

## PRECISE AUTO SERVICE

NO. 1 KAKI BUKIT AVE 6 # 02-34/36 AUTOBAY SINGAPORE 417883

TEL : 6745 7367 FAX : 6841 3390

CO. REG. NO. : 35766600C

GST REG. NO. : 35766600C

22-06-2021

Date Of Accident : 19-05-2021

YOUR REF. : TBA...

OUR REF. : SJV 2074P/T/21 (SJE)

WITHOUT PREJUDICE

SAVE AS TO COSTS

M/s AIG Asia Pacific Insurance Pte Ltd  
78 Shenton Way  
#08-16 CHARTIS Building  
Singapore 079120

ATTN : LKK - Ms. Cecilia (MOTOR CLAIMS DEPARTMENT)

Dear Sirs

**RE : ACCIDENT INVOLVING VEHICLE NO. SJV 2074P AND SLJ 6923C ON 19 MAY 2021.**

We are the repairer for vehicle no. **SJV 2074P** and instructed by the owner, **Ms. Ng Tai Cheen**, on his behalf to submit the claims against your insured's vehicle no. **SLJ 6923C** that was involved in the above mentioned accident.

The accident was clearly caused by your insured's negligence. In order to save the legal cost, we will process the claim to you directly as follows:

1. Cost of Repair (Survey By SJE)	\$ 11,235.00 (Including GST)
2. Loss Of Use (12 days X \$150)	\$ 1,800.00
3. LTA Search	\$ 8.00
4. GIA Report Search	\$ 29.00
	<u>\$ 13,072.00</u>

Please let us have your payment in our favour of "**Precise Auto Service**".  
Your prompt reply of the above claims will be much appreciated.

Yours faithfully

Arine Aou



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Accident Date : 19-05-21

OUR REF : SJV 2074P/T/21(SJE)

### TAX INVOICE

NG TAI CHEEN

Blk 29 Kovan Road

#08-30

Singapore 545022

Invoice No. : TP2106-009

DATE : 21-06-21

FINAL BILL ON VEH. NO. : SJV 2074P

VEHICLE MODEL : MERCEDES BENZ C180K

LUMP SUM REPAIR

INCLUDING SUPPLY OF PARTS & LABOUR

PANEL BEATING & SPRAY PAINTING

10,500.00

SUB-TOTAL : 10,500.00

ADD GST 7% : 735.00

TOTAL AMOUNT SGD : 11,235.00

This is a computer generated document and requires no signature.

**Enquire Vehicle's Insurance Particulars ( As At 19 May 2021 / 17:15:00 )**

Vehicle No.:

**SLJ6923C**

Make Description/Model:

**KIA / SORENTO 2.2(A) CRDI 2WD S/R**

Insurance Company Name:

**AIG ASIA PACIFIC INSURANCE PTE. LTD.**

Business Transaction Reference No.:

**20210520141405139824**

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).



RECORD 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

Date of Request: 21/05/2021

Your Ref No: **Precise-SJV2074P**

Dear Sir/Madam,

Date of Accident: 19/05/2021 00:00 (SGT)

Vehicle No: SJV2074P

Place of Accident: Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLJ6923C	Singapore	(29.00 )	1	(27.10 )
GST Amount				(1.90 )
Total Amount Due (GST Inclusive)				(29.00 )

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.

Thank you.

This is a computer generated document and requires no signature.



TO: **PRECISE AUTO SERVICE**  
**NO. 1 KAKI BUKIT AVENUE 6**  
**#02-34/36**  
**SINGAPORE 417883**

**LETTER OF AUTHORITY & INDEMNITY**

**ACCIDENT INVOLVING VEHICLE NO.** SJV 2074P & SLJ 6923C on 19 May 2021 Along Hougang Ave 8 Towards Hougang Ave 10.

I/We, Ng Tai Cheen NRIC No. S0170174F  
owner of vehicle no. SJV 2074P, hereby authorise **M/S PRECISE AUTO SERVICE** to commence repairs to my motor vehicle and to forward the claim for damages sustained in the above accident to the third party driver and/or his employer and/or the vehicle owner and/or the insurer concerned. I/We agree that in consideration of you giving up your repairer's lien I agree to assign the whole proceeds of my/our third party claim to you and if applicable, our solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authority 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 our solicitors to see the claim to a successful conclusion. In the event the proceeds of claim for damages, interest, costs and expenses including legal costs are paid to me directly by the third party insurer, I undertake to indemnify and/or reimburse the said proceeds of claim to you.

If the third party driver and/or his employer and/or the vehicle owner and/or the insurer reject liability, I will be fully responsible for the repair costs.

I/We also 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 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 insurers' claim.

I/We undertake to inform you and/or the solicitors appointed by you on my/our behalf in the event the third party's insurance company communicates with me/us directly by telephone or in writing and I/we further undertake not to enter into any compromise Settlement Agreement with the third party insurance without your consent as I understand that this may jeopardise a fair recovery of the third party claim.

My vehicle is repaired by the repairer on my own free will without any inducement, threat and/or promise.

In the event of any breach of my undertaking and the repairer is compelled to enforce this undertaking, I agree that I shall pay for the legal costs incurred by the repairer on a solicitor and client's full indemnity basis.

  
\_\_\_\_\_  
Owner Signature  
(Company Stamp, if Applicable)