



**AUTOMOTIVE REPAIR CENTRE PTE LTD**  
38 WOODLANDS INDUSTRIAL PARK E1  
#05-18 SINGAPORE 757700  
TEL: 64688834 / FAX: 64622278  
E-MAIL: [info@automotiverepaircentre.com.sg](mailto:info@automotiverepaircentre.com.sg)

China Taiping Insurance (Singapore) Pte Ltd  
Attn: Motor Claims Dept

Dear Sir/ Madam

**LETTER OF DEMAND**

**ACCIDENT INVOLVING VEHICLE NO SMD3005S & SJV5924S**  
**ALONG SLE TOWARDS BKE ON 30/04/2021.**

We understand that you are the insurer of vehicle SJV5924S.

I/We wish to inform you that my/our vehicle SMD3005S have been completed repairs to my/our satisfaction by M/s AUTOMOTIVE REPAIR CENTRE PTE LTD. I/We therefore propose to claim from your as follows:

1.	Cost of Repair	S\$ 5,136.00 (w/GST 7%)
2.	Loss of Use (S\$60.00 x 09 Days + 01 Weekends)	S\$ 600.00
3.	Medical Expenses	S\$ 120.00
4.	LTA Search Fee/GIA Reports	S\$ 2.00
<b>TOTAL</b>		<b>S\$ 5,858.00</b>

Please let us have your reply soonest possible.

Thank you.

Yours faithfully



08/06/2021



## LETTER OF AUTHORISATION

I/We, GAN GUANG (YAN GUANG) ("claimant") of Blk 804 Woodlands Street 81 #06-35 (address), owner of SMD30055 (vehicle no.) hereby authorize **Automotive Repair Centre Pte Ltd** ("the workshop"), to act on behalf of me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") for my/our vehicle no. SMD30055 that was damaged pursuant to the accident occurred on 30/4/21 (date) along SLE Toward BKE (location) involving vehicle no/s SJV59245 ("the accident").

I/We further authorize the workshop to settle my/our above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my/our claim with payment cheque/s being made in favour of the workshop.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 30 (day) of 4 (month) 2021 (year)



Signed by "the claimant"  
(with chop if applicable)



Signed by "the workshop"  
(with chop)



## LETTER OF AUTHORISATION – MEDICAL CLAIM

I/We, Gan Guang (“representative”) of Blk 804 Woodlands Street 81 #06-35 Singapore 730804 (address), owner of SMD3005S (vehicle no.) to act on behalf of my daughter Aerith Gan (Yan Rou Xuan) (“claimant”) with respect to the medical claims that was pursuant to the accident occurred on 30/04/2021 (date) along SLE towards BKE (location).

Dated this 22 (day) of 6 (month) 2021 (year)



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Signature of Claimant/ authorized representative  
(with chop if applicable)

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCNA00013712101 Claim No : SNM21D202506/C02/SJV5924S/LEWLC

Claimant : GAN GUANG (YAN GUANG)

Amount : S\$5,858.00  
DOLLARS FIVE THOUSAND EIGHT HUNDRED AND FIFTY EIGHT ONLY

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SMD 3005S

Insured Vehicle No. : SJV 5924S

Date of Loss : 30/04/2021

Place of Accident : SLE TOWARD TO BKE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : JENNY LEVIN LEE SIN HEOK

Driver Name : JENNY LEVIN LEE SIN HEOK

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

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(1) General Damages	S\$	
(2) Cost of Repair/ <del>Excess</del>	S\$	5,136.00
(3) Loss of Use/ <del>Rental/Earning</del>	S\$	600.00
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	2.00
(5) Medical Reports/Expenses	S\$	120.00
(6) <del>Survey Fees</del> /Towing Fee	S\$	
(7) Cost including Disbursement	S\$	
	=====	
TOTAL . . . . .	S\$	5,858.00
	=====	

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Claimant Name : GAN GUANG (YAN GUANG)

NRIC No : SXXXX300I

Signature : 

Date : 21 JUL 2021



## AUTOMOTIVE REPAIR CENTRE PTE LTD

Company Reg No: 201312913C GST Reg No: 201312913C

38 Woodlands Industrial Park E1 #05-18 Singapore 757700

Tel: 6468 8834 Fax: 6462 2278

Email: info@automotiverepaircentre.com.sg



PayNow UEN: 201312913C

Bill To:

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD  
3 ANSON ROAD  
#16-00  
SPRINGLEAF TOWER  
SINGAPORE 079909

Tax Invoice No: 00002889

Date: 8/6/2021

Reference: SMD3005S

Page: 1

No	DESCRIPTION	AMOUNT
1	COST OF REPAIR (LUMP SUM)	\$4,800.00
<hr/> Customer Signature & Co. Stamp		Sub-Total: \$4,800.00 GST @ 7%: \$336.00  <b>Amount Due: \$5,136.00</b>

This is an electronically generated invoice, no signature is required


INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SJV5924S

Date of Accident

30/04/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **China Taiping Insurance (Sing...**

Period of Insurance ..... **01/02/2021 - 31/01/2022**

Requested By ..... **PONG JIA JUN OSCAR (Autom...**

Requested Date ..... **30/04/2021 14:56**

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**





# TAX INVOICE

GST REG NO. : M9036910N

30.04.2021 16:50:09 KEINNEA

AERITH GAN (YAN ROU XUAN)  
804 WOODLANDS STREET 81  
#06-35  
Singapore 730804

External ID/NRIC : T2015314D  
Case number : 7621342504C  
Customer number : 3027287258  
Visit date : 30.04.2021 Time: 16:42  
Location :  
Billing date : 30.04.2021

Patient Name : AERITH GAN (YAN ROU XUAN)

DESCRIPTION	BEFORE GRANT	AMOUNT PAYABLE
A&E ATTENDANCE FEE	240.00	120.00
Total charges	240.00	
Government grant	(120.00)	
Amount payable before GST		120.00
Add 7% GST		8.40
LESS GST ABSORBED BY THE GOVERNMENT		(8.40)
Total amount payable		120.00
<b>Payment</b> AERITH GAN (YAN ROU XUAN)		(120.00)

## Important Note:

Patient who receives treatment at Children's Emergency (CE) will be charged an A & E Attendance Fee. Additional charges apply if the patient requires non-standard services and/or medications.

Should a patient require admission, the Attendance Fee and any other charges, together with payment made will be transferred to the hospitalization bill to facilitate claims from Medisave, subject to the withdrawal limits set by MOH.

If the total hospitalization bill is fully claimable from Medisave and/or insurance, the payment made at CE will be refunded within 21 working days upon finalization of the hospitalization bill.

Parents or guardians who are claiming the CE charges from the Civil Services Benefits Scheme (CSC), Health Promotion Board (HPB) or Public Utilities (PUB), please note that the amount will not be transferred to the hospitalization bill.

(for donations, please tear along this line and enclose the cheque payment)



Because every woman and child deserve good health.

The KKH Health Fund (part of SingHealth Fund) is a registered charity that supports needy patients, research and education at KK Women's and Children's Hospital Pte.Ltd. As an Academic Medical Centre, SingHealth advances medical research and education through its Obstetrics & Gynaecology and Paediatrics Academic Clinical Programmes. We welcome you to join in our cause in protecting and advancing the health of women and children.

I \_\_\_\_\_ (name) \_\_\_\_\_ (contact#) would like to make a one-time contribution of \_\_\_\_\_ ( \$ amount ) to KKH Health Fund for ☐ Needy Patients / ☐ OBGYN Academic Clinical Programme/ ☐ PAEDS Academic Clinical Programme. \*If no selection is indicated, donation will be made towards Needy Patients.

I \_\_\_\_\_ (name) \_\_\_\_\_ (contact#) would like to make a monthly donation. Please contact me to make the arrangement.

Please issue a cheque in favour of "SHF-KKH Fund" and mail it to: KKH Health Fund c/o KK Women's and Children's Hospital, 100 Bukit Timah Road, S(229899).

Thank you for your contribution. Donations are entitled to tax exemption. Please provide your name, mailing address, IC and contact number at the back of your cheque. A tax exempt receipt will be issued for donations of S\$50 and above. For more information, please visit [www.kkh.com.sg](http://www.kkh.com.sg) or email [development@kkh.com.sg](mailto:development@kkh.com.sg)

Case Number: 7621342504C





## TAX INVOICE

AERITH GAN (YAN ROU XUAN)  
804 WOODLANDS STREET 31  
#06-35  
Singapore 730804

External ID/NRIC : T2015314D  
Case number : 7621342504C  
Billing date : 30.04.2021

Patient Name : AERITH GAN (YAN ROU XUAN)

DESCRIPTION				BEFORE GRANT	AMOUNT PAYABLE
<b>Amount due</b> AERITH GAN (YAN ROU XUAN):					0.00
<b>For information</b>					
<b>Payment details</b>					
Name		Date	Amount	Payment Type	
TEY HUI PING, SERENE		30.04.2021	120.00	VISA/MASTER	

The following instruction on the bill is for your information and action where applicable.  
☐ Medisave Withdrawal Limit is exceeded. ☐ The Medisave account is insufficient to settle the full bill.  
☐ Refund may be used to offset any other outstanding bill. A refund cheque will be sent in due course.

**Address 100 Bukit Timah Road, Singapore 229899**



**Asher Sng (LKKAUTO)**

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**From:** Asher Sng (LKKAUTO)  
**Sent:** Wednesday, 9 June 2021 3:36 PM  
**To:** jllsh2377@gmail.com  
**Subject:** ACCIDENT INVOLVING SJV 5924S AND SMD 3005S ON 30/04/2021

**Our Ref: CC6/CTI21005354/R1ea3**

09 JUNE 2021

**JENNY LEVIN LEE SIN HEOK**

Dear Sir/Madam,

**ACCIDENT INVOLVING SJV 5924S AND SMD 3005S ON 30/04/2021**

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Asher  
*Case Handler*  
DID: 6841 6051  
FAX: 6741 4108  
Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

*c.c. China Taiping Insurance (Singapore) Pte Ltd  
(Motor Claims Dept)*



## Asher Sng (LKKAUTO)

---

**From:** Jenny Lew <jenny.lew@sg.cntaiping.com>  
**Sent:** Wednesday, 21 July 2021 3:18 PM  
**To:** Asher Sng (LKKAUTO)  
**Cc:** Claims Dept of CTI; Admin A  
**Subject:** RE: [MANDATE REQUEST] RE: OUR REF: SNM21D202506/C02/SJV5924S/LEWLC & YOUR REF: CC6/CTI21005354/R1ea3-SMD3005S- TPP ON DIRECT SETTLEMENT

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Dear Asher,

Please proceed:

	Amount Revised
1. Cost of Repairs (w/GST)	\$ 5,136.00
2. Loss of Use (10days x \$60)	\$ 600.00 (10days x \$60)
3. LTA Search Fee	\$ 2.00
4. Medical Fee	\$ 120.00
Total	<b>\$ 5,858.00</b>

Thank you.

\*\* Note: Please cc to [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com) when you reply to us.

### **NOTICE :**

In response to the escalating Covid-19 cases, please refrain from sending hardcopy documents to us as delay is to be expected for handling hardcopy documents. All correspondence should be made via email [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com) or fax at 6224 7175. Any inconvenience caused is much regretted.

Regards,

**Jenny Lew**

Executive  
Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #15-00 Springleaf Tower Singapore 079909  
DID: (65) 6389 6172 | Tel: (65) 6389 6116 | F: (65) 6225 5879

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | **WeChat:** 太平狮城 Taiping SG

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**From:** Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>  
**Sent:** Wednesday, June 30, 2021 7:02 PM  
**To:** Jenny Lew <jenny.lew@sg.cntaiping.com>  
**Cc:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>  
**Subject:** [MANDATE REQUEST] RE: OUR REF: SNM21D202506/C02/SJV5924S/LEWLC & YOUR REF: CC6/CTI21005354/R1ea3-SMD3005S- TPP ON DIRECT SETTLEMENT

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Your ref : SNM21D202506/C02/SJV5924S/LEWLC  
Our ref : CC6/CTI21005354/R1ea3q2

Dear Sirs,

We refer to the above matter.

The accident occurred when our insured rear ended third party vehicle. We are of the opinion that BOLA scenario 27 is applicable for this matter. Liability is not in our insured's favour.

We did clarify with insured the nature of the accident and he's aware that NCD (if any) would be affected.

We seek your approval to offer repairer " **AUTOMOTIVE REPAIR CENTRE PTE LTD** " at **\$5,858.00 (all-in)**.

The summary is as follows: -

	Amount Claimed	Amount Revised
1. Cost of Repairs (w/GST)	\$ 9,672.80	\$ 5,136.00
2. Loss of Use (10days x \$60)	\$ 600.00	\$ 600.00 (10days x \$60)
3. LTA Search Fee	\$ 2.00	\$ 2.00
4. Medical Fee	\$ 120.00	\$ 120.00
Total	\$ 10,394.80	\$ 5,858.00

Enclosed here with all the relevant documents for your perusal.

**For your approval please.**

Thank You.

Best Regards,

**Asher Sng** | Case Handler

**LKK Auto Consultants Pte Ltd**

email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com) | fax: 6741-4108 | did: 6841-6051

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

***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.***

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**From:** Jenny Lew <[jenny.lew@sg.cntaiping.com](mailto:jenny.lew@sg.cntaiping.com)>

**Sent:** Thursday, 6 May 2021 5:01 PM

**To:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>; Asher Sng (LKKAuto) <[AsherSng@lkkauto.com](mailto:AsherSng@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Cc:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>

**Subject:** RE: OUR REF: SNM21D202506/C02/SJV5924S/LEWLC & YOUR REF: CC6/CTI21005354/R1ea3-SMD3005S- TPP ON DIRECT SETTLEMENT

Dear Mei Kwan,

As requested, please refer to attached.

Thank you.

**\*\* Note:** Please cc to [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com) when you reply to us.

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Regards,

**Jenny Lew**

Executive

Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #15-00 Springleaf Tower Singapore 079909

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**From:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>

**Sent:** Thursday, May 6, 2021 4:07 PM

**To:** Jenny Lew <[jenny.lew@sg.cntaiping.com](mailto:jenny.lew@sg.cntaiping.com)>; [Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com); Asher Sng (LKKAuto <[AsherSng@lkkauto.com](mailto:AsherSng@lkkauto.com)>; Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>

**Subject:** OUR REF: SNM21D202506/C02/SJV5924S/LEWLC & YOUR REF: CC6/CTI21005354/R1ea3-SMD3005S- TPP ON DIRECT SETTLEMENT

WITHOUT PREJUDICE

Dear Jenny,

Please revert to **LKK Auto** on **Direct Settlement SMD3005S** soonest possible.

Officer In Charge: Jenny Lew- DID 6389 6172.

**\*Kindly quote our claim reference number when replying.\***

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Thank you

Angie Foo

Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 63896116 | F: (65) 62247175

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | **WeChat:** 太平狮城 Taiping SG



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**From:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>  
**Sent:** Wednesday, May 5, 2021 5:35 PM  
**To:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>  
**Cc:** Admin A <[admin-a@lkkauto.com](mailto:admin-a@lkkauto.com)>; Asher Sng (LKKAuto) <[AsherSng@lkkauto.com](mailto:AsherSng@lkkauto.com)>  
**Subject:** Direct Settlement - Accident Involving SJV5924S (OI : CTI - TBA) and SMD3005S (TP : LKK REF - CC6/CTI21005354/R1ea3) on 30.04.2021

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Dear Sir/ Madam,

We refer to the above matter.

We have inspected TP vehicle SMD 3005S at M/s Automotive Repair Centre Pte Ltd on a WP basis and TP repairer purposed for a direct settlement.

Enclosed for your perusal is:

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

Meanwhile, kindly let us have a copy of your insured's GIA report and claim ref for our necessary action.

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

***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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