## PRECISE AUTO SERVICE

NO 1 KAKI BUKIT AVE 6 #02-33/34/36 AUTOBAY SINGAPORE 417883

TEL: 6745 7367 FAX: 6841 3390

CO. REG. NO.: 35766600C GST REG. NO.: 35766600C

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Date Of Accident: 13-11-2021

TAX INVOICE

OUR REF: SLM 4656X/O/21

Invoice No.: **OD2111-001** 

12-11-21

M/S India International Insurance Pte Ltd

64 Cecil Street #04/#05/#06-02 IOB Building

Singapore 049711

ATTN: (Motor Claims Department)

INSURED: YEO HONG HONG POLICY NO: D19MPC0001209\_02

VEHICLE NO: SLM 4656X

**MODEL: HYUNDAI ELANTRA** 

DATE:

### **FINAL BILL**

LUMP SUM REPAIR

**INCLUDING SUPPLY OF PARTS & LABOUR** 

PANEL BEATING & SPRAY PAINTING

3,300.00

LESS OWNER'S EXCESS

(600.00)

SUB-TOTAL

2,700.00

ADD GST 7%

189.00

TOTAL AMOUNT SGD

2,889.00

This is a computer generated document and requires no signature.



# OWN DAMAGE (OD) CLAIM SATISFACTION & DISCHARGE VOUCHER

Policy No.	: DIGMPC 0001209-02	Claim No. :

Vehicle No. : SLm 46 S6 X Date of Loss : 03/11/2021

Insured : Yeo Hong Hong
Repairers : Decise Auto Service

Gross cost of repairs : S\$ 3,300/2

Policy excess : S\$ 660 2

Cost of repairs net of policy excess : S\$ 2, 700-00

GST, if applicable : S\$ 189 - 00

Total amount payable : S\$ 2,889- 00

I/We hereby declare and confirm that I/we have received from the aforesaid Repairers my/our aforesaid vehicle which is repaired to my/our entire satisfaction and is now in good running order and in consideration of INDIA INTERNATIONAL INSURANCE PTE LTD (hereinafter referred to as Insurers) settling the repair costs stated above with the said Repairers, I/we hereby release and discharge the Insurers from all further obligations in respect of damage to my/our aforesaid motor vehicle on the abovementioned date. Insurers will continue to be liable in respect of the third party injury and property damage claims, if any.

I/We confirm that there is no other insurance covering this loss or damage and no other person has any interest in the subject matter of this claim. In consideration of the above payment, I/we have no further claims whatsoever on the Insurers and I/we hereby undertake to indemnify and hold harmless the Insurers against any claim which may be made against them in respect of damage to my/our aforesaid motor vehicle on the abovementioned date.

I/We hereby agree that by virtue of the aforesaid payment the Insurers are subrogated to all my/our rights and remedies in accordance with the laws governing the contract of insurance. I/We hereby authorize the Insurers to use my/our name to the extent necessary to exercise all or any of such rights and remedies. I/We further agree to co-operate with and render all assistance to the Insurers which they may reasonably require when exercising such rights and remedies.

I/We agree that if at any time subsequent to the settlement of the claim, the Insurers become aware of any material fact which if known earlier would have prejudiced my / our claim wholly or in part, I/we will refund the entire claim amount incurred by the Insurers within 7 (seven) days from the date on which Insurers make a demand in writing for such a refund.

Date: 12 11 2621.					
Signature of Insured	:	Signature of Witness	:	Fine.	
Name	: Yeo Hong Hong	Name	:	Arihe	
NRIC	: 30054709 C	NRIC	:	G2166731KC	
Designation & Company St	amp:				

## PRECISE AUTO SERVICE

NO. 1 KAKI BUKIT AVE 6 # 02-34/36/33 AUTOBAY SINGAPORE 417883 TEL: 6745 7367 FAX: 6841 3390

CO. REG. NO.: 35766600C GST REG. NO.: 35766600C

12-11-2021

Your Ref.: D19MPC0001209\_02 Vehicle No.: SLM 4656X/O/21

M/s INDIA International Insurance Pte Ltd 64 Cecil Street #05-01 IOB Building Singapore 049711

ATTN: Mr. Gabriel (Motor Claims Department)

Dear Sir

#### RE: ACCIDENT INVOVLING VEHICLE NO. SLM 4656X ON 03 NOV 2021

We enclose herewith the final bill and discharge voucher duly executed as requested for your attention.

Kindly forward us payment of **\$2,889.00** within the next fourteen (14) days to be issued in favour of **"PRECISE AUTO SERVICE"**.

Your prompt reply of the above claims will be much appreciated.

Yours faithfully

Arine Aou