			8.64
5		GROMMET C/LAMP \$2.00 EA X 02 Qty:2 @ \$2.00 each (Disc:20.00% After Disc:\$3.20each)			3.20
6		GROMMET C/LAMP \$27.90 EA X 02 Qty:2 @ \$27.90 each (Disc:20.00% After Disc:\$44.64each)			44.64
7		CANOE RIVET BUMPER \$7.10 EA X 02 Qty:2 @ \$7.10 each (Disc:20.00% After Disc:\$11.36each)			11.36
8		FASCIA-RR BUMP Qty:1 @ \$796.70 each (Disc:20.00% After Disc:\$637.36each)			637.36
9		CLIP BUMPER \$8.00 EA X 03 Qty:3 @ \$8.00 each (Disc:20.00% After Disc:\$19.20each)			19.20
10		GLASS-TAIL GATE Qty:1 @ \$990.00 each (Disc:20.00% After Disc:\$792.00each)			792.00
11		A FIN BACK DOOR TOP NO PLATE Qty:1 @ \$352.00 each (Disc:20.00% After Disc:\$281.60each)			281.60
12		EMBLEM-REAR Qty:1 @ \$64.90 each (Disc:20.00% After Disc:\$51.92each)			51.92
13		EMBLEM Qty:1 @ \$94.40 each (Disc:20.00% After Disc:\$75.52each)			75.52

DOLLARS:

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## Tan Chong Motor Sales Pte Ltd

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 913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
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 SLU7215Z

INVOICE NO :  
 INVOICE DATE : W12142498  
 TERMS : 26-MAR-2021  
 DATE REC'D : CREDIT  
 SA/SE : 05-MAR-2021  
 JOB NO : LAW  
 MILEAGE : BG1099035  
 YOUR REFERENCE : 056349  
 INS/IC/LAW/0055/:

ITEMS	3	JOB DESCRIPTION	Credit terms	30	AMOUNT
14		CAMERA BRACKET			20.00
		Qty:1 @ \$20.00 each (Special Nett Item)			
15		RUBBER-DUM			51.04
		Qty:1 @ \$63.80 each (Disc:20.00% After Disc:\$51.04each)			
16		DOOR BACK			2450.08
		Qty:1 @ \$3062.60 each (Disc:20.00% After Disc:\$2450.08each)			
17		SUNDRIES			20.00
		Qty:1 @ \$20.00 each (Special Nett Item)			
18		REAR W/SCREEN SEALANT			80.00
		Qty:1 @ \$80.00 each (Special Nett Item)			
19		SENSOR-REVERSE			250.00
		Qty:1 @ \$250.00 each (Special Nett Item)			
		SUBTOTAL	:		4814.16
REMARKS					
1		AIG CLAIM AGAINST LONPAC INSURANCE			
		DOA:23.02.2021			
2		TOC:23.02.2021			
		TOC:DIRECT SETTLEMENT			
3		OUR REF:INS/IC/LAW/0055/2021			
		SATISFACTION NOTE ATTACHED			
4		SURVEY BY LKK RASUL ON 02.03.2021 @ 1000HRS			
		RECOMMEND 4 DAYS REPAIR			

DOLLARS:

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SA/SE : 05-MAR-2021  
JOB NO : LAW  
MILEAGE : BG1099035  
YOUR REFERENCE : 056349  
INS/IC/LAW/0055/

ITEMS	4	JOB DESCRIPTION	Credit terms	30	AMOUNT	
5		AUTHORISE BY LKK HSIAO TONG REPAIR FROM 09.03.2021 - 12.03.2021				
6		*** RENTAL BY TCMS (DTS) H/A:43955 TAX INV. N104156 \$428.00				
7		WITH MEDICAL CLAIM \$68.48 ***				
Insurance Co : LONPAC INSURANCE BHD Policy No.....: TP-GBF3903U Claim Type ..: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA.....: 23-FEB-2021 Our Ref.....: INS/IC/LAW/0055/2021 Surveyor.....: M/S LKK ENGINEERING & MANAGEMENT SERVICES						
					LABOUR :	3108.00
					PARTS :	4814.16
					SUBTOTAL :	7922.16
					TOTAL :	7922.16
					GST(7%) :	554.55
					AMOUNT DUE :	8476.71

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)  
DOLLARS: EIGHT THOUSAND FOUR HUNDRED SEVENTY  
SIX AND CENTS SEVENTY ONE ONLY.

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**DOWNTOWN TRAVEL SERVICES PTE LTD**

19 Lorong 8 Toa Payoh Singapore 319255  
Tel (65) 63341700 Fax (65) 63364677  
Co. Reg. No. 1984-03671/H

LONPAC INSURANCE BHD

100 BEACH RD  
#19-00 SHAW TOWER

S(189702)

GST Reg No. : M2-0067432-4  
Tax Invoice : N104156  
Inv. date...: 16-MAR-2021  
Print date...: 22-MAR-2021  
Print time...: 12:02:18  
Page no.....: 1  
Agreement no: N43955

Description	Amount
RENTAL CHARGE FROM 09-MAR-2021 TO 13-MAR-2021(SLQ9901J )	400.00
TOTAL (BEFORE GST)	400.00
GST (7%)	28.00
TOTAL (AFTER GST)	428.00

**DOWNTOWN TRAVEL SERVICES PTE LTD**

Authorised Signature

**N.B.** Cheques should be crossed and made payable to  
**DOWNTOWN TRAVEL SERVICES PTE LTD**  
Interest at 0.05% per day on overdue account. Terms  
of payment strictly 7 days.

81072152

Vehicle Number: SLQ 99013 Make & Model: SUBARU IMPREZA 1.6 Date: 09/03/2021  
Change Over 1: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_  
Change Over 2: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

**Hirer**  
Name: LON PAC  
Address: \_\_\_\_\_  
Singapore ( )  
Contact Person: \_\_\_\_\_ Tel: \_\_\_\_\_

**1st Driver**  
Name: LIM CHENG MAN  
Address: 291C Bukit Batek St 24  
#18-27  
Singapore ( 652291 )  
Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (HP)  
Occupation: \_\_\_\_\_ Date of Birth: 24/09/67  
Passport / NRIC No: S18042874 Nationality: SGP  
Driver's Licence No: - Driving Exp.: 34 yrs  
Country of Issue: SGP Expiry Date: -

**Additional Driver**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Singapore ( )  
Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (HP)  
Occupation: \_\_\_\_\_ Date of Birth: 24/09/67  
Passport / NRIC No: S18042874 Nationality: SGP  
Driver's Licence No: - Driving Exp.: 34 yrs  
Country of Issue: SGP Expiry Date: -

**Mode of Payment**  
CASH ( ) AMEX ( ) MASTERCARD ( ) VISA ( )  
DINERS ( ) CHEQUE ( ) COM. BILLING ( ) INT. BILLING ( )  
CHEQ / CARD NO. \_\_\_\_\_  
Expiry Date: \_\_\_\_\_

**Remarks / Delivery Location**  
SLU 7215 Z  
#100/day x 04  
Number of keys given: \_\_\_\_\_

Hirer hereby agrees to abide to the terms and conditions as set out overleaf. If I opt to pay by credit / charge card, my signature here will be deemed to have been made on the applicable credit card charge slip.

NB. Vehicle taken must be returned by appointed time and date otherwise an extra charge will be applied.

[Signature]  
HIRER'S SIGNATURE

[Signature]  
DOWNTOWN TRAVEL SERVICES PTE LTD

**For Official Use**  
INV No.: \_\_\_\_\_ O/R No.: \_\_\_\_\_ Date: \_\_\_\_\_  
INV No.: \_\_\_\_\_ O/R No.: \_\_\_\_\_ Date: \_\_\_\_\_  
INV No.: \_\_\_\_\_ O/R No.: \_\_\_\_\_ Date: \_\_\_\_\_

**Check In / Out**  
Date Out: 09/03/21 Time Out: 0930AM Km Out: 4487.4  
Petrol Level: E 1/4 1/2 3/4  F  
Agreed Date of Return: \_\_\_\_\_  
Date In: 03/03/21 Time In: 0919 Km In: 4518.4  
Petrol Level: E 1/4 1/2 3/4  F

**Collision Damage Waiver**  
ACCEPTS To Pay Extra Fees  
Daily S\$ \_\_\_\_\_  
Weekly S\$ \_\_\_\_\_  
Monthly S\$ \_\_\_\_\_  
Weekend S\$ \_\_\_\_\_  
Non-Waiverable Excess S\$ 2000 per accident  
Signature: [Signature]

DECLINES Hirer Declines CDW  
Excess S\$ \_\_\_\_\_ per accident  
Signature: [Signature]

**Personal Accident Insurance**  
ACCEPTS To Pay Extra Fees  
Daily S\$ \_\_\_\_\_  
Weekly S\$ \_\_\_\_\_  
Monthly S\$ \_\_\_\_\_  
Weekend S\$ \_\_\_\_\_  
Signature: [Signature]

DECLINES Hirer Declines PAI  
Signature: [Signature]

Malaysia Charge	S\$	cts
Per Day		
Per Week		
Per Month		
CDW		
PAI		
7% GST		
<b>Total</b>		

Per Day	S\$	
Per Week	S\$	
Per Month	S\$	
Weekend	S\$	
<b>Rental Charges</b>		
CDW		
PAI		
Delivery / Collection		
Others		
7% GST		
<b>Sub Total</b>		

Rental Extension		
CDW		
PAI		
7% GST		
<b>Extention Charges</b>		
Petrol		
Excess / Non-Waiverable Excess		
Others		
7% GST		
<b>Addendum Charges</b>		
<b>Overall Charges</b>		

INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

gbf3903u

Date of Accident

23/02/2021 

Reset

## % RESULT & RECEIPT

### TP Insurer Enquiry

Insurance ..... **Lonpac**

Period of Insurance ..... **30/09/2020 - 29/09/2021**

Requested By ..... **Eric Koh Yong Lang (Tan Chon...**

Requested Date ..... **24/02/2021 10:51**

#### Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

**General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**

MY FAMILY CLINIC (PIONEER)

Blk 638 Jurong West Street 61 #02-09 Pioneer Mall Singapore 640638

Phone: 6861-1182

RegNo : 200410201K



TAX INVOICE

Invoice No. PNR-0018937

Invoice Date: 25/02/2021

Provider: Dr Yeo Thoont Kiat

LIM CHENG HAN

Ref ID :A00321710

291C BUKIT BATOK STREET 24, #18-27, SINGAPORE, 652291

Item Name	Quantity	UOM	Unit Price	Total Price
PAXIDORM 25MG TAB	10	TAB	1.20	12.00
VOLTAREN SR 75MG TAB	10	TAB	1.50	15.00
FAMOTIDINE 20MG TAB	10	TAB	0.30	3.00
ANAREX 450MG/35MG TAB	20	TAB/S	0.30	6.00
VOREN GEL [20GM]	1	TUBE	7.00	7.00
CONSULTATION	1	EA	21.00	21.00

Sub Total : \$64.00

7% GST : \$4.48

Total : \$68.48

Amount Paid : \$68.48

O/S Balance : \$0.00

Receipt No.	Payment Date	Paid Amount	Payment Method	Remark	Company
RT-PNR0021723	25/02/2021	68.48	NETS		

All cheques should be crossed & made payable to

"MY FAMILY CLINIC (PN) PTE LTD"

Medicine dispensed are not returnable or refundable.



**MY FAMILY CLINIC (PIONEER)**  
Blk 638 Jurong West Street 61 #02-09 Pioneer Mall Singapore 640638

Phone: 6861-1182  
RegNo : 200410201K

MC No: OD-PN0000088921

**MEDICAL CERTIFICATE**

NRIC: S1804287H

NAME: LIM CHENG HAN

This is to certify that the abovenamed patient is Unfit for Work / School for a period of 3 day/s from 25-02-2021 to 27-02-2021.

Note: This certificate is not valid for absence from court or other judicial proceedings unless specifically stated.

25/02/2021

Date

Dr Yeo Thoont Kiat

Issued by

Signature



**MY FAMILY CLINIC (PIONEER)**  
Blk 638 Jurong West Street 61 #02-09 Pioneer Mall Singapore 640638

Phone: 6861-1182  
RegNo : 200410201K

**TAX INVOICE**

Invoice No. PNR-0018937  
Invoice Date: 25/02/2021

Provider: Dr Yeo Thoont Kiat

Ref ID : A00321710

LIM CHENG HAN

281C BUKIT BATOK STREET 24, #18-27, SINGAPORE 652291

Item Name	Quantity	UOM	Unit Price	Total Price
PAXIDORM 25MG TAB	10	TAB	1.20	12.00
VOLTAREN SR 75MG TAB	10	TAB	1.50	15.00
FAMOTIDINE 20MG TAB	10	TAB	0.30	3.00
ANAREX 450MG/35MG TAB	20	TAB	0.30	6.00
VOREN GEL [20GM]	1	TUBE	7.00	7.00
CONSULTATION	1	EA	21.00	21.00

Sub Total : \$64.00  
7% GST : \$4.48  
Total : \$68.48  
Amount Paid : \$68.48  
O/S Balance : \$0.00

Receipt No.	Payment Date	Paid Amount	Payment Method	Remark	Company
RT-PNR0021723	25/02/2021	68.48	NETS		

All cheques should be crossed & made payable to  
"MY FAMILY CLINIC (PN) PTE LTD"  
Medicine dispensed are not returnable or refundable.

**Hsiao Tong (LKKAuto)**

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**From:** ONG LI LI <llong@lonpac.com>  
**Sent:** Monday, 26 April 2021 3:45 PM  
**To:** Hsiao Tong (LKKAuto)  
**Cc:** MT\_Claim\_SG; Admin A  
**Subject:** RE: [SEEK MANDATE] - ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT Our Ref: 20/21/21/VC00/024264 [External Confidential]

**Lonpac External - Confidential**

Dear Hsiao Tong

Please proceed.

Regards,  
Ong Li Li  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road #17-04/07 The Concourse  
Singapore 199555  
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

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*Lonpac External - Confidential data is for use by authorised external parties only.*

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**From:** Hsiao Tong (LKKAuto) [mailto:chewht@lkkauto.com]  
**Sent:** Saturday, 24 April 2021 12:19 PM  
**To:** ONG LI LI <llong@lonpac.com>  
**Cc:** MT\_Claim\_SG <mt\_claim@lonpac.com>; Admin A <admin-a@lkkauto.com>  
**Subject:** [SEEK MANDATE] - ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT Our Ref: 20/21/21/VC00/024264 [External Confidential]

Your ref: **20/21/21/VC00/024264**  
Our ref : CC4/LPC21002572/R1pa3q2

Dear Sirs/Mdm,

**ACCIDENT INVOLVING GBF3903U(LONPAC) AND SLU7215Z(TP) ON 23/02/2021**

We refer to the above matter.

We have highlighted to your good office on 04/03/2021 of Third-Party’s request to do Direct Settlement with our Principal, Lonpac Insurance Bhd.

It is a head-to-rear collision. Liability is not in our driver’s favour.

We seek your approval to offer repairer “**TAN CHONG MOTOR SALES PTE LTD**” at **\$8,975.19(all-in)**.

The summary is as follows: -

	Amount Claimed	Amount Revised
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1. Cost of Repair (w/GST)	\$ 14,246.00	\$ 8,476.71 (\$7,922.16 + 7%GST)
2. Loss of Rental (4days x \$100.00)(w/GST)	\$ 428.00	\$ 428.00 (4days x \$100.00)
3. LTA/GIA Search Fee	\$ 2.00	\$ 2.00
4. Medical Fee	\$ 68.48	\$ 68.48
<b>Total</b>	<b>\$ 14,744.48</b>	<b>\$ 8,975.19</b>

Surveyor recommended 4 days for repair.

Enclosed here with all the relevant documents for your perusal.

**Kindly let us have your approval / instruction.**

Best Regards,  
**Hsiao Tong, Chew** | Case Handler  
**LKK Auto Consultants Pte Ltd**  
 Phone: 6742 3197 | email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) | fax: 6741 4108  
 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>  
**Sent:** Thursday, 4 March 2021 3:19 PM  
**To:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>  
**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>; Hsiao Tong (LKKAuto) <[chewht@lkkauto.com](mailto:chewht@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>  
**Subject:** RE: ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT Our Ref: 20/21/21/VC00/024264 [External Confidential]

Dear Li Li,

We refer to the above matter.

We have inspected TP vehicle SLU 7215Z on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:

- TP estimated cost of repair
- Preliminary advice
- Photographs of TP vehicle in its damaged condition

Please take note that the case handler in-charge is Hsiao Tong.

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

Thank you.

Best Regards,

**Mei Kwan** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6366 0055 | email: [MeiKwan@lkkauto.com](mailto:MeiKwan@lkkauto.com) | fax: 67414108  
 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>  
**Sent:** Friday, 26 February, 2021 11:04 AM  
**To:** Admin-D (LKKAuto) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>; GERALD POH WEE BIN <[geraldpoh@lonpac.com](mailto:geraldpoh@lonpac.com)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT Our Ref: 20/21/21/VC00/024264 [External Confidential]

## **Lonpac External - Confidential**

Dear Summer

Please see attached for our Insured's GIA report.

Regards,  
Ong Li Li  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road #17-04/07 The Concourse  
Singapore 199555  
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

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**From:** Admin-D (LKKAuto) [<mailto:admin-d@lkkauto.com>]  
**Sent:** Wednesday, 24 February 2021 2:08 PM  
**To:** GERALD POH WEE BIN <[geraldpoh@lonpac.com](mailto:geraldpoh@lonpac.com)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>  
**Subject:** Re: ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT [External Confidential]

Dear Sir/Madam,

Thank you for your assignment.

Please be informed that vehicle not in the workshop, repairer will arrange.

**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.

**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:** GERALD POH WEE BIN <[geraldpoh@lonpac.com](mailto:geraldpoh@lonpac.com)>

**Sent:** Wednesday, 24 February 2021 1:44 PM

**To:** assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** FW: ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT [External Confidential]

Lonpac External - Confidential

Lonpac External - Confidential

Our Ref: TBA

Dear Nivitha,

FYA. Our insured has not lodged the GIA report.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

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Lonpac External - Confidential data is for use by authorised external parties only.

-----Original Message-----

**From:** Lawrence Teo [<mailto:lawrenceteo@tanchong.com>]

**Sent:** Wednesday, 24 February 2021 11:55 am

**To:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** ACCIDENT INVOLVING SLU7215Z & GBF3903U ON 21.02.2021 INS/IC/LAW/0055/2021 DIRECT SETTLEMENT

Dear Office In Charge,

Our customer, LIM CHENG HAN owner was insured with AIG Insurance at the material time of the accident. The 3rd party GBF3903U is insured with you at the material time of the accident.

Our customer holds your insured driver liable for the accident and would like to claim against your insured driver. On behalf of our customer, we hereby enquire whether you would like to have a Direct Settlement with our customer.

Our customer's claiming for Cost Of Repair and Loss Of Rental @\$100/Day.GIA Report / Estimate attached for your action.

Best Regards,

Lawrence Teo

Tan Chong Motor Sales Pte Ltd

913 Bukit Timah Road  
Singapore 589623  
Tel: +65-64694091 :: DID: +65-67038914 :: Fax: +65-64697472  
Email: [lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)  
Website: [www.tanchong.com](http://www.tanchong.com) :: [www.nissan.com.sg](http://www.nissan.com.sg)

-----Original Message-----

From: Singapore Printer  
Sent: Wednesday, February 24, 2021 11:50 AM  
To: Lawrence Teo <[lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)>  
Subject: Scan Data from FX-2ECDE2

Sent by: [lawrenceteo@tanchong.com]  
Number of Images: 12  
Attachment File Type: PDF

Device Name: BT-TCMS-SVCADM-592607  
Device Location: