

# AUTO BULLOX PTE LTD

53 Ubi Avenue 1#01-25, Paya Ubi Industrial Park, Singapore 408934  
Tel: 6841 5383 Fax: 6841 6043 Hp:7969 9299 Email: autobullox@gmail.com  
Register No.: 201919765N

## LETTER OF DEMAND

DATE: 10/03/2022

TO:

LONPAC INSURANCE BERHAD  
300 BEACH ROAD, #17-04/07  
THE CONCOURSE  
SINGAPORE 199555

Attention: VERRON (veronchen@lkkauto.com)

Dear Sir,

### ACCIDENT INVOLVING VEHICLES SMC2938L AND SKJ2770P ON 09/01/2022.

We act for owner of motor vehicle no. **SMC2938L** who was involved in the above accident.

Our client has suffered loss and damage as a result of your insured's negligence in the driving of motor vehicle no: **SKJ2770P**.

We quantify our client's claim as follow:-

| S/N                | Description                              | Days | U/Price (SGD) | Amount (SGD)    |
|--------------------|--|------|---------------|-----------------|
| 1                  | Cost of Repair                           |      |               | 2,650.00        |
| 2                  | Loss of Rental (10/01/2022 - 18/01/2022) | 8    | 120.00        | 960.00          |
| 3                  | LTA Search                               |      |               | 7.45            |
| <b>Total (SGD)</b> |  |      |               | <b>3,617.45</b> |

  
  
AUTO BULLOX PTE LTD

**AUTHORIZATION, ASSIGNMENT AND INDEMNITY**

Auto Bullox Pte Ltd, 53 Ubi Avenue 1, #01-25, Paya Ubi Industrial Park, Singapore 408934.

Date: 10/01/2022

Re: Accident on 09/01/2022 involving my vehicle no. SMC 2938L  
along Petir Road Outside Maysprings Condo.

I/We, Por How Sheng Edwin (NRIC/UEEN No. S7120759E)  
of 308B Anchorvale Road #10-76 Singapore 542308.

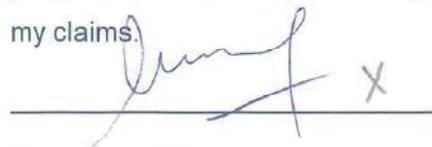
the owner of SMC 2938L refer to the above accident. I/We am/are of the view that I/We am/are not responsible for causing the accident at all. I/We hereby authorized you to appoint an independent surveyor on my/our behalf to inspect my/our vehicle and advise you on its reasonable repair costs. You are hereby authorized to commence to the said vehicle in accordance with the report of the independent surveyor.

In consideration of you agreeing not to collect from me/us the repair costs, rental fees for another vehicle (if applicable) and surveyor's fees now, I/we agree to assign the whole proceeds of my/our irrevocable authority to pay the compensation monies in my/our third party claim directly to you after deducting their costs on a Solicitor and client basis.

I/We undertake to co-operate fully with you and my/our solicitors to see my/our third party claim to a successful conclusion and hereby authorized you to instruct my/our solicitors to commence legal proceedings and take all necessary steps to recover the claim from the negligent party where necessary.

In the event that I/we decide to terminate the authority of Messrs.' " **Auto Bullox Pte Ltd** " appointed by me/us to make my/our above claim(s) or I/we do not co-operate with you or my/our solicitors, I,we shall forthwith be liable to pay to you the costs of repairs, rental fees for another vehicle,(if applicable), surveyor's fee and pay to Messrs.' " **Auto Bullox Pte Ltd** " their fees and disbursements incurred in pursuing my/our claim.

I/We irrevocably authorize you through your appointed representative to sign all necessary documents including discharge voucher (s) in connection with and arising out of my/our third party claim. Your receipt of the agreed settlement sum will constitute a full final discharge of my claims.



Signature of Owner  
(Company stamp if applicable)



Signature of Witness  
Name: Kaman Koh





# LONPAC INSURANCE BHD

CLAIM NO : 21/22/22/VP05/025348  
DATE : 27 MAY 2022

## DISCHARGE VOUCHER

I/We, POR HOW SHENG EDWIN confirmed acceptance from **M/s LONPAC INSURANCE BHD** and/or owner of SKJ 2770P the sum of Singapore Dollar Three Thousand One Hundred Fifty Seven and Cents Forty Five Only (\$3,157.45) in full and final satisfaction, liquidation and discharge of all property losses competent to me/us upon the said **M/s LONPAC INSURANCE BHD** in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving SKJ 2770P and SMC 2938L on 09 January 2022 along Petir Rd.

I /We hereby agree to indemnify and keep indemnify (**LONPAC INSURANCE BHD/ Koh Siam Soon Philip AND/OR Koh Jiajin, Joel**) 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 **AUTO BULLOX PTE 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

(27/05/2022)

.....  
Por How Sheng Edwin / (27/05/2022)

.....  
Name of vehicle owner /Date

## AUTO BULLOX PTE LTD

53 Ubi Avenue 1#01-25, Paya Ubi Industrial Park, Singapore 408934  
Tel: 6841 5383 Hp:9769 9299 Fax: 6841 6043 Email: autobullox@gmail.com  
Register No.: 201919765N

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Date: 10/03/2022

**POR HOW SHENG EDWIN (NRIC: S7120759E)**

C/O: 53 Ubi Avenue 1,  
#01-25, Paya Ubi Industrial Park,  
Singapore 408934.

**ATTN: LONPAC INSURANCE BHD**

**FINAL BILL FOR VEHICLE NO: SMC2938L**  
**MODEL: HONDA VEZEL**

**LUMP SUM REPAIR** **\$ 2,650.00**

INCLUDING SUPPLY OF PARTS & LABOUR,  
PANEL BEATING & SPRAY PAINTING

**TOTAL** **\$2,650.00**

  
  
**AUTO BULLOX PTE LTD**

**Tax Invoice**



**Dream Carz Leasing Pte Ltd**

8 Kaki Bukit Avenue 4, #04-20  
Premier  
Singapore - 415875  
Mobile no: 97103383  
Email: dreamcarzleasing@gmail.com

|                                     |  |
|-------------------------------------|--|
| Tax Invoice No:<br><b>12992</b>     | Dated:<br><b>January 18, 2022</b>            |
| Delivery Note:                      | Terms of Payment:<br><b>Due upon receipt</b> |
| Supplier's Ref:                     | Other Reference:                             |
| Buyer Order (PO) No:<br><b>3509</b> | PO Dated:                                    |

**Customer Details:**

**Por How Sheng Edwin**,  
Singapore -  
Phone no: 88284319

| S.No | Product  | Description                                     | Date Out   | Date In    | Qty | Price(SGD) | Amount (SGD) |
|------|----------|---|------------|------------|-----|------------|--------------|
| 1    | SMS2133H | Hyundai Accent<br>U Label No.: 1129823068 8Days | 10/01/2022 | 18/01/2022 | 1   | 960.00     | 960.00       |

**Sub Total (SGD) 960.00**

**Total (SGD) 960.00**

Amount in words :

Nine Hundred Sixty Singapore Dollar (SGD) Only

**Declaration:**

We declare that this Tax Invoice shows the actual price of the goods described and that all particulars are true and correct.

**For Dream Carz Leasing Pte Ltd**

**Authorized Signatory**  
Billed by: Melvin Cheong  
(dreamcarzleasing@gmail.com)

**Notes :**

OCBC 509787776001 UEN: 201433037R

**Income Terms:**

Terms

# DREAM CARZ LEASING PTE LTD

8 Kaki Bukit Ave 4 #04-20 Premier Singapore 415875

Email: dreamcarzleasing@gmail.com

Tel: +65 6214 0474 Fax: +65 6384 5205



VHA No: 3509

ROC No: 201433037R

## VEHICLE RENTAL AGREEMENT

| <b>HIRER'S PARTICULAR</b><br>Name: (as in I/C) <u>DOR HAN SHENG EDWIN</u><br>NRIC/PASSPORT No: <u>S7120759E</u><br>Address (Res) <u>BLK 30813 ANTHONYVALE ROAD #10-76</u><br><u>S(542308)</u><br>Name & Address of Employer _____<br>Occupation: _____ Driving Exp: <u>30f</u><br>Driving Licence No: <u>S7120759E</u> D/L Type : Local / International<br>Issue Date: <u>19/9/1991</u> Date of Birth: <u>28/6/1921</u><br>Tel: (O) _____ (R) _____ HP / PG <u>88224319</u> |          | Vehicle No: <u>SMS2133H</u> Replace Veh No: _____<br>Mileage Out: _____ Mileage Out: _____<br>Make & Model: <u>Hyundai Accent</u> Auto / Manual Group: _____<br>Out : Date <u>10/01/2022</u> Time: <u>4pm</u><br>HIRE / PERIOD EXPIRY _____ Time: _____<br>NON-WAIVER EXCESS = \$ <u>2000/2000</u>   |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
|---|----------|--|---------------|--------------|-----------|--|--|--|--|-------|----------|-----------------|-----------|------------|-----------|--------|---|-------------|----------|--|--|-----------|--|------------|-----------|--|--|-------|--|------------|----------|--|--|-------------------------|--|------------|--|------------|-----------|-----|--|------------|---------------|--|--|-----|--|------------|---------------|--|--|------------------------------|--|--|--|--|--|---------------------|--|--|--|------------|-----------|
| <b>ADDITIONAL DRIVER'S PARTICULARS</b><br>Name: (as in I/C) _____<br>NRIC/PASSPORT No: _____<br>Address (Res) _____<br>Driving Licence No: _____ D/L Type : Local / International<br>Issue Date: _____ Date of Birth: _____<br>Occupation: _____ Driving Exp: _____   |          | <table border="1"> <thead> <tr> <th colspan="4">CHARGES</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Daily</td> <td><u>8</u></td> <td>@ \$ <u>120</u></td> <td>per day</td> <td><u>960</u></td> <td><u>00</u></td> </tr> <tr> <td>Weekly</td> <td></td> <td>@ \$ _____</td> <td>per week</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td></td> <td>@ \$ _____</td> <td>per month</td> <td></td> <td></td> </tr> <tr> <td>Hours</td> <td></td> <td>@ \$ _____</td> <td>per hour</td> <td></td> <td></td> </tr> <tr> <td>Others</td> <td></td> <td>@ \$ _____</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CDW</td> <td></td> <td>@ \$ _____</td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td>PAI</td> <td></td> <td>@ \$ _____</td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td colspan="4">Delivery/ Collection Service</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUB-TOTAL \$</b></td> <td><u>960</u></td> <td><u>00</u></td> </tr> </tbody> </table> |               | CHARGES      |           |  |  |  |  | Daily | <u>8</u> | @ \$ <u>120</u> | per day   | <u>960</u> | <u>00</u> | Weekly |   | @ \$ _____  | per week |  |  | Monthly   |  | @ \$ _____ | per month |  |  | Hours |  | @ \$ _____ | per hour |  |  | Others                  |  | @ \$ _____ |  |            |           | CDW |  | @ \$ _____ | per day/month |  |  | PAI |  | @ \$ _____ | per day/month |  |  | Delivery/ Collection Service |  |  |  |  |  | <b>SUB-TOTAL \$</b> |  |  |  | <u>960</u> | <u>00</u> |
| CHARGES   |          |  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Daily   | <u>8</u> | @ \$ <u>120</u>  | per day       | <u>960</u>   | <u>00</u> |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Weekly  |          | @ \$ _____   | per week      |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Monthly   |          | @ \$ _____   | per month     |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Hours   |          | @ \$ _____   | per hour      |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Others  |          | @ \$ _____   |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| CDW   |          | @ \$ _____   | per day/month |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| PAI   |          | @ \$ _____   | per day/month |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Delivery/ Collection Service  |          |  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| <b>SUB-TOTAL \$</b>   |          |  |               | <u>960</u>   | <u>00</u> |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| <b>VEHICLE CHECK LIST</b><br>INDICATE:<br>D - DENTS<br>A - ACCIDENTS<br>S - SCRATCHES<br><br>RIGHT FRONT TOP LEFT<br><b>ACCESSORIES CHECK</b><br><input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S/Tyre<br><input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps<br><input type="checkbox"/> Radio / Class <input type="checkbox"/> CD <input type="checkbox"/> Cartridges      |          | <table border="1"> <thead> <tr> <th colspan="4">PETROL LEVEL</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Out</td> <td>E</td> <td><u>1/4</u></td> <td>1/2 3/4 F</td> <td></td> <td></td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4 1/2 3/4</td> <td>F</td> <td></td> <td></td> </tr> <tr> <td colspan="4">EXTENSION</td> <td></td> <td></td> </tr> <tr> <td colspan="4">Misc.</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>TOTAL CHARGES \$</b></td> <td><u>960</u></td> <td><u>00</u></td> </tr> </tbody> </table>   |               | PETROL LEVEL |           |  |  |  |  | Out   | E        | <u>1/4</u>      | 1/2 3/4 F |            |           | In     | E | 1/4 1/2 3/4 | F        |  |  | EXTENSION |  |            |           |  |  | Misc. |  |            |          |  |  | <b>TOTAL CHARGES \$</b> |  |            |  | <u>960</u> | <u>00</u> |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| PETROL LEVEL  |          |  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Out   | E        | <u>1/4</u>   | 1/2 3/4 F     |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| In  | E        | 1/4 1/2 3/4  | F             |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| EXTENSION   |          |  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| Misc.   |          |  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
| <b>TOTAL CHARGES \$</b>   |          |  |               | <u>960</u>   | <u>00</u> |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |
|   |          | Hirer's Signature _____<br>Additional Driver's Signature _____<br>Authorised Person Signature _____  |               |              |           |  |  |  |  |       |          |                 |           |            |           |        |   |             |          |  |  |           |  |            |           |  |  |       |  |            |          |  |  |                         |  |            |  |            |           |     |  |            |               |  |  |     |  |            |               |  |  |                              |  |  |  |  |  |                     |  |  |  |            |           |



I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/ credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have made on the charge/ credit card voucher. All information I have given Dream Carz Leasing Pte Ltd in connection with this agreement is true.

- \* IMPORTANT**
- ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
  - ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER, AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
  - THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
  - IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY DREAM CARZ LEASING PTE LTD.

RETURN OF VEHICLE, THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN SINGAPORE OF HIRER / DRIVER FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO Dream Carz Leasing Pte Ltd AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

| DATE IN        | TIME IN      | MILEAGE | CHECKED BY | REMARKS |                               |
|----------------|--------------|---------|------------|---------|-------------------------------|
| <u>18/1/22</u> | <u>12pm.</u> |         |            |         | <br>SIGNATURE OF HIRER/DRIVER |

Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time : 10 Jan 2022 / 13:29:57

Receipt Date/Time : 10 Jan 2022 / 13:29:53

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-220110-002064

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 - SKJ2770P<br>As at 09 Jan 2022/14:50:00<br>Insurance Co: LONPAC INSURANCE BHD |   |                               |                        |                              |
| 1  | Insurance Enquiry - SKJ2770P<br>Enquiry Fee<br>20220110132822705689 | 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  |   |                               |                        |                              |
|  | 552038XXXXXX7566  |                               | 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.

## Cecilia Chong (LKK Auto)

---

**From:** ONG LI LI <llong@lonpac.com>  
**Sent:** Thursday, 26 May 2022 3:04 pm  
**To:** Cecilia Chong (LKK Auto)  
**Cc:** MT\_Claim\_SG  
**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

## Lonpac External - General

Dear Cecilia

Please proceed.

Regards,  
Ong Li Li  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road #17-04/06 The Concourse  
Singapore 199555  
Tel : (65) 6250 7388 Fax: (65) 6296 2706

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

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**From:** Cecilia Chong (LKK Auto) <CeciliaChong@lkkauto.com>  
**Sent:** Thursday, 26 May 2022 12:06 pm  
**To:** ONG LI LI <llong@lonpac.com>  
**Cc:** MT\_Claim\_SG <mt\_claim@lonpac.com>  
**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

Hi Lili,

We did request from TP previously and they mention there is no video recorded due to dash cam faulty.

Thanks

**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**

DID: 6749-4274 | MAIN: 6256 3561 | EMAIL: [CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com) | FAX: 6741-4108



*Save the Earth. Print only when necessary.*

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**From:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>

**Sent:** Thursday, 26 May 2022 11:42 am

**To:** Cecilia Chong (LKK Auto) <[CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

## Lonpac External - General

Dear Cecilia

Understand that TP has video footage, please request for it.

Thanks,

Regards,

Ong Li Li

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road #17-04/06 The Concourse

Singapore 199555

Tel : (65) 6250 7388 Fax: (65) 6296 2706

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

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**From:** Cecilia Chong (LKK Auto) <[CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com)>

**Sent:** Thursday, 26 May 2022 11:17 am

**To:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

Hi Lili,

As per your request.

Thanks

**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**

DID: 6749-4274 | MAIN: 6256 3561 | EMAIL: [CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com) | FAX: 6741-4108

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



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**From:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>

**Sent:** Wednesday, 25 May 2022 12:22 pm

**To:** Cecilia Chong (LKK Auto) <[CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

## Lonpac External - General

Hi Cecilia

Can you attach the TP GIA report?

Regards,

Ong Li Li

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road #17-04/06 The Concourse

Singapore 199555

Tel : (65) 6250 7388 Fax: (65) 6296 2706

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

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**From:** Cecilia Chong (LKK Auto) <[CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com)>

**Sent:** Wednesday, 25 May 2022 12:15 pm

**To:** ONG LI LI <[llong@lonpac.com](mailto:llong@lonpac.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: Notice to conduct PRS - Accident Involving Vehicles SMC2938L AND SKJ2770P on 09/01/2022. Our Ref: 21/22/22/VP05/025348

Lonpac Ref: **21/22/22/VP05/025348**

LKK Ref: CC4/LPC22000304/Gga3

Dear Sirs/Madam,

We refer to the above matter.

We have highlighted to your good office on 14/01/2022 of Third-Party's request to do Direct Settlement with our Principal, Lonpac Insurance Bhd.

This is a BOLA S31 collision. Liability is not in our driver's favour.

Summary to offer to third party repairer, "AUTO BULLOX PTE LTD" is as follows: -

|                                      | Claimed Amount     | Revised Amount               |
|--------------------------------------|--------------------|------------------------------|
| 1. Cost of Repair (w/GST)            | \$ 7,409.60        | \$ 2,650.00                  |
| 2. Loss of Rental (8days x \$120.00) | \$ 960.00          | \$ 500.00 (5days x \$100.00) |
| 3. LTA/ GIA Search Fee               | \$ 7.45            | \$ 7.45                      |
| <b>Total</b>                         | <b>\$ 8,377.05</b> | <b>\$ 3,157.45</b>           |

\*\*03days recommendation for repair + 2PRS = 5days.

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

**The above is for your approval.**

**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**

DID: 6749-4274 | MAIN: 6256 3561 | 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

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**From:** Veron Chen (LKKAuto) <[veronchen@lkkauto.com](mailto:veronchen@lkkauto.com)>

**Sent:** Tuesday, 18 January 2022 4:29 PM

**To:** ONG LI LI <[long@lonpac.com](mailto:long@lonpac.com)>; MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>; Jaslin Kok (LKK Auto) <[jaslinkok@lkkauto.com](mailto:jaslinkok@lkkauto.com)>