Xin Hua Workshop Pte Ltd Letter of Demand

Our Ref:

SLB 292 X

3-Mar-2022

China Taiping Insurance(S) Pte Ltd

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Dear Sir/Mdm:

ACCIDENT INVOLVING SLB292X AND SLN2176Y ON 1-OCT-2021 AT ALONG JUNCTION OF PIONEER ROAD NORTH X ENTRY TO PIE (CHANGI)

We are acting on behalf of the owner/driver to recover his vehicle damages and losses sustainer in the above accident from the third party driver/ or insurers.

Description			Amount		
Repair Costs					\$ 5,457.00
Loss of Rental	\$0.00	X	0	days	\$ -
Loss Of Use	\$80.00	X	8	days	\$ 640.00
Search Fees (LTA)					\$ 7.45
Surveyor fees					\$ -
Others Claim					\$ -
				Amount	\$ 6,104.45

Please look into our client claims and let us hear from you shortly.

Thank you

Kerry Tan

Xin Hua Workshop Pte Ltd

Tel: 8399 6267

email: xinhuaworkshop@gmail.com



Xin Hua Workshop Pte Ltd

23 Kaki Bukit Ave 4 #04-01 (South Wing) Singapore 415933 xinhuaworkshop@gmail.com GST Registration No.: 201838521G

Performa Invoice

ADDRESS

China Taiping Insurance (S) Pte Ltd 3 Anson Road #16-00 Springleaf Tower 079909 **PERFORMA INVOICE** 212 **NO. DATE** 03/03/2022

DATE	DESCRIPTION		AMOUNT
	SLB 292 X - Toyota Altis Date of Accident: 1/10/2021 Lump Sum Repair for Third Party Claim		5,100.00
		SUBTOTAL GST TOTAL	5,100.00 357.00
		TOTAL	S\$5,457.00

Accepted By

Accepted Date



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Receipt No.: ITNET-00000-211004-002210

Print Date/Time:

04 Oct 2021 / 14:39:13

Receipt Date/Time: 04 Oct 2021 / 14:39:13

Tax Invoice/Receipt CWn Veh : SLB 292 X

D-U/ = 01-10-2021

Previous Receipt No.:

Previous Receipt No				AND STREET, ST
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLN2176Y As at 04 Oct 2021/12:00:00 Insurance Co: CHINA TAIPING INSURANCE (1 Insurance Enquiry - SLN2176Y Enquiry Fee 20211004143827475273	SINGAPORE) PTE LTD	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	421808XXXXXX7506	eNETS	Credit Card	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

XIN HUA WORKSHOP PTE LTD REG: 201838521G 23 KAKI BUKIT AVE 4, #04-01 (SOUTH WING), SINGAPORE 415933. TEL: 6844 1985

FAX: 6844 5185



AUTHORISATION & INDEMNITY LETTER

1/We Bizcar A. Ho	NRIC No./UEN No. 2016259912
(the third party claimant), having address at 312 Tampines	St 34 , #09-16
S(530372) and the owner of SLBDG2X	(vehicle) hereby to authorize XIN HUA
WORKSHOP PTE LTD to repair the damage to my vehicle in a rea	asonable time that was pursuant to the
accident which occurred 1/10/2021 (date) along Juncti	ion of Proneer Road Morth X
Entry to PIE (Changi) inloving vehicle/s SIBJADX	
I/We understand, acknowledge and agree that:	
- I/We, the owner of vehicle no. SLB 292 × hereby	y instruct & authorise XIN HUA WORKSHOP
PTE LTD to commence repairs to the said vehicle.	
-I/We confirm that you are hereby authorized to handle the settle my claims, relating to the above mentioned accident, party/parties, or insurers, and/or to instruct lawyers on my/	, which I/We may have, against other third

- You have my/our 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.
- You are hereby authorized to execute and/sign any document discharge voucher/ agreements regarding my/our claims/case for my convenience. You are also hereby authorized to receive on my/our behalf monies/claims, correspondences in connection with this said claims.
- I/We confirm that an event of an unsuccessful claims, against the negligent party, and/or my own insurer for the damages caused to my vehicle, I agree to pay all repair costs and any incidental expenses incurred by you, or the lodge an own damage claim (only for Comprehensive Cover) to cover the expenses incurred.
- I/We also hereby instruct and authorized you deduct from the claim monies received from the third party
 all outstanding balances that are still owing to you, namely the balance of repair cost, rental of subsitute
 vehicles and any other incidentals related to the accident claims.

Owner Signature / Company Stamp / Date

Witness Signature / Name / Date

XIN HUA WORKSHOP PTE LTD REG: 201838521G 23 KAKI BUKIT AVE 4, #04-01 (SOUTH WING), SINGAPORE 415933. TEL: 6844 1985



FAX: 6844 5185

Motor Claim Department:

Dear Sir / Madam,	
On 1/10/3021 (date) there was an accident along X Entry To DIE involving vehicle SLB292X (thangs)	Junction of Pronzer Road Morth with vehicle SLH 21767
1/We, Bizcar Pte Hd vehicle no, SLB 292X	are the registered owner of the motor
Please note that I/We hereby agree that all compensation	monies due to me/us in the above said accident

I/We, hereby authorized you to release all compensation monies pertaining to the above-mentioned accident to XIN HUA WORKSHOP PTE LTD and forward your settlement cheque to XIN HUA WORKSHOP PTE LTD who I/We had authorized to collect the said compensation/monies.

Owner Signature / Company Stamp / Date

to XIN HUA WORKSHOP PTE LTD.

Witness Signature / Name / Date