

**Autolution Industrial Pte Ltd**

Tan Chong Motor Sales Pte Ltd's Authorised Dealer
19 Ubi Road 4
Singapore 408623
Tel (65) 64909666 / 67038680
Fax (65) 68467483
Business Reg. No.: 199500871W

DATE: 29/12/2021

YOUR REF: _____

OUR REF: INS/IC/EA/0420/21

The Motor Claims Department

LONPAC INSURANCE BHD

ATTENTION TO CLAIMS OFFICER :

ASHER SNG(LKK)

Dear Sir/ Madam,

Accident Involving:

MY CLIENT VEHICLE GP1199L AND AGAINST YOUR INSURED VEHICLE YN8022P

Accident Date:

6/12/2021 12:15

Place and time of accident:

CLEMENTI ROAD

RE: Direct Settlement for the Vehicle Number.

GP1199L

On behalf of the owner of Motor Vehicle No.

GP1199L

,which was involved

in the captioned accident

The Vehicle was surveyed by your appointed suveyor at **AUTOLUTION INDUSTRIAL PTE LTD 19 UBI ROAD 4 SINGAPORE 408623**

and I based my claims on his recommendation for SGD \$7435.54 being the repair cost and period of repair for

6 days. (Strictly on a Without Prejudice Basis)

As the accident was cause by the negligent act of your insured

YN8022P

I am submitting this claim for your

consideration

COST REPAIR

SGD \$

6,833.54

COST OF LESS

6

DAYS (S) SGD\$ /DAY

SGD \$

600.00

(Please refer to authorization letter

GIA REPORT FEES (SGD\$ 12.00 FOR SEARCH FEE & SGD\$ 15.00 FOR EACH

SGD \$

REPORT FEE

LTA SEARCH /SURVEY FEE

SGD \$

2.00

COST OF CAR RENTAL

DAY(S) SGD \$

SGD \$

TOTAL AMOUNT

SGD \$

7,435.54

We enclose herewith the following documents to support my claims,

A. AUTHORIZATION LETTER

E. FINAL REPAIR BILL (S)

B. LTA SEARCH

F. GIA REPORT (S) RESULT

C. INSURANCE CERTIFICATE ETC.

D. CAR RENTAL INVOICE

Kindly look into this matter and let me hear from you on the settlement of the owner's
claims as soon as possible. Thank you .

Yours Faithfully

Elmer Alfonso

Service Executive

AUTOLUTION INDUSTRIAL PTE LTD
19 UBI ROAD 4
SINGAPORE 408623
TEL: 6490 9666 FAX: 68467483



LETTER OF AUTHORITY AND INDEMNITY


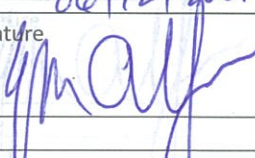

- ☐ Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623
☐ Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
☒ Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623
☐ TC Autoclinic Pte Ltd, 25, Leng Kee Road, Singapore 159097
☐ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

Type of Claim:

- ☒ Third Party (Direct Settlement)
☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. GP1199L AND YN8D22P
 ON 6/12/2021 1215pm AT CLEMENTI ROAD

1. I, the owner of vehicle no. GP1199L hereby instruct you and authorise you to act for me with respect to the following: -
 - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
 - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
 - (d) To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs 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 agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
 - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
 - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name <u>COMMAND-AIR PTE LTD</u>		Company Name <u>AUTOLUTION INDUSTRIAL PTE LTD</u>	
Address <u>237 UBI AVE # 51408820</u>		Claim Officer's Name <u>FUNK ALFONSO</u>	
Telephone No <u>62431815</u>		Telephone No <u>9645 0084</u>	
Date <u>6/12/2021</u>	Email <u>SERVICIA@Command-Air.co.uk</u>	Date <u>06/12/2021</u>	
Company Stamp [For Co Regn Vehicle]	Authorized Signature 	Claim Officer Signature 	

AUTOLUTION INDUSTRIAL PTE LTD

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



TAX INVOICE

GST REG: M2-8920338-9

NAME :
ADDRESS : LONPAC INSURANCE BHD
300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : MVL2RDRE26KW3GBR-D
CHASSIS NO : YD25382579A
VEHICLE NO : JN1MC2E26Z0005245
GP1199L

INVOICE NO. :
INVOICE DATE : W32149980
TERMS : 29-DEC-2021
DATE REC'D : CREDIT
SA / SE : 21-DEC-2021
JOB NO : ELMER
MILEAGE : HG852373
YOUR REFERENCE : 134252
INS/IC/EA/0420/21

ITEMS	JOB DESCRIPTION	Credit terms	AMOUNT
1	YOUR CLAIM HANDLER:ASHER SNG YOUR INSURED VEHICLE NUMBER:YN8022P Insurance Co : LONPAC INSURANCE BHD Policy No....: D21MTPCVE002493 Claim Type ...: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA.....: 06-DEC-2021 Our Ref.....: INS/IC/EA/0420/21 Surveyor.....: SURVEYOR FROM INSURANCE CO		
	LABOUR	:	3103.00
	PARTS	:	3283.49
	SUBTOTAL	:	6386.49
	TOTAL	:	6386.49
	GST(7%)	:	447.05
	AMOUNT DUE	:	6833.54

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)
DOLLARS: SIX THOUSAND EIGHT HUNDRED THIRTY
THREE AND CENTS FIFTY FOUR ONLY.

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

GP1199L

(HG852373/W32149980)

RELEASE BY 28-12-2021

16:54:11

AUTOLUTION INDUSTRIAL PTE LTD

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



TAX INVOICE

NAME :
ADDRESS : LONPAC INSURANCE BHD
300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : MVL2RDRE26KW3GBR-D
CHASSIS NO : YD25382579A
VEHICLE NO : JN1MC2E26Z0005245
GP1199L

GST REG: M2-8920338-9
INVOICE NO.:
INVOICE DATE : W32149980
TERMS : 29-DEC-2021
DATE REC'D : CREDIT
SA / SE : 21-DEC-2021
JOB NO : ELMER
MILEAGE : HG852373
YOUR REFERENCE : 134252
INS/IC/EA/0420/21

ITEMS	JOB DESCRIPTION	Credit terms	AMOUNT
4	REAR BUMPER Qty:1 @ \$403.66 each (Special Nett Item)		403.66
5	GLASS-TAIL GATE Qty:1 @ \$539.06 each (Special Nett Item)		539.06
6	TAILGATE LOCK Qty:1 @ \$173.70 each (Special Nett Item)		173.70
7	CHROME TAILGATE FINISHER Qty:1 @ \$324.10 each (Special Nett Item)		324.10
8	EMBLEM-BACK DOOR NV350 Qty:1 @ \$66.55 each (Special Nett Item)		66.55
9	EMBLEM-REAR NISSAN Qty:1 @ \$39.27 each (Special Nett Item)		39.27
10	EMBLEM-BACK DOOR URVAN Qty:1 @ \$39.27 each (Special Nett Item)		39.27
11	TAIL GATE Qty:1 @ \$1208.98 each (Special Nett Item)		1208.98
12	REAR W/SCREEN SEALANT Qty:1 @ \$80.00 each (Special Nett Item)		80.00
13	SENSOR-REVERSE Qty:1 @ \$250.00 each (Special Nett Item)		250.00
	SUBTOTAL :		3283.49
	REMARKS		

DOLLARS:

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

RELEASE BY



www.tanchong.com

AUTOLUTION INDUSTRIAL PTE LTD

In Association with Tan Chong Motor Sales Pte Ltd
19 UBI ROAD 4 SINGAPORE 408623 TEL: 64909666/67038680 FAX: 68467483
Business Reg. No.: 199500871W
GST Reg. No.: M2-8920338-9



TAX INVOICE

NAME :
ADDRESS : LONPAC INSURANCE BHD
300 BEACH RD
TELEPHONE : #17-04/07 THE CONCOURSE S(199555)
MODEL : 62507388
ENGINE NO : MVL2RDRE26KW3GBR-D
CHASSIS NO : YD25382579A
VEHICLE NO : JN1MC2E26Z0005245
GP1199L

GST REG: M2-8920338-9
INVOICE NO. :
INVOICE DATE : W32149980
TERMS : 29-DEC-2021
DATE REC'D : CREDIT
SA / SE : 21-DEC-2021
JOB NO : ELMER
MILEAGE : HG852373
YOUR REFERENCE : 134252
INS/IC/EA/0420/21

ITEMS	JOB DESCRIPTION	Credit terms	AMOUNT
	LABOUR		
1	LABOR CHARGES TO REPAIR TRUNKFLOOR, INNER END PANEL BOTH INNER PANEL RR FENDER AND OUTER END PANEL		1520.00
2	RENEW RR BUMPER AND TAIL GATE		NC
3	CHARGES TO SPRAY PAINTING TRUNKFLOOR, INNER/OUTER END PANEL, BOTH RR FENDER INNER EXTENSION, RR BUMPER AND TAIL GATE		1100.00
4			NC
5	REMOVE AND INSTALL TAILGATE MECHANISM		80.00
6	RENEW REAR WINDSCREEN GLASS		180.00
7	RENEW REVERSE SENSOR		55.00
8	RENEW RH RR COMB LAMP AND CHECK WIRING SYSTEM RR		48.00
9	COMPUTER CHECK DIAGNOSIS		120.00
10	SUPPLY REAR LICENSE PLATE		NC
	SUBTOTAL	:	3103.00
	PARTS		
1	CLIP RR BUMPER @ SGD \$0.79 EACH Qty:10 @ \$.79 each (Special Nett Item)		7.90
2	RH RR COMB LAMP Qty:1 @ \$136.00 each (Special Nett Item)		136.00
3	70KM/H STICKER Qty:1 @ \$15.00 each (Special Nett Item)		15.00

DOLLARS:

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER

PLEASE TEAR ALONG PERFORATED LINE

TO SECURITY GUARD

DATE

TIME

VEHICLE NO :

RELEASE BY

SATISFACTORY NOTE

TAN CHONG MOTOR SALES PTE LTD (TCMS)

AUTOLUTION INDUSTRIAL PTE LTD (AIPL)

TC AUTOCLINIC PTE LTD (TCAC)

DATE:

06/12/2021

OWNER NAME:

COMMAND - AIR PTE LTD

NRIC NO.:

ADDRESS:

237 UP1 AVE 4

INTREPID WAREHOUSE

COMPLEX S(408820)

VEHICLE MODEL:

NISSAN NV350 PANEL VAN MT EURO 5

REGN. NO.:

GP1199L

CHASSIS NO.:

JN1MC2F26Z0005245

TYPE OF CLAIM:

OWN DAMAGE (OD)

OWN DAMAGE (OD) & UNINSURED LOSS (EXCESS & LOSS OF USAGE) VIA

TCMS / AIPL / TCAC

THIRD PARTY THROUGH TCMS / AIPL / TCAC

THIRD PARTY - OWNER DIRECT CLAIM AGAINST THIRD PARTY INSURANCE

WINDSCREEN / GLASS (W/S)

LONPAC INSURANCE

INSURANCE CO.:

BHD

CLAIM NO.:

INS/IC/EA/0420/21

POLICY NO.:

DATE OF ACCIDENT:

06/12/2021

DATE RECEIVED:

06/12/2021

DATE COMPLETED:

27/12/2021

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no further claim whatsoever against the above Company in respect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on*

28/12/2021

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD [Non Claim Discount] may also be affected, subject to business policy of respective Insurance Company.



K. Jey.

(NAME / SIGNATURE OF INSURED)

FOOTNOTE:

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF OF OWNER THROUGH TCMS'S LEGAL AID

DEPOSIT PAID BY OWNER

OWNER WILL MAKE CLAIM AGAINST THIRD PARTY INSURANCE COMPANY

DOCUMENTS RETURNED TO OWNER

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF OF OWNER UNINSURED LOSS. (EXCESS PAYMENT & LOSS OF USAGE)

INSURANCE CO. COPY

* Delete When Necessary


INSURER ENQUIRY

Find insurer

Vehicle reg. no.

YN8022P

Date of Accident

06/12/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**

Period of Insurance **26/05/2021 - 25/05/2022**

Requested By **Eric Koh Yong Lang (Tan Chon...**

Requested Date **07/12/2021 10:14**

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**