



mbm wheelpower
DARE TO BE

Your ref : QX1543R
Our ref : SKN1158T

19 April 2021

China Taiping Insurance (Singapore) Pte Ltd
3 Anson Road
#16-00, Springleaf Tower
Singapore 079909

TEL: 6389 6111

Attn: Motor Claims Dept

WITHOUT PREJUDICE

Dear Sir / Mdm,
Accident involving QX1543R and SKN1158T Along Traffic Junction at Dover Rise Towards
on 06/04/2021 at 1045hrs

We refer to the above said accident.

Our investigation reveals that you are the insurers of the vehicle QX1543R at the material time of the accident and that the said accident was caused solely by the negligence of the driver insured by your company. We hereby propose a direct settlement for our client's claim.

We enclosed herewith copy of

- 1 Final Repair Invoice
- 2 Authorisation Letter
- 3 Car Rental Invoice
- 4 GIA Search Fee

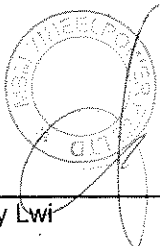
We are instructed to claim the following

1 Costs of Repair- (\$1,100.00 + 7% gst)	\$	1,177.00
2 Loss of rental (\$192.60 x 3 days)	\$	577.80
3 GIA Search Fee	\$	2.00

Grand Total: \$ 1,756.80

Please kindly let us know whether you are prepared to settle our client's claim.

Thanks & Warmest Regards,



Ivy Lwi

MBM Wheelpower Pte Ltd
160 Sin Ming Drive #06-02
Sin Ming Autocity Singapore 575722
Customer Service Hotline 6262 8888
www.mbmwheelpower.com.sg
Company Registration Number: 200204110W
GST Registration Number: M90368446L



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To: China Taiping Insurance (Singapore) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

TEL: 6389 6111

Attn: Motor Claims Dept

Tax Invoice: 39231
Date: 19-4-2021
Vehicle No.: SKN1158T
Make / Model: Toyota Estima
Chassis No.: ACR507120881
Engine No.: 2AZJ029338
Year of Make: 2013
Accident Date: 06-04-21

S/N	DESCRIPTION	Amount S\$
1	COSTS OF REPAIR	\$ 1,100.00

Total :	\$	1,100.00
7% GST:	\$	77.00
Amount Due S\$	\$	1,177.00

For & on behalf
MBM WHEELPOWER PTE LTD



Prepared by: Ivy Lwi

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LETTER OF AUTHORISATION

DATE : _____

TO : MBM WHEELPOWER PTE. LTD.

160 SIN MING DRIVE, #06-02, SIN MING AUTOCITY, SINGAPORE 575722

FROM : WONG LINCOLN TENG (NAME OF OWNER/POLICYHOLDER)

CLAIM VEHICLE NO. : SKN1158T

ACCIDENT DATE : 6/4/2021

LOCATION : _____

OTHER VEHICLE(S) : QX1543R

1 I hereby authorise MBM WHEELPOWER PTE. LTD. to :-

a. Proceed with the repair (the repair) to the above accident (the accident) damaged vehicle (the vehicle); and

() Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or resolved
(Claim against Own Insurer)

(✓) Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or third party insurer in question until the claim is wholly completed, settled and / or resolved.
(Claim against Third Party)

2 I confirm that MBM's authorisation shall include without limitation paying for all the relevant reports / documents, corresponding and negotiating with the insurer / third party and any other relevant parties, correspondence of any nature with solicitors, appointing solicitors to act in connection with the claim and, any or all such other tasks concerning the settlement, resolution and / or completion of the claim.

Where authorising party is not vehicle owner and policyholder

EXCEPT :-

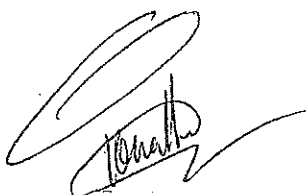
- a. Such as matters or task that the insurer / third party and / or the law requires me to personally attend to ; and
 - b. The submission of the claim to the insurer (Where applicable)
- 3 I understand if I submit a claim of whatever nature to my own insurer [**FOURTEEN DAYS (14 days)**] after the accident (or such other time stipulated by my own insurer and / or the law), such claim will not or may not be accepted by my own insurer.
- 4 I further confirm and accept that :-
- a. To the extent permitted by laws :-
 - i) I will indemnify and keep MBM indemnify in connection with or arising from the claim ; and
 - ii) That not with outstanding the agreement or otherwise, under no circumstance will I (jointly or severally) in any manner hold MBM liable for losses / damages of whatever nature arising or in connection with the claim.
 - b. MBM does not guarantee and never represent that the insurer / third party will fully indemnify me for the damage and / or the repair's cost and, that I shall be and continue to be liable to MBM for the whole of the repair's cost.
- 5 As the extend to which the insurer / third party will indemnify me or be liable is not conclusive, I agree to place a deposit of \$ _____ (excluding GST) for the repair's cost.
- 6 I agree and accept MBM deposit refund policy, If the final successful percentage of indemnification / contribution / liability from or of the insurer / third party in respect of the repair's cost to me :-
- a. **50% and below - NO REFUND**
 - b. **100% - FULL REFUND**

- 7 I shall inform and forward to MBM all correspondence and letters received by me from the insurer / third party, any other insurer, solicitors governmental authorities and / or, any other relevant party.
- 8 I shall fully co-operate with and act expeditiously on any requests by MBM, particularly the signing / endorsement / execution of any "Discharge Voucher", failing which I shall be liable to MBM for the full repair costs and the expenses incurred (directly or indirectly) by MBM in connection with the claim.
- 9 In any case if the claim is repudiated by the insurer of the third party, I shall be liable to MBM for the full repair costs and the expenses incurred (directly or indirectly) by MBM in connection with the claim.
- 10 I shall not :-
- a. respond to correspondence and letter; and
 - b. negotiate agree or accept any other from the insurer / third party or any other relevant party; without consultation of and expressed approval from MBM WHEELPOWER PTE. LTD.
- 11 In consideration hereof (including without limitation MBM's agreeing to repair the vehicle and defer demanding payment of the repair's cost), I wholly assign to MBM WHEELPOWER PTE. LTD. All proceeds of the claim for :-
- a. the repair's costs and
 - b. damage, compensation, interest, cost (including party-to-party legal costs on a full indemnity basis and expenses in connection with the accident, repair and / or claim; which MBM shall be further entitled to apportion in its absolute discretion with any excess being paid by MBM to me as it deems fit in its absolute discretion.
- 12 I further confirm that payment to MBM or to any person (which shall include a body corporate) authorised by you to receive payment in lieu shall constitute a good effective discharge of the payment obligations by any party of the aforesaid proceeds of my claim and that I shall not be authorised in law to receive payment.

13 I understand and agree that MBM will not be liable if:

- a. the delay of receiving parts is caused by suppliers
- b. the Loss of Use/Loss of income claim amount provided by the insurer of the third party is lower than desired and that MBM will not top up to the expected amount.

14 MBM has the right not to disclose any correspondences to the client.



Owner & Policyholder's Signature / Company Stamp (if applicable); or
Authorising party's Signature / Company Stamp (if applicable)

Name : WONG LINCOLN TENG

NRIC No. : S6982674A

Address : 176 LAUREL WOOD AVENUE, SINGAPORE 275871



Witness's Signature

Name : SHIRLEY LEE

NRIC No. : _____



mbm wheelpower
DARE TO BE

INVOICE TO:

Name : Ms Hew Tien-Si Iona
176 Laurel Wood Avenue
Singapore 275871

Tax Inv: 00615
Invoice Date: 16/04/2021
Vehicle No: SKN9999E
Make/Model: Toyota Wish
Reference No: SKN1158T

S/N	Qty	Description	Unit Price		Price	
01		CAR RENTAL FROM				
	3	12.04.2021 TO 14.04.2021	S\$	180.00	S\$	540.00

GST S\$ 37.80

Total S\$ 577.80

MBM WHEELPOWER PTE LTD



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DARE TO BE

MBM Wheelpower Pte Ltd

176 Sin Ming Drive, #01-11/14/15/16 Sin Ming Autocare, Singapore 575721
Customer Service Hotline 6262 8888
www.mbmwheelpower.com.sg Company Registration Number: 200204110W

RENTAL AGREEMENT

NO. 00615

VEHICLE			CHECK OUT / CHECK IN		
Vehicle No: <u>SKN9999E</u> Model: <u>Tayota wish 1.8</u>			DATE OUT: <u>12.04.2021</u> TIME OUT: <u>09:00am</u> HRS		
Change Over 1: Date: Initial:			PETROL LEVEL OUT: <input type="checkbox"/> E <input checked="" type="checkbox"/> 1/8 <input type="checkbox"/> 1/4 <input type="checkbox"/> 3/8 <input checked="" type="checkbox"/> 1/2 <input type="checkbox"/> 5/8 <input type="checkbox"/> 3/4 <input type="checkbox"/> 7/8 <input type="checkbox"/> F		
Change Over 2: Date: Initial:			DATE IN: <u>14/04/2021</u> TIME IN: <u>06:15pm</u>		
			PETROL LEVER IN: <input type="checkbox"/> E <input checked="" type="checkbox"/> 1/8 <input type="checkbox"/> 1/4 <input type="checkbox"/> 3/8 <input checked="" type="checkbox"/> 1/2 <input type="checkbox"/> 5/8 <input type="checkbox"/> 3/4 <input type="checkbox"/> 7/8 <input type="checkbox"/> F		
			KM OUT: <u>3628</u> KM IN: <u>62927</u>		
			KM DRIVEN: <u>62743</u>		
CORPORATE HIRER			COLLISION DAMAGE WAIVER		
Co. Name:			ACCEPTS CDW EXCESS		
Co. Address:			\$ <u>3,520</u> per accident		
Contact Person: Tel:			DECLINES CDW EXCESS		
			\$ per accident		
			SIGNATURE:		
			SIGNATURE:		
NAMED DRIVER			EXCESS AMOUNT		
Name: <u>MS HEN TIER-SI 1019</u>			SINGAPORE		
Address: <u>176 Laurel Wood Avenue</u>			<u>\$3,520</u>		
<u>8275871</u>			MALAYSIA		
Office Tel: Residence Tel:			SIGNATURE:		
Occupation: Hp: <u>9455 5522</u>					
P.P.I.C. No: <u>869456047</u> Nationality: <u>Singaporean</u>					
Date of Birth: <u>26-12-1969</u> Place of Birth:					
Dr. Licence No:					
Date of Issue: <u>10.09.2003</u> Country of Issue:					
ADDITIONAL NAMED DRIVER			CHARGES		
Name:			Months @\$ per month		
Address:			Weeks @\$ per week		
			<u>3</u> Days @\$ <u>180</u> per day		
			Hours @\$ per hour		
Office Tel: Residence Tel:			SUB-TOTAL (1)		
Occupation: Hp:			Less Discount: %		
P.P.I.C. No: Nationality:			RENTAL CHARGES		
Date of Birth: Place of Birth:			CDW @\$ per day / month		
Dr. Licence No:			PAI @\$ per hour		
Date of Issue: Country of Issue:			PETROL TOP-UP		
Remarks:			MISC		
<u>MBM claim - SA Shirley - SKN 11587</u>					
Invoice No: Rec. No:			SUB-TOTAL (2)		
			GST @ 7%		
			TOTAL CHARGES		
			PRE-PAYMENT		
CHECKED OUT BY: CHECKED IN BY: CHECKED BY:			DOWNPAYMENT AND DEPOSIT		
<u>Shirley</u>			AMOUNT REFUNDED / DUE		
			SIGNATURE OF REFUND:		

MBM Wheelpower Pte Ltd
As Managers on Behalf of

a
OWNER

HIRER SIGNATURE

COMPANY STAMP


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

QX1543R

Date of Accident

06/04/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance China Taiping Insurance (Sing...

Period of Insurance 19/11/2020 - 18/11/2021

Requested By Ivy Lwi (MBM WHEELPOWER P...

Requested Date 06/04/2021 17:04

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**


Shirley Lee Yen Nee
Claims Advisor
8686 5188