



Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel : 6636 9100 Fax : 6636 9113

Date : 03/03/2022

Your Ref : SMU5373B

Our Ref : 0478/SGD6410G/TP/PC/1021

**CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD**

**3 Anson Road**

**#16-00 Springleaf Tower**

**Singapore 079909**

**Attn : Motor Claims Dept.**

Dear Sir/Madam

**ACCIDENT INVOLVING SGD6410G & SMU5373B ON 06/10/2021 ALONG  
JUNCTION OF HOUGANG AVENUE 7 AND HOUGANG AVENUE 5**

We refer to the above accident.

The accident was caused solely by the negligence of your insured and as a result, we had incurred the following Costs and Losses: -

|                                  |                          |
|----------------------------------|--------------------------|
| Costs of Repair (Lump Sum)       | \$2,500.00               |
| Rental Fee (3 days at \$120/day) | \$ 360.00                |
| LTA TP Search Fee                | \$ 7.45                  |
| <b>Claimed Amount</b>            | <b><u>\$2,867.45</u></b> |

Enclosed are the supporting documents for your perusal:

1. Invoice 0478
2. Rental Agreement/Tax Invoice
3. LTA Tax Invoice/Receipt
4. Certificate of Insurance
5. Letter of Authority and Indemnity
6. Satisfaction Voucher
7. Letter of Authority

Please let us hear from you within the next 14 days.

Yours faithfully

**PREMIUM CARZ SERVICES PTE LTD**



Co. Reg. No.: 201416720C  
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883  
Tel : 6636 9100 Fax : 6636 9113

## LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SG06410G AND SMU5373B  
AT/ALONG JUNCTION OF HANGAMU AVE 7 & AVE 5  
ON 6 DAY OCTOBER MONTH 2021 YEAR

- I/We, the owner of vehicle no. SG06410G hereby instruct and authorize you to commence repair to the said vehicles.
- You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- 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. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors.
- If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to 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.
- I/we have read and understand the above statement and agreed.

Dated this 7 day October month 2021 year

Signature

: Meenachi

Name

: Meenachi D/O Balasubramaniam

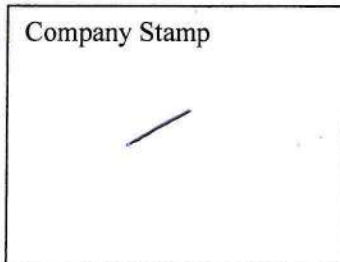
NRIC/ROC No.

: S XXXX 26 J

Address

: Blk 129 Lor Ah Soo  
# 08-324  
S'pore 530129

Company Stamp



MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSNW00159582101

Claim No : SNM21D205728

Claimant : MEENACHI D/O BALASUNDARAM

Amount : S\$2,807.45

DOLLARS TWO THOUSAND EIGHT HUNDRED SEVEN AND CENTS FORTY FIVE 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. : SGD 6410G

Insured Vehicle No. : SMU 5373B

Date of Loss : 06/10/2021

Place of Accident : Hougang Ave 5

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 : LUMENS AUTO PTE LTD

Driver Name : CHEONG YUKE MUI

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.

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|                                                              |       |          |
|--------------------------------------------------------------|-------|----------|
| (1) General Damages                                          | S\$   |          |
| (2) Cost of Repair/ <del>Excess</del>                        | S\$   | 2,500.00 |
| (3) Loss of <del>Use</del> /Rental/Earning                   | S\$   | 300.00   |
| (4) GIA/Police Reports/<br>Investigation Results/Search Fees | S\$   | 7.45     |
| (5) Medical Reports/Expenses                                 | S\$   |          |
| (6) Survey Fees/P.T. Fees                                    | S\$   |          |
| (7) Cost including Disbursement                              | S\$   |          |
|                                                              | ===== |          |
| TOTAL . . . . .                                              | S\$   | 2,807.45 |
|                                                              | ===== |          |

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Claimant Name : Meenachi D/O Balasundaram NRIC No : Sxxxx026J

Signature :  Date : 16/4/22

settlement herein is strictly in relation to 3<sup>rd</sup> party  
property damage claim and is without prejudice  
to personal injuries claim





Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel : 6636 9100 Fax : 6636 9113

INVOICE NO: PC11826

Date : 20/04/2022

Your Ref.: SMU5373B

Our Ref.: 0478/SGD6410G/TP/PC/1021

Bill To :

**China Taiping Insurance (Singapore) Pte Ltd**

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Our Customer : Meenachi D/O Balasundaram

NRIC No. : SXXXX026J

Address : Blk 129 Lorong Ah Soo

#08-324

Singapore 530129

Vehicle No : SGD6410G

Date of Accident : 06/10/2021

Model : Honda Stream 1.7A

**Re: Third Party Claim Against SMU5373B**

| No.              | Item Descriptions               | Amount      |
|------------------|---------------------------------|-------------|
| 1                | FINALIZED SETTLEMENT SUM        |             |
|                  | COR                             | \$ 2,500.00 |
|                  | Rental Fee (3 days @ \$100/day) | \$ 300.00   |
|                  | LTA Search Fee                  | \$ 7.45     |
| TOTAL AMOUNT DUE |                                 | \$ 2,807.45 |

(Singapore Dollars Two Thousand Eight Hundred Seven and Cents Forty Five only)

Yours faithfully



**Premium Carz Services Pte Ltd**

\* All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"



## DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1  
SINGAPORE 798125  
TELI: 6383 2661 FAX: 6484 2836  
REG. NO. 430058/00D

No. **19899**

Date, 28/10/21

### OFFICIAL RECEIPT

Received from

Arayathorai s/o Chelliah

the sum of Dollars

Three hundred sixty only

being Payment Of

SMM BADP (25/10/21 - 28/10/21)

DAWN ENTERPRISES

\$

360/-

Cash/Cheque No.



# DAWN ENTERPRISES

21 Seletar West Farmway 1  
Singapore 798125  
Tel: 63832661 Fax: 64842836  
Reg No.430058/00D



Premium Carz

SG064109

Nº 38008

## RENTAL AGREEMENT

DATE

25/10/21

### HIRER'S PARTICULARS

Name Ayathorai S/o chekiah  
Address AP7 Blk 12A Lorong Ah Soo  
#08-324  
Singapore 530129

I/C or Passport No. \_\_\_\_\_ Country \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth 28/4/1958 Age \_\_\_\_\_

Driving Licence No. \_\_\_\_\_ Date Passed 21/10/1983

Tel: (HP) 97902023 (Residence) \_\_\_\_\_

### DRIVER'S PARTICULARS

Name \_\_\_\_\_

Address \_\_\_\_\_

I/C or Passport No. \_\_\_\_\_ Country \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Driving Licence No. \_\_\_\_\_ Date Passed \_\_\_\_\_

Tel: (Office) \_\_\_\_\_ (Residence) \_\_\_\_\_

### IMPORTANT NOTES:

- 1 No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
- 2 This vehicle is licenced to carry 04 passengers only.
- 3 Hirer is liable to pay first \$ 2000 as excess all claims any accident plus loss of earning while damaged vehicle is under repair.
- 4 For usage to Malaysia subject to higher excess all claims of S\$5,000.00 and different rental rate
- 5 Please notify our office should there be any accident involving this hired vehicle within 24 hrs
- 6 No refund will be given for vehicle returns early.
- 7 No refund will be given for petrol left in vehicle.
- 8 Hirer is liable to pay all parking fee and traffic summonses.
- 9 Vehicles to be return during office hour only.
- 10 No Service on Public Holiday and Sunday.

### CHARGES

|                                    |                  |
|------------------------------------|------------------|
| 3 Day at \$ <u>120.00</u> per days | \$ <u>360.00</u> |
| Day at \$ _____ per week           |                  |
| Day at \$ _____ per month          |                  |
| TOTAL AMOUNT                       | \$ <u>360.00</u> |
| AMOUNT PAID                        | \$ <u>360.00</u> |
| BALANCE DUE                        |                  |
| Days Extension From _____ To _____ |                  |

Amount Deposit (refundable) \$

SCHEDULE SMM 1340 P MODEL T/A/H/S

| Date            | Time         | Mileage |
|-----------------|--------------|---------|
| <u>25/10/21</u> | <u>220pm</u> |         |
| <u>28/10/21</u> | <u>6pm</u>   |         |

FROM

25/10/21

TO

28/10/21

I/we have read and understood the terms and conditions above and hereby agreed to abide

*[Signature]*

*[Signature]*

*[Signature]*

Hirer's Signature

Driver's Signature

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 07 Oct 2021 / 16:25:16

Receipt Date/Time : 07 Oct 2021 / 16:25:16

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-211007-002726

Previous Receipt No. :

| S/N                                                       | Item Description/<br>Business Transaction Reference<br>No.          | Amount<br>Before<br>GST (S\$)                   | GST<br>Amount<br>(S\$) | Amount<br>After GST<br>(S\$) |
|-----------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------|------------------------|------------------------------|
| Result of Insurance Enquiry - SMU5373B                    |                                                                     |                                                 |                        |                              |
| As at 06 Oct 2021/19:30:00                                |                                                                     |                                                 |                        |                              |
| Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD |                                                                     |                                                 |                        |                              |
| 1                                                         | Insurance Enquiry - SMU5373B<br>Enquiry Fee<br>20211007162241580535 | 7.00                                            | 0.49                   | 7.49                         |
| <b>Sub-Total</b>                                          |                                                                     | 7.00                                            | 0.49                   | 7.49                         |
| <b>Total Before Rounding</b>                              |                                                                     | 7.00                                            | 0.49                   | 7.49                         |
| <b>Rounding Difference</b>                                |                                                                     |                                                 |                        | 0.04                         |
| <b>Total Amount Payable</b>                               |                                                                     |                                                 |                        | 7.45                         |
| Paid By                                                   |                                                                     |                                                 |                        |                              |
| 20211007162254183                                         |                                                                     | Direct Debit: eNETS Debit<br>(Internet Banking) |                        | 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.

Save as PDF

OK →

Print Receipt



## Cecilia Chong (LKK Auto)

---

**From:** Cecilia Chong (LKK Auto)  
**Sent:** Wednesday, 20 October 2021 2:38 pm  
**To:** kokhow.tay@lumens.sg  
**Subject:** <STANDARD NOTIFICATION LETTER> OUR REF: CC6/CTI21010351/Ags3 \*\*\* ACCIDENT INVOLVING SMU 5373B & SGD 6410G ON 06/10/2021 \*\*\*

Our Ref: CC6/CTI21010351/Ags3

20 OCTOBER 2021

**LUMENS AUTO PTE LTD**  
DRIVER: CHEONG YUKE MUI

Dear Sir/Madam,

### **ACCIDENT INVOLVING SMU 5373B & SGD 6410G ON 06/10/2021**

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.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 3 days from the date of this letter.

Please call us if you have further queries.

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

"Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement."

**Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.**

Best Regards,

Cecilia Chong | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6749-4274 | email: [CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com) | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)





Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*

## Cecilia Chong (LKK Auto)

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**From:** Jenny Lew <jenny.lew@sg.cntaiping.com>  
**Sent:** Monday, 11 April 2022 5:08 pm  
**To:** Cecilia Chong (LKK Auto)  
**Cc:** Claims Dept of CTI; Admin A  
**Subject:** RE: SNM21D205728/C02/SMU5373B/LEWLC / FW: Direct Settlement - Accident Involving SMU 5373B (OI : CTI - TBA) and SGD 6410G (TP : LKK REF - CC6/CTI21010351/Ags3) on 06/10/2021

[Confidential]

Hi Cecilia

Please proceed up to S\$2,807.45.

Thank you.

\*\* Note: Please cc to [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com) when you reply to us.

**NOTICE :**

In response to the escalating Covid-19 cases, please refrain from sending hardcopy documents to us as delay is to be expected for handling hardcopy documents. All correspondence should be made via email [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com) or fax at [6224 7175](tel:62247175). Any inconvenience caused is much regretted.

Regards,

**Jenny Lew**  
Executive  
Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**  
3 Anson Road #15-00 Springleaf Tower Singapore 079909  
DID: (65) 6389 6172 | Tel: (65) 6389 6116 | F: (65) 6224 7175

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | **WeChat:** 太平獅城 Taiping SG

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**From:** Cecilia Chong (LKK Auto) <CeciliaChong@lkkauto.com>  
**Sent:** Tuesday, 5 April 2022 12:00 pm  
**To:** Jenny Lew <jenny.lew@sg.cntaiping.com>  
**Cc:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>  
**Subject:** RE: SNM21D205728/C02/SMU5373B/LEWLC / FW: Direct Settlement - Accident Involving SMU 5373B (OI : CTI - TBA) and SGD 6410G (TP : LKK REF - CC6/CTI21010351/Ags3) on 06/10/2021

[Confidential]

**CAUTION:** This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Your ref : **SNM21D205728**

Our ref : CC6/CTI21010351/Ags3

Dear Sirs/Madam,

**ACCIDENT INVOLVING SMU 5373B (OI) & SGD 6410G (TP) ON 06/10/2021**

We refer to the above matter.

It is a case of BOLA S10. Liability is not in our driver's favour.

We did clarify with insured the nature of the accident and he's aware that NCD (if any) would be affected.

We seek your approval to offer Third Party repairer " **PREMIUM CARZ SERVICES PTE LTD**" at **\$2,807.45 (all-in).**

The summary is as follows: -

|                                      | Amount<br>Claimed | Amount Revised               |
|--------------------------------------|-------------------|------------------------------|
| 1. Cost of Repair (w/GST)            | \$ 4,851.52       | \$ 2,500.00                  |
| 2. Loss of Rental (3days x \$120.00) | \$ 360.00         | \$ 300.00 (3days x \$100.00) |
| 3. LTA/ GIA Search Fee               | \$ 7.45           | \$ 7.45                      |
| Total                                | \$ 5,218.97       | <b><u>\$ 2,807.45</u></b>    |

**\*\*04 days recommendation for repair.**

Enclosed here with all the relevant documents for your perusal.

**For your approval/instruction please.**