## LEE SHENG AUTO PTE LTD

1,Kaki Bukit Ave 6,Autobay@KakiBukit

#01-60/58 , Singapore 417883

Tel No. : 67477333 Fax No. : 67457138 E-Mail : leesheng@singnet.com.sg Website : www.leeshengauto.com.sg

Tax Reg. No.: 201000701R Buss. Reg. No.: PAYNOW UEN 201000701R

Messrs. BHART KISHCHAND SHIRI BLK 209 PASIR RIS ST 21 #04-338

SINGAPORE 510209

Attention : Motor Claim Department Contact : 97101842 65835424

Tax Invoice: TP001510

Date: 31/08/2021

Vehicle Num.: EY 5499X Make/Model: TOYOTA ESTIMA Chassis/Eng#: ACR507071132

Accident Date: 21/08/2021 Claim No.:

Claim No. : Reference : Policy No. :

Amount S\$

LUMP SUM REPAIR

KNOCKING, JACKING, WELDING, SPRAY PAINTING ON AFFECTED AREAS INCLUDED PANEL BEATING, REMOVE & REFIX

4,500.00

Total S\$ : GST @ 7% S\$ : Amount Due S\$ : 4,500.00 315.00 4,815.00

LEE SHENG AUTO PTE LTD

Bhart Kis	nchand shri
	The state of the s
Date :	
The Motor Claim Dept	
AIQ.	
Dear Sir	-1-4881 CARE 144XF 21 /21
RE : Accident involvi	Behind BIK 408 Ang Makio Aire LO
Along Carparle	Behind BIK 408 Ang Makio Hie 10
We refer to the above which is due to my rep follows:	accident for which your insured is negligent. Thus, we are claiming for our losses pairer Lee Sheng Auto Pte Ltd as we have not settle with them. They are as
Cost of Repair	F4815-00
Loss of Rental	\$4,815-00 \$80X 8days=\$640
LTA Search Fees	:
GIA Search Fees	:
GIA Report Fees	:
We hereby authorized	you to pay my accrue losses due to the accident directly to my repairer , Lee f you wish to negotiate, please negotiate with my repairer.
in this connection, we sign your Third Party	hereby authorized you to pay my above losses to my repairer and we undertake t Discharge Voucher once my repairer receive payment from you.
Please send your Thir	d Party Discharge Voucher to my repairer.
Yours faithfully	eej
Name :	

LETTER OF AUTHORITY-CLAIM PROSSESSING -LOD-SERVER

## LETTER OF AUTHORITY

	LETTER OF AUTHORITI	
ACCIDEN	ETSTOP AND Short Kish	MYSE Chard Shr
BY THIS L	ETTER OF AUTHORITY given on the, I/We	who is the
owner	of motorcar bearing registration number $\frac{1}{5}$ $\frac{1}{5}$ $\frac{1}{9}$	do hereby
confirm	that I/We have appointed LEE SHENG AUTO PTE LTD to represent me	e/us and to
	any of the following acts and things:	
		*
i)	To submit, resolve and make any claim(s) which I/We may have	against the
	other party /parties to the Accident and under the insura	nce policy
	/policies taken up by such party /parties in respect of the cost of r	epairs , loss
	of use and all other costs and expenses, etc, suffered by me/us of	arising from
	the Accident (the "loss and damage");	
ii)	To carry out direct negotiation with any third party insurer(s) in res	pect of the
	cost of repairs , loss of use and all other costs and expenses ,etc	arising from
	the accident involving the third party insured;	
	To agree to any compensation or enter into any settlement or o	ompromise
	as it deem fit , in the best interests of me/us, and to do all things	or acts , as
	may deem necessary or expedient for the purpose of settlem	nent of the
	claims;	
-	To receive all monies payable to me/us , such payment to be mo	ade by way
	of cheque in favour of "LEE SHENG AUTO PTE LTD" and give a v	alid receipt
	and discharge thereof;	
<b>v</b> )	To execute and sign on my/our behalf, any discharge voucher of	or any other
	documents in connection with the settlement and/or payment of	the Claim(s)
	to give good discharge	
I/We	further confirm that the acceptance by LEE SHENG AUTO PTE	LTD of the
settle	ement amount in respect of such claim shall constitute the full d	ischarge of
my/	our claim(s) in respect of such loss and damage.	0
	They	1
Signat	ure Company Sta	mp