

Letter of Demand

Your Ref : VN8778S
Our Ref : OCR/12112021/TP-10848 ~ SLF 8581M
Date : 01/12/2021

LONPAC INSURANCE BHD.

BLK 100 BEACH ROAD
-#19-00 SHAW TOWER
Singapore - 189702

Attn : Motor Claim Department

Subject : ACCIDENT INVOLVING VEHICLE NUM : SLF-8581-M, VN8778S ON 12/11/2021
AT 53 LENGKOK BAHRU CAR PARK LOT

Dear Sir / Madam,

We would like to append our losses as follows :-

	AMOUNT (\$)
1. Repair Cost	2,247.00
2. Loss Of Use (4 days)	320.00
3. Miscellaneous - GIA Search Fee	31.00

TOTAL **2,598.00**

Enclosed : Copies of Repair Cost Invoice, GIA Search Invoice & GIA Report for your perusal and kind attention.

Kindly look into the matter and revert to us as soon as possible.

Thank you,

Yours faithfully,

Lim Ai Lee 
CLAIM DEPARTMENT

DID : 66547920

FAX :

EMAIL : ailee.lim@ethozgroup.com

Date : 15/11/2021

To : **ETHOZ GROUP LTD**
() 30, Bukit Batok Crescent, Singapore 658075
() 50, Gul Crescent, Singapore 629543
(✓) 22, Tampines Street 92, Singapore 528876

From : **ETHOZ AUTO LEASING LTD**
(Name of Owner & Policyholder/Authorising Party**)

CLAIM VEHICLE NO. : SLF8581M

ACCIDENT DATE : 12/11/2021

LOCATION : 53 LENGKOK BAHRU CAR PARK LOT

OTHER VEHICLE (S) : YN8778S
(IF ANY)

1. I hereby authorise **ETHOZ GROUP LTD** ("ETHOZ") to :-
- a. proceed with the repairs (the "Repair") to the above accident (the "Accident") damaged vehicle (the "Vehicle"); and
- b. ☒ act as sole and principal agent to claim (the "Claim") on my behalf for the damage to the Vehicle (the "Damage") from my insurer in question (the "Insurer") until the Claim is wholly completed, settled and/or resolved. [Claim against own insurer(s)].
- b. ☒ act as sole and principal agent to claim (the "Claim") on my behalf for the damage to the Vehicle and/or ** bodily injury sustained as a result of the Accident (collectively known hereinafter as the " Damage ") from the Third Party and/or Third Party Insurer in question (collectively known as the " Third Party ") until the Claim is wholly completed, settled and/or resolved. [Claim against Third Party].
2. I confirm that ETHOZ's authorisation shall include without limitation paying for all relevant reports/documents, corresponding and negotiating with the Insurer/Third Party** and any other relevant parties, correspondence of any nature with solicitors, appointing solicitors to act in connection with the Claim and, any or all such other tasks concerning the settlement, resolution and/or completion of the Claim;

I Where authorising party is not vehicle owner and policyholder.

I I am duly authorised by the owner and policyholder of the Vehicle to enter into this Agreement with ETHOZ on his behalf. Unless the context otherwise requires, any references to "me", "my", "I" and the like in this Agreement shall be taken to mean the vehicle owner and policyholder.

Page 1 of 3

**Tick where applicable,
** Delete as appropriate.*

EXCEPT :-

- a. such matters or tasks that the Insurer/Third Party** and/or the law requires me to personally attend to; and
 - b. the due submission of the Claim to the Insurer (where applicable)
3. I understand if I submit a claim of whatever nature to my own insurer(s) **FOURTEEN (14) days** after the Accident (or such other time stipulated by my own insurer(s) and/or the law), such claim will not or may not be accepted by my own insurer.
4. I further confirm and accept that :-
- a. To the extent permitted by law :-
 - i. I will indemnify and keep ETHOZ indemnified in connection with or arising from the Claim; and
 - ii. That notwithstanding this Agreement or otherwise, under no circumstances will I (jointly or severally) in any manner hold ETHOZ liable for losses/damages of whatever nature arising from or in connection with the Claim.
 - b. ETHOZ does not guarantee and never represented that the Insurer/Third Party** will fully indemnify me for the Damage and/or the Repair's costs **AND**, that I shall be and continue to be liable to ETHOZ for the whole of the Repair's costs.
6. I agree and accept "ETHOZ's Deposit refund policy". If the final successful percentage of indemnity/contribution/liability from or of the Insurer/Third Party** in respect of the Repair's costs to me is: -
- | | | | |
|----|---------------|---|--------------------|
| a. | 50% and below | - | NO REFUND |
| b. | 100% | - | FULL REFUND |
7. I shall inform and forward to ETHOZ all correspondence and letters received by me from the Insurer/Third Party**, any other insurer, solicitors, governmental authorities and/or, any other relevant party.
8. I shall fully co-operate with and act expeditiously on any requests by ETHOZ, particularly the signing/endorsement/execution of any "Discharge Voucher", failing which I shall be liable to ETHOZ for the full repair costs and the expenses incurred (directly or indirectly) by ETHOZ in connection with the Claim.
9. I shall not: -
- a. respond to correspondence and letters; and
 - b. negotiate agree or accept any offer from the Insurer/Third Party** or any other relevant party; without consultation of and expressed approval from ETHOZ



10. In consideration hereof (including without limitation ETHOZ's agreeing to repair the Vehicle and defer demanding payment of the Repair's cost), I wholly assign to ETHOZ all proceeds of the Claim for: -

- a. the Repair's costs; and
- b. damage, compensation, interest, costs (including party-to-party legal costs on a full indemnity basis) and expenses in connection with the Accident, Repair and/or Claim;

which ETHOZ shall be further entitled to apportion in its absolute with any excess being paid by ETHOZ to me as it deems fit in its absolute discretion.

11. I further confirm that payment to ETHOZ or to any person (which shall include a body corporate) authorised by you to receive payment in lieu shall constitute a good and effective discharge of the payment obligations by any party of the aforesaid proceeds of my Claim And that I shall not be authorised in law to receive payment.



Owner & Policyholder's Signature/Company Stamp (if applicable); **or** **
Authorising Party's Signature/Company Stamp (if applicable)
Name: ETHOZ AUTO LEASING LTD
NRIC No.: 201613943G
Designation:
Address:

Witness' Signature  **CHEN CHEE KIONG**
Name:
NRIC No.:
Designation: MOTOR CLAIMS SALES EXECUTIVE
Address: C/O 30 BT BATOK CRESCENT SINGAPORE 658075



LONPAC INSURANCE BHD

CLAIM NO : 21/21/21/VC00/025150
DATE : 23 FEB 2022

DISCHARGE VOUCHER

I/We, **ETHOZ AUTO LEASING LTD** confirmed acceptance from **M/s LONPAC INSURANCE BHD** and/or owner of **YN 8778S** the sum of Singapore Dollar **TWO THOUSAND FIVE HUNDRED AND EIGHTEEN ONLY (\$2,518.00)** in full and final satisfaction, liquidation and discharge of all injury/property losses competent to me/us upon the said **M/s LONPAC INSURANCE BHD** in respect of all injury/property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving **SLF 8581M** and **YN 8778S** on **12/11/2021** along **53 LENGKOK BAHRU**.

I /We hereby agree to indemnify and keep indemnify (**LONPAC INSURANCE BHD/ W & Y ELECTRICAL TRADING**) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to **ETHOZ GROUP LTD.**

I/We hereby acknowledged that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.

.....
Signature of vehicle owner/Date



13/03/2022

.....
Name of vehicle owner /Date

TAX INVOICE

LONPAC INSURANCE BHD
300 BEACH ROAD
#17-04/07 THE CONOURSE
SINGAPORE - 199555

Tax Invoice : WS 2112/OFM0001
Invoice Date : 01-Dec-2021
Ref. No. : 21110693
GST No. : M2-0057587-3

VEHICLE NO. : SLF-8581-M
ACCIDENT DATE : 12/11/2021

MAKE & MODEL : TOYOTA COROLLA ALTIS 1.6 STANDARD (A)

Page 1

Description	Qty	Unit Price(S\$)	Amount (S\$)
BEING REPAIR COST FOR THE ABOVE VEHICLE			2,100.00
7 % GST			147.00



	Total (S\$)	2,247.00
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E & O,E

CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO ETHOZ GROUP LTD

No receipt will be issued.

Computer generated document no signature required.

CONTACT : LIM AI LEE
DID : 66547920
Main : 63198000
Fax :

PLEASE DETACH AND ENCLOSED WITH PAYMENT

Customer's Copy

Please do not staple, Please write your Invoice No. on the back of your cheque.

Customer Name : LONPAC INSURANCE BHD
Reference. No. : 21110693
Tax Invoice : WS 2112/OFM0001
Invoice Date : 01-Dec-2021
Invoice Amount : S\$ 2,247.00
Payment Due Date : 01-Dec-2021
Cheque No. : _____

ETHOZ GROUP LTD
30 BUKIT BATOK CRESCENT
SINGAPORE 658075




INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

YN8778S

Date of Accident

12/11/2021 

Reset

% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**Period of Insurance **22/05/2021 - 21/05/2022**Requested By **Chen Chee Kiong (ETHOZ PRO...**Requested Date **15/11/2021 15:44****Payment details**Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Date of Request: 17/11/2021

Your Ref No: 7607

Dear Sir/Madam,

Date of Accident: 12/11/2021 00:00 (SGT)

Vehicle No: SLF8581M

Place of Accident: Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
YN8778S	Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.

Asher Sng (LKKAUTO)

From: KENNY LIM CHING GHEE <kennylim@lonpac.com>
Sent: Tuesday, 22 February 2022 5:58 PM
To: Asher Sng (LKKAUTO)
Cc: MT_Claim_SG; Admin A
Subject: RE: [MANDATE REQUEST] RE: Seeking your offer // RE: Your ref: YN8778S DOA: 12.11.2021 *** LKK REF: CC4/LPC21011653/Uea3q2 - LP Ref: 21/21/21/VC00/025150

Follow Up Flag: Follow up
Flag Status: Flagged

Lonpac External - Confidential

Dear Asher

Please proceed as per your recommendations.

Thank you.

Best Regards

Kenny Lim
Asst. Claims Manager | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
DID: 6279 9256 | Fax: (65) 6296 2706



"In view of the revised measures for transition under Phase 2 COVID-19 restrictions effective 19 August 2021, 50% of our staff will be working from home. Please expect delays in our replies, payments and claims settlements during this period. Your understanding is greatly appreciated and we apologise for any inconvenience caused".

We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

From: Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>
Sent: Monday, 21 February 2022 9:50 pm
To: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Cc: MT_Claim_SG <mt_claim@lonpac.com>; Admin A <admin-a@lkkauto.com>
Subject: [MANDATE REQUEST] RE: Seeking your offer // RE: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021 *** LKK REF: CC4/LPC21011653/Uea3q2

Dear Sirs,

We refer to the above matter.

We have highlighted to your good office on 17/11/2021 of Third-Party's request to do Direct Settlement with our Principal, Lonpac Insurance Bhd.

The accident occurred when our insured exit the parking lot and collided third party vehicle.

Basing on the reports of the circumstance of the accident, we propose to settle third-party claim at 100% liability.

Summary to offer to repairer **ETHOZ GROUP LTD** is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	\$ 3,254.67	\$ 2,247.00
2. Loss of Use (4days x \$80)	\$ 320.00	\$ 240.00 (4days x \$60)
3. LTA/GIA Search Fee	\$ 31.00	\$ 31.00
Total	\$ 3,605.67	\$ 2,518.00

**4 days recommendation for repair.

Relevant supporting claim documents are attached herewith for your perusal and reference.

The above is for your approval please.

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

email: ashersng@lkkauto.com | did: 6841-6051 | Mobile: 8839 9816

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

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.

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>

Sent: Tuesday, 8 February 2022 3:31 PM

To: GERALD POH WEE BIN <geraldpoh@lonpac.com>; Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Cc: MT_Claim_SG <mt_claim@lonpac.com>; Admin A <admin-a@lkkauto.com>

Subject: RE: Seeking your offer // RE: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021 *** LKK REF: CC4/LPC21011653/Uea3q2

Dear Sir / Madam,

Thank you for your email.

Our respective case handler will look into the matter and get back to you in due course.

Hi Asher,

Please expedite.

To check availability of the case handler, you may contact the undersigned.

"Wishing You Happiness & Prosperity Chinese New Year 2022"

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

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.

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>

Sent: Tuesday, 8 February, 2022 2:27 PM

To: Mei Kwan (LKKAUTO) <Meikwan@lkkauto.com>

Cc: MT_Claim_SG <mt_claim@lonpac.com>

Subject: FW: Seeking your offer // RE: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021

Lonpac External - General

Dear Mei Kwan,

FYA

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

We are committed to acting professionally, fairly and with integrity. We do not condone bribery, fraud or corrupt practices.

From: Lim Ai Lee <AiLee.Lim@ethozgroup.com>

Sent: Tuesday, 8 February 2022 2:23 pm

To: MT_Claim_SG <mt_claim@lonpac.com>

Cc: #SG Workshop Motor Claims Settlement <SGWorkshopMotorClaimsSettlement@ethozgroup.com>

Subject: Seeking your offer // RE: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021

Dear Sir,

We refer to the above matter.

Attached herewith our Letter of Demand for your perusal.

We would like to seek assistance to expedite the claim settlement and revert an offer to us.

Hope to hear from you soon.

Thank you.

Warmest Regards,

Lim Ai Lee

Claim Settlement



ETHOZ GROUP LTD

22 Tampines Street 92 Singapore 528876

DID: 6654 7920
FAX: 6654 7540
Website: www.ethozgroup.com



From: Lim Ai Lee <AILee.Lim@ethozgroup.com>
Sent: Tuesday, December 28, 2021 2:14 PM
To: mt_claim@lonpac.com
Cc: #SG Workshop Motor Claims Settlement <SGWorkshopMotorClaimsSettlement@ethozgroup.com>
Subject: RE: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021

Dear Sir,

We refer to the above matter.

Attached herewith our Letter of Demand for your perusal.

We would like to seek assistance to expedite the claim settlement and revert an offer to us.

Hope to hear from you soon.

Thank you.

Warmest Regards,
Lim Ai Lee
Claim Settlement



ETHOZ GROUP LTD

22 Tampines Street 92 Singapore 528876

DID: 6654 7920

FAX: 6654 7540

Website: www.ethozgroup.com



From: Lim Ai Lee <AILee.Lim@ethozgroup.com>
Sent: Wednesday, December 1, 2021 9:29 AM
To: mt_claim@lonpac.com
Cc: #SG Workshop Motor Claims Settlement <SGWorkshopMotorClaimsSettlement@ethozgroup.com>
Subject: Your ref: YN8778S Our ref: SLF8581M DOA: 12.11.2021

Dear Sir/ Madam,

We refer to the above matter.

We attached Letter of Demand for your necessary action.

Kindly let us hear from you as soon as possible.

Thank you.

Warmest Regards,
Lim Ai Lee
Claim Settlement



ETHOZ GROUP LTD

22 Tampines Street 92 Singapore 528876

DID: 6654 7920

Website: www.ethozgroup.com



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