

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

Attn: **Motor Claims Department**

Date: 24th February 2022

Dear Sir/Madam,

Claimant: **Wong Yan Yi, Alison**

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 18/01/2022 at along Tanjong Katong Road towards Sims Avenue involving our client's vehicle registration number SLU 983 K and vehicle registration number SML 1587 A driven by your insured at the material time.

We are instructed that the accident was caused by your insured's negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

1) Vehicle Repair Costs	\$4,200.00
2) Loss of Rental (SGD\$120.00 x 6Days)	\$720.00
3) Insurance Search	\$2.00
4) Purchase of GIA Report	\$29.00

Total : **\$4,951.00**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- Insurance Search Receipt
- Purchase of GIA Report Receipt

Please send us an acknowledgement of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice.

Yours faithfully,

Elin Cai

Zoom Autowerks Pte Ltd

130 Bedok Reservoir Road
#08-1339 Singapore 470130

Mobile: 9450 7920 | E-mail: zoomautowerks@gmail.com

**LETTER OF AUTHORIZATION**

Accident on 18/01/2022 @ 17:45 along Tanjong Katong Rd towards Sims. Ave1
Involving vehicles SLM983K and SML1587A

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SLM983K at my request, I/We, Wong Yan Yi, Alison ("the claimant") of _____ (address) bearing NRIC No _____ the owner of motor vehicle no SLM983K, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by **Zoom Autowerks Pte Ltd**.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to **Zoom Autowerks Pte Ltd** the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Zoom Autowerks Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Zoom Autowerks Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Zoom Autowerks Pte Ltd** shall amount to a good discharge of **Zoom Autowerks Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 18 day of 01 (month) 20 21 (year)

aw
Signed by "the claimant"

Name: Wong Yan Yi, Alison

NRIC No: _____



Signed by Zoom Autowerks Pte Ltd

Name: Elin Cai

**ZOOM AUTOWERKS PTE LTD**

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

email: zoomautowerks@gmail.com | Contact: 9450 7920

Co. Reg No.: 201725603G

PROFORMA INVOICE

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

PF No. : ZP0000636
Date : 24/2/2022
VRN : SLU 983 K
Make & Model : VW. Golf
DOA : 18/1/2022
Terms : COD

	Description	Qty	U/P	Amt
1	Repair & Respray Accident Affected Portions			4,200.00
2	Loss of Rental (SGD\$120.00 x 6Days)			720.00
3	LTA Search			2.00
4	Purchase of GIA Report			29.00

TOTAL :	\$4,951.00
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All crossed cheques must be made to "**ZOOM AUTOWERKS PTE LTD** "

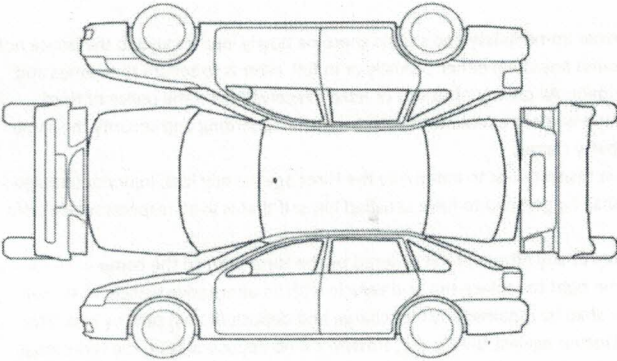
Bank Name: Oversea-Chinese Banking Corporation Ltd

Account Number: 623326998001

Paynow UEN: 201725603G

(by Zoom Autowerks Pte Ltd)

RENTAL AGREEMENT

HIRER'S PARTICULAR		VEHICLE DETAIL																					
Name:	Wong Yan Yi, Alison	Vehicle No.:	SKB9839Y																				
NRIC/Passport No.:	S9028418E	Vehicle Make/Model:	Hyundai Elantra																				
Address:	10 Sims Avenue # 03-02 S(416558).	Date/Time Out:	19/01/2022.																				
		Date/Time In:	25/01/2022.																				
Tel:	9025 0678	<table border="1"> <tr> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> </tr> <tr> <td colspan="5">OUT</td> <td colspan="5">IN</td> </tr> </table>		E	¼	½	¾	F	E	¼	½	¾	F	OUT					IN				
E	¼	½	¾	F	E	¼	½	¾	F														
OUT					IN																		
Driving License No./Exp.:		Mileage:	Mileage:																				
ADDITIONAL DRIVER'S PARTICULAR		RENTAL CHARGES																					
Name:		Hours @	per hour																				
NRIC/Passport No.:		6 Days @ \$120	per day \$720																				
Address:		Weeks @	per week																				
		Months @	per month																				
Tel:		Other Charges																					
Driving License No./Exp.:		Petrol Top-Up																					
(A) - Accident (D) - Dent (S) - Scratch		Sub-total																					
		TOTAL CHARGES	\$720																				
PHYSICAL DAMAGE EXCESS		ACKNOWLEDGEMENT																					
Singapore - Own Damage	S\$2,000.00																						
Singapore - 3rd Party	S\$2,000.00																						
Malaysia*	S\$8,000.00																						
For Drivers aged < 27 or > 65 and/or less than 2 years driving experience regardless of age	S\$3,000.00 (Additional)																						
IMPORT NOTE:		<p>I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.</p>																					
<p>1. ONLY PERSONS ABOVE 22 YEARS OF AGE, HOLDING A VALID SINGAPORE LICENCE FOR MORE THAN 2 YEARS, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE</p> <p>2. Vehicle is strictly for use in Singapore only and may not be driven out of Singapore without the prior written consent of Zoom Car Leasing</p> <p>3. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.</p> <p>4. In case of accident, the hirer shall report to Zoom Car Leasing immediately.</p>		<p><i>a, u</i></p> <p>Hirer's Signature / Date</p>																					
		<p><i>Zoom Car Leasing</i></p> <p>Owner's Signature / Date</p>																					

ZOOM CAR LEASING

Zoom Car Leasing

Registration No.: 5339410M

e-mail : zoomcarleasing@gmail.com

Zoom Autowerks Pte Ltd

Tel: 9450 7920

RENTAL INVOICE

Invoice No. : **INV0000667**

Date : 30/1/2022

Ref : SKB 9839 Y

Your Ref. : SLU 983 K

Terms : COD

#	Rental Period	Rate	Quantity	Amount
1	Rental Charges for SKB 9839 Y (19/01/2022 to 25/01/2022)	\$120.00	6 Days	\$720.00

C/O Wong Yan Yi, Alison

10 Sims Avenue

#03-02 Singapore 416558

Contact: 9025 0678

Total : \$720.00

**ZOOM CAR
LEASING**


(Customer's Signature/Stamp)

(For Zoom Car Leasing)

INSURER ENQUIRY

**Find
insurer****Vehicle reg. no.**

SML1587A

Date of Accident18/01/2022 **Reset**% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**Period of Insurance **08/05/2021 - 07/05/2022**Requested By **Elin Cai (Zoom Autowerks Pte ...**Requested Date **19/01/2022 14:31****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: 24/01/2022

Your Ref No: SLU983K

Dear Sir/Madam,

Date of Accident: 18/01/2022 00:00 (SGT)

Vehicle No: SLU983K

Place of Accident: Tanjong Katong Rd, Singapore

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (\$)	QTY	AMOUNT (\$)
SML1587A	Tanjong Katong Rd, 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.