

Letter Of Claim For Uninsured Loss

Insurance Company: INDIA INTERNATIONAL INSURANCE

Address : _____

Attention : Claims Department – Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number SLH 2174J & SLH 8715J
at Slip road Clementi Rd / upp on 01 Dec 2021
Bukit Timah Rd

I am the owner of Vehicle Number SLH 2174J which was involved with the accident as mentioned above.


As the accident was solely caused by your insured vehicle, bearing registration number SLH 8715J, I hereby submit my claim against your company for the uninsured loss which are as follows:

Excess payment for OD claim	\$	_____
Loss of usage (\$\$/day) for <u>4</u> days x \$50	\$	<u>200.00</u>
Car rental as per invoice attached	\$	_____
Search fee	\$	<u>7.45</u>
Others <u>COR</u>	\$	<u>3,485.89</u>
Total claim amount	\$	<u>3,693.34</u>

Enclosed please find copies of GIA report, invoices and certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof, or alternatively let me have the full and final settlement for all uninsured loss which amounted to \$ 3,693.34, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely


(Owner of motor vehicle)

Name : Chua Lye Choon

Address : Blk 852 Jurong
West St 81 #02-315 S(640852)

Telephone : 88895955



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. SLH2174J AND SLH8715J
ON 01 Dec 2021 AT Slip road Clementi Rd / upp Bukit Timah Rd.

1. I, the owner of vehicle no. SLH2174J 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>Chua Lye Choon</u>		Company Name <u>TAN CHONG MOTOR SALES PTE LTD</u>
Address <u>Blk 852 Jurong West St 1</u>		Claim Officer's Name <u>913 Bukit Timah Road</u>
# <u>02-315, Singapore 640852</u>		<u>Singapore 589623</u>
Telephone No <u>8889 5955</u>		Telephone No <u>Tel: 6466 7711 Fax: 6469 7472</u>
Date	Email	Date
Company Stamp [For Co Regn Vehicle]	Authorized Signature 	Claim Officer Signature

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MFL2021D0005299
Claimant Ref: SLH 2174J

We/I, TAN CHONG MOTOR SALES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 3,485.89 (repair cost), S\$ 200.00 (loss of use/rental), S\$ 7.45 (search fee), vehicle no. SLH 2174J that was damaged pursuant to the accident which occurred on 01/12/2021 (date) at Clementi Rd (location) involving vehicle no. SLH 8715J (insured vehicle). This is pursuant to the inspection conducted on 08/12/2021 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CHUA LYE CHOON ("the third party claimant") of vehicle no. SLH 2174J to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SLH 2174J (vehicle no.) as a result of the accident.


We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 3,693.34 to TAN CHONG MOTOR SALES PTE LTD.

Dated this 17 day of 03 2022

CLAIMANT:

Signature: 
Signed by "the workshop" (with chop)

Name: TAN CHONG MOTOR SALES PTE LTD
NRIC: 913 Bukit Timah Road
Singapore 589623
Address: Tel: 6466 7711 Fax: 6469 7472

Nationality: _____

Occupation: _____

WITNESS:

Signature: 
Signed by appointed Surveyor

Name: LKK AUTO CONSULTANTS PTE LTD
NRIC: 199607198R
Address: 51 UBI AVE 1 #02-25

PAYA UBI INDUSTRIAL PARK S(408933)

Nationality: _____

Occupation: _____



Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
SERVICE CENTRES
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
19 LORONG 8, TOA PAYOH, SINGAPORE 319255. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : INDIA INT'L INSURANCE PTE LTD
ADDRESS : 64 CECIL STREET
TELEPHONE : #04-05 10B BUILDING S(049711)
MODEL : 63476100
ENGINE NO : FRLARBZJ11UEA--A--
CHASSIS NO : HRA2301403A
VEHICLE NO : SJNFEAJ11U1775822
SLH2174J

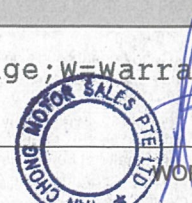
INVOICE NO :
INVOICE DATE : W12143110
TERMS : 28-JAN-2022
DATE REC'D : CREDIT
SA/SE : 09-DEC-2021
JOB NO : ZHR
MILEAGE : BG1111533
YOUR REFERENCE : 118056
INS/IC/ZHR/0350/

ITEMS 3 JOB DESCRIPTION Credit terms 34AMOUNTS

Insurance Co : INDIA INT'L INSURANCE PTE LTD
Policy No....: TP-SLH8715J
Claim Type ...: DIRECT SETTLEMENT / THIRD PARTY CLAIM
DOA.....: 01-DEC-2021
Our Ref.....: INS/IC/ZHR/0350/2021
Surveyor.....: SURVEYOR FROM INSURANCE CO

LABOUR	:	1440.00
PARTS	:	1817.84
SUBTOTAL	:	3257.84
TOTAL	:	3257.84
GST(7%)	:	228.05
AMOUNT DUE	:	3485.89

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)
DOLLARS: THREE THOUSAND FOUR HUNDRED EIGHTY
FIVE AND CENTS EIGHTY NINE 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.



www.tanchong.com

Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622
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913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92
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GST Regn No: 19-9106231-D

Co. Regn No : 199106231D



TAX INVOICE

GST REG: 19-9106231-D

NAME : INDIA INT'L INSURANCE PTE LTD
ADDRESS : 64 CECIL STREET
TELEPHONE : #04-05 10B BUILDING S(049711)
MODEL : 63476100
ENGINE NO : FRLARBZJ11UEA--A--
CHASSIS NO : HRA2301403A
VEHICLE NO : SJNFEAJ11U1775822
SLH2174J

INVOICE NO : W12143110
INVOICE DATE : 28-JAN-2022
TERMS : CREDIT
DATE REC'D : 09-DEC-2021
SA/SE : ZHR
JOB NO : BG1111533
MILEAGE : 118056
YOUR REFERENCE : 1NS/1C/ZHR/0350/

ITEMS	JOB DESCRIPTION	Credit terms	AMOUNTS
1	LABOUR		
1	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL		120.00
2	REPLACE REVERSE SENSOR, NECESSARY ADJUSTMENT & FUNCTION TEST		110.00
3	REPAIR RR END PANEL & RENEW RR BUMPER		585.00
4	S/PAINT RR BUMPER(2 TONE) & RR END PANEL		625.00
	SUBTOTAL	:	1440.00
	PARTS		
1	CLIP(10X1.3)		10.40
	Qty:10 @ \$1.30 each (Disc:20.00% After Disc:\$10.40each)		
2	CANOE(7.1X2)		11.36
	Qty:2 @ \$7.10 each (Disc:20.00% After Disc:\$11.36each)		
3	FASCIA-RR BUMP		701.12
	Qty:1 @ \$876.40 each (Disc:20.00% After Disc:\$701.12each)		
4	FINISHER-REAR B		15.04
	Qty:1 @ \$18.80 each (Disc:20.00% After Disc:\$15.04each)		
5	BRACKET-BUMPER		31.12
	Qty:1 @ \$38.90 each (Disc:20.00% After Disc:\$31.12each)		
6	REINF-BUMPER RR		553.20
	Qty:1 @ \$691.50 each (Disc:20.00% After Disc:\$553.20each)		

DOLLARS:

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SA/SE : 09-DEC-2021
JOB NO : ZHR
MILEAGE : BG1111533
YOUR REFERENCE : 118056
INS/IC/ZHR/0350

ITEMS	JOB DESCRIPTION	Credit terms	AMOUNTS
7	STAY RH,RR Qty:1 @ \$141.00 each (Disc:20.00% After Disc:\$112.80each)		112.80
8	STAY LH,RR Qty:1 @ \$141.00 each (Disc:20.00% After Disc:\$112.80each)		112.80
9	SUNDRIES Qty:1 @ \$20.00 each (Special Nett item)		20.00
10	SENSOR-REVERSE Qty:1 @ \$250.00 each (Special Nett item)		250.00
	SUBTOTAL	:	1817.84
	REMARKS		
1	AVIVA LIMITED CLAIM AGAINST INDIA INT'L INSURANCE DOA:01.12.2021		
2	TOC:DIRECT SETTLEMENT OUR REF:INS/IC/ZHR/0350/2021		
3	T/P VEHICLE NO:SLH8715J SATISFACTION NOTE ATTACHED		
4	SURVEY BY:STEVE(LKK-AUTO) ON 08.12.2021 RECOMMEND REPAIR 4 DAYS		
5	AUTHORISE BY:PRIYA(111) ON 09.12.2021@1550HRS ***OWNER CLAIM LOSS OF USE		

DOLLARS:

WORKSHOP MANAGER

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> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 02 Dec 2021 / 12:32:54

Receipt Date/Time : 02 Dec 2021 / 12:32:54

Tax Invoice/Receipt

Receipt No. : ITNET-00000-211202-001753

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	Result of Insurance Enquiry - SLH8715J As at 01 Dec 2021/09:06:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD			
1	Insurance Enquiry - SLH8715J Enquiry Fee 20211202123116150307	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			
	512972XXXXXX9875	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.

Print Received Message

This mail is associated with :

***SLH2174J (MFL2021D0005299)**
[SLH8715J]

TP

CHUA LYE CHOON

Dec 1 2021 9:00AM

[-]

Tan Chong Motor Sales Pte Ltd

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 11/03/2022 10:22 AM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$3693.34) - SLH2174J - Claim Handler: Priya

Approved:3693.34.