

Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel: 6636 9100 Fax: 6636 9113

Date

: 20/5/2021

Your Ref: CC6/AIG21004438/pa3

Our Ref: 0452/SML5755E/TP/PC/0421

AIG ASIA PACIFIC INSURANCE PTE LTD

**AIG Building** 

78 Shenton Way, #07-16

Singapore 079120

Attn: Motor Claims Dept.

Dear Sir/Madam

# ACCIDENT INVOLVING SML5755E & GBE815R ON 06/04/2021 PIE (EXIT 9) TOWARDS JALAN EUNOS AT SLIP ROAD

We refer to the above accident.

The accident was caused solely by the negligence of your insured and as a result, we had incurred the following Costs and Losses: -

Costs of Repair (Lump Sum)		-	\$ 8,200.00	
Loss of Use (7 days at \$80/day)			\$ 560.00	
LTA TP Search Fee	X	3 2	\$ 7.45	
Claimed Amount			\$ 8,767.45	

Enclosed are the supporting documents for your perusal:

- 1. Invoice 0452
- 2. LTA Tax Invoice/Receipt
- 3. Certificate of Insurance
- 4. Letter of Authority and Indemnity
- 5. Letter of Authority

Please let us hear from you within the next 14 days.

Yours faithfully

PREMIUM CARZ SERVICES PTE LTD



**INVOICE: 0452** 



Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel: 6636 9100 Fax: 6636 9113

Date

: 20/5/2021

Bill To

AIG Asia Pacific Insurance Pte Ltd

**AIG Building** 

78 Shenton Way, #07-16

Singapore 079120

**Our Customer** 

Name

: Tan Kok Boon

IC No.

: SXXXX620G

Singapore 418096

Address : 9 Jalan Singa

Vehicle No: SML5755E

Date of Accident: 6/4/2021

Model: Mercedes Benz

C180 Blue Efficiency

No.		Qty	<b>Unit Price</b>	Amount
1	To supply labour and materials to repair the above-mentioned vehicle to its pre-accident condition (Lump Sum)	1	-	\$8,200.00
	3 ·			
			TOTAL	\$8,200.00

For Premium Carz Services Pte Ltd



<sup>\*</sup> All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"

#### > Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

07 Apr 2021 / 14:45:53

Receipt Date/Time: 07 Apr 2021 / 14:45:53

### Tax Invoice/Receipt

Receipt No.: ITNET-00000-210407-002120

Previous Receipt No.:

Amount	CST	Amount
Before GST (S\$)	Amount (S\$)	After GST (S\$)
LTD.		
7.00	0.49	7.49
7.00	0.49	7.49
fore Rounding 7.00	0.49	7.49
g Difference		0.04
ount Payable		7.45
7144416204		7.45
		7.45
ange		0.00
Amount		7.45
efundable Amount		0.00
	GST (S\$)  LTD.  7.00  1 7.00  fore Rounding 7.00  g Difference  rount Payable  Direct Debit: e	Before GST (S\$) Amount GST (S\$)  LTD.  7.00 0.49  1 7.00 0.49  fore Rounding 7.00 0.49  g Difference rount Payable  7144416204 Direct Debit: eNETS Debit (Internet Banking)  ange Amount

#### 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.

**EQ Insurance Company Limited** 

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



#### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA) THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

#### PRIVATE CAR Comprehensive Classic

Certificate No.: DMPPHQ20-005184

Classic Plan - EQ authorized workshop only

Form: MX2 Excess:

1. Index Mark and Registration Number of Vehicles SML5755E

Insured&Named Driver

S\$500.00(Section 1 - Own Damage) S\$1,000.00(Section 1 - Own Damage)

Unnamed Driver YEIDR

Additional S\$3,000.00 S\$100.00

WindScreen

2. Name of Policyholder

Tan Kok Boon

3. Effective Date of the Commencement of Insurance for the purpose of the Act 01/08/2020

4. Date of Expiry of Insurance 31/07/2021

5. Person or Classes of persons entitled to drive\*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing pace-making reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purpose in connection with the Motor Trade

\*Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

IWWE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: Mercedes-Benz Financial Services Singapore Ltd

A000008/Lee Kok Leong Date of Issue: 22/07/2020 11:08

Authorised Signatory EQ Insurance Company Limited

#### Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

**EQI** Motor Accident Hotline

6311 3211





(Owner's Signature)

Co. Reg. No.: 201416720C 1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883 Tel: 6636 9100 Fax: 6636 9113

# Letter of Authority

7/4/2021 Date:
ACCIDENT INVOLVING SMLSTSSE AND GBESISR ON 6/4/202 ALONG PIECEXITY 9) TOWARDS I TRANSEUNOS AT SLIPROAD
To Whom It May Concern:
This is to certify that I,
The authority given herein shall be irrevocable unless notice of revocation is given to us.
Thank you.
Yours sincerely,



## LETTER OF AUTHORITY AND INDEMNITY

a) I/We, the owner of vehicle no. SML5757 E hereby instruct and authorize you to commence repair to the said vehicles. b) You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party. c) You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf. d) Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account. e) In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.	ACCI	DENT INV	DLVING VEHICLE NO. SMLSTSE AND GBE815R		
a) I/We, the owner of vehicle no. SML5756 hereby instruct and authorize you to commence repair to the said vehicles. b) You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf. d) Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account. e) In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shalf render full co-operation. f) In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors. g) If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any looses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill an	AT/A	LONG PIL	(Exit9) TOWARDS JALAN EUNOS AT SLIP ROAD		
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repair to the said vehicles.  You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.  You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.  Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.  In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shalf render full co-operation.  In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors.  If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any loses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incu					
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Dated this 7 day 1707 month 2021 year	h)	I/we have read	and understand the above statement and agreed.		
	Dated	this 7	day np nl month 2021 year		
Signature : Company Stamp	Signat	ure	Company Stamp		
Name : 170 ~ pool	Name	Name : 1710 COL BOOK			
NRIC/ROC No. : S1398620G	NRIC/	ROC No.			
Address: 9 Jalon Singa S 418096	Addres	SS			