

LIAN HUP SENG MOTOR WORKS

5035 ANG MO KIO IND PK 2

#01-345

SINGAPORE 569538

ATTN: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Subject: Accident between SMA8805H & SMX3072S on 27/09/2021 along 57 Anchorvale Road

We refer to the above case.

We are instructed by our client to file claim for the damages against your insured.
Our client has suffered loss and damages as a result of your Insured's negligence in the driving of vehicle No. SMA 8805 H.

We quantify our client's claim as follows:

1 COST OF REPAIR	-	\$4500.00
2 LOSS OF USE (4 Days)	-	\$400.00
TOTAL		\$4,900.00

Please let us know within the next 7 days from the receipt of this letter, whether you are prepared to accept all the above amount.

Best Regards,
LIAN HUP SENG MOTOR WORKS
TOK ZHI LEONG
96150948/ 64843683

LIAN HUP SENG MOTOR WORKS

Blk 5035 Ang Mo Kio Industrial Park 2
#01-345, Singapore 569538 (Reg. 46392600E)
Tel : 6484 3683 Fax : 6612 7495
Email : LHSAutoTrading@gmail.com

LETTER OF AUTHORITY & INDEMNITY

ACCIDENT INVOLVING VEHICLE NO : SMA 8805H and SMX 3072S
AT : 57 Anchorvale Road
ON : 27/09/2021

1. I/We Cheong Kok Leong (NRIC No : S1483040E)
of
2. You are further authorized to appoint on my / our behalf and give the solicitors full instructions as if the appointment is made and instructions are govern by me / us with respect to the conduct of my / our claim against the third party driver and / or his insurers including if necessary, to comments legal proceedings in Court in my / our name against the third party.
3. 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.
4. Upon resolving my / our claim, you are authorized to agree with my / our solicitors on the amount of their professional costs and disbursement for acting for me / us and to receive payment of the balance of the settlement sum on my / our behalf directly into your account. In the event that my / our claim or legal suit is not successful or is dismissed for whatever reason. I / We understand and agree that I / We shall be personally liable to bear the legal costs of the third party as well as the professional costs and disbursements of my / our solicitors not withstanding that my / our solicitors were appointed by you on my / our behalf.
5. In the event that I / We a / are required to attend at my / our solicitors officer or to attend Court in connection with my / our claim, I / We shall render full co-operative.
6. In the event that my / our claim against the third party and / or his insurers is not successful or cannot be proceeded with and / or if any Judgement or settlement is not honored or satisfied by the third party. I / We authorize you to make a claim against my / our own insurers for the cost of repairs and any other losses recoverable under my / our policy insurance. In this respect, I / We understand and accept that the excess amount applicate under the policy of insurance shall be borne by me / us.
7. If for whatever reason, my / our insurers reject my / our claim for indemnity for the cost of repair and / or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you. I / We agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my / our behalf or to pay you the difference in amount, as the case may be.
8. That I hereby authorize **LIAN HUP SENG MOTOR WORKS** to submit, resolve and make claim on behalf of the company to matters arising from the said accident.
9. I declare and fully agree that the full settlement of this claim shall be payable to **LIAN HUP SENG MOTOR WORKS** for the repairs carried out on the Company's vehicle (inclusive of the cost of repair, Adjuster fees, Compensation for Actual Repair Time) and all other work done services rendered including any incidental costs and expenses incurred in respect of such claim (s).
10. That I / We will not query the amount stipulated in the Discharge Voucher.
11. That I / We will personally attend to the signing of the Discharge Voucher at your workshop within the stipulated time.
12. That I / We will personally attend to exchange cheque at your workshop within the stipulated time.

My / Our insurers is / are _____
Policy No : _____ Excess _____ Expiry Date _____



Owner's Signature & Company Stamp (if applicable)

Name : Cheong Kok Leong

NRIC No : S1483040E



Witness's Signature

Name : TOK YONG CHEN

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSNW00197172000 Claim No : SNM21D205474/C02/SMX3072S/LEEPG

Claimant : CHEONG KOK LEONG

Amount : S\$2,370.00
DOLLARS TWO THOUSAND THREE HUNDRED AND SEVENTY 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. : SMA 8805H

Insured Vehicle No. : SMX 3072S

Date of Loss : 27/09/2021

Place of Accident : 57 ANCHORVALE RD, SINGAPORE 544964

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 : LIM GU HUA, ADRIAN

Driver Name : LIM GU HUA, ADRIAN

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.

(1) General Damages	S\$	
(2) Cost of Repair/ Excess	S\$	2,250.00
(3) Loss of Use/ Rental/Earning	S\$	120.00
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees /Towing Fee	S\$	
(7) Cost including Disbursement	S\$	
TOTAL		S\$ 2,370.00

Claimant Name : CHEONG KOK LEONG

NRIC No : SXXXX040E

Signature : 

Date : 13/2/2022

LIAN HUP SENG MOTOR WORKS (UEN : 5301 0052E)

Blk 5035 Ang Mo Kio Industrial Park 2, #01-345

Singapore 569538.

Tel: (65) 64843683 Fax: (65) 66127495

email: LHSMotorWorks@hotmail.com

M/S : China Taiping Insurance (Singapore) Pte L
3 Anson Road #15-00 Springleaf Tower
Singapore 079909

Attn : The Accounts Department

Inv No. : BRTC-2021/001

Date : 30.10.2021

REF No. : Tok

Veh No. : SMA8805H

Model : Hyundai

Model : I30

Terms : COD

S/No	Particulars	Amount
	Accident Repair	\$ 4,500.00
	Sin Dollars : FOUR THOUSAND & FIVE HUNDRED ONLY.	
	Total Amount Due :	\$ 4,500.00

E.&.O.E

All cheques should be crossed and made payable to :

LIAN HUP SENG MOTOR WORKS

Transfer Funds to : 018 - 900 613 - 2 (DBS Bank)

LIAN HUP SENG MOTOR WORKS



Authorised Signature

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Friday, 29 October 2021 10:37 AM
To: MINSKI36156@GMAIL.COM
Subject: ACCIDENT INVOLVING SMX 3072S AND SMA 8805H ON 27/09/2021

Our Ref: CC6/CTI21010097/Kea3

29 OCT 2021

LIM GU HUA, ADRIAN

Dear Sir/Madam,

ACCIDENT INVOLVING SMX 3072S AND SMA 8805H ON 27/09/2021

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.

Kindly note that we have reviewed this matter and would like to advise that you and/or your authorized driver may not be absolved from blame for this accident.

If you have evidence/information to prove that we should not settle the third party claim, kindly let us have them in writing within the next 10 day, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please call us if you have further queries.

Yours faithfully,

Asher
Case Handler
Email: ashersng@lkkauto.com

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