### **SM AUTOMOTIVE**

Our Ref : SBM9590L Your Ref : SCR9618D

1 Kaki Bukit Avenue 6
Blk C #01-43 Autobay@KB

Singapore 417883

Date : 26<sup>th</sup> Jun 2021

**ERGO** Insurance Pte. Ltd.

5 Temasek Boulevard, #04-01 Suntec Tower Five, Singapore 038985 WITHOUT PREJUDICE

Dear Sirs,

RE: ACCIDENT INVOLVING SBM9590L & SCR9618D AT EAST VILLAGE SHOPPING MALL CARPARK JLN SIMPANG BEDOK ON 26.05.2021 @ 12:10HRS

We are instructed by **YONG HOI LONG** to claim damages and losses against you in connection with the above captioned road traffic accident which our client's vehicle **SBM9590L** was damaged by vehicle **SCR9618D** driven by your insured at the material time.

We are instructed that the said accident was caused by your insured's negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expenses, particulars of which are as follows:

1) Repair Costs

\$ 3,000.00 \$ 600.00

2) Loss of Use for 04 days

600.00

3) LTA Search Fees

3,602.00

A copy each of the following supporting document is enclosed:

- 1) Final Repair Bill
- 2) LTA Receipt
- 3) Warrant to Act

Please let us have your cheque for the sum \$ 3,602.00 made payable to us, **SM AUTOMOTIVE** in the next 14 days.

Yours faithfully,

**SM AUTOMOTIVE** 

# SM &UTOMOTIVE

Block C, 1 Kaki Bukit Avenue 6 #01-43 Singapore 417883 Email: SM AUTOMOTIVE@HOTMAIL.COM Tel: (65) 6747 9241 Fax: (65) 6741 7276 RCB No.: 53231488C

# TAX INVOICE

**ERGO Insurance Pte Ltd** 

5 Temasek Boulevard

#04-01 Suntec Tower Five

Singapore 038985

Client:

YONG HOI LONG

Invoice No : SMPI2106-0041

Date : 26-Jun-21

Date of Accident : 26-May-21

Vehicle No. : SBM9590L

Model Type : TOYOTA CAMRY

Description	Amount	
Lump Sum Repair Cost	3,000.0	
	3,000.0	Total :

SIN DOLLARS: THREE THOUSAND ONLY



**INSURER ENQUIRY** 

Find insurer

Vehicle reg. no.

SCR9618D

**Date of Accident** 

26/05/2021

Reset

#### % RESULT & RECEIPT

### TP Insurer Enquiry

Insurance ERGO Insurance Pte. Ltd.

Period of Insurance 30/04/2021 - 29/04/2022

Requested By SUKYI CHONG (CHEW MOTOR ...

Requested Date 27/05/2021 11:37

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13** 

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

General Insurance Association

Records Management Centre GST Registration No: **M400017735** 

## LETTER OF AUTHORISATION

**SM AUTOMOTIVE** 

NRIC No.:

Date:

Kaki Bukit Avenue 6 Blk 1 #01-43 Singapore 417883						
Dear Sir,  Accident on  Involving Vehicles  Along  The obs. 7011 C 1210hD  SBM 9690L & SCR961BD  East Village Shopping Mail Curpark In Simpang Bedox.						
I/We, the registered owner/driver of vehicle registration no:  have involved in the above accident.						
I/We hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith.						
I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor,, to act on my/our behalf in respect of the above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis.						
I/We undertake to co-operate fully with you and our solicitors to ensure that claim is successful.						
I/We also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence.						
Your kind co-operation in this matter will be much appreciated.						
Yours truly,						
Owner's Signature (Company's stamp if applicable)						

#### Assignment

To:SM	Automotive	(Workshop)				
and to defer demandirrevocably assign a costs and expenses (in	your agreement to repanding for payment of bsolutely to you all the neluding legal costs / departies so entitled inc	proceeds of my/ou isbursements payab	r, I/we the under r claim(s) includir le on a party and	rsigned do hereby ng damages, interest, l party basis which		
	m that payment to you titute a good and effect of my/our claim(s).					
I/We authorise you expressly to give notice of this assignment to the party concerned.						
	y this assignment, I/we ne/us, I/we shall retur ent.					
Dated this _	day of		20	_·		
Signature Name ID No. Address	Forg Hoi  S 175  Blk 931 Juno	Long 82794 ng West 8/92 5(640931)				
Witness Signature Witness Name		TOMOZ				

Witness ID

Witness Address