



ADVANCE AUTO GARAGE

23 Kaki Bukit Avenue 4, #04-01 Vicom Kaki Bukit Inspection Center,
Singapore 415933

Tel: 9007 9247

Email: advanceag@hotmail.com

UEN: 53395571L

Date : 24 March 2023
Your Ref : SKM1219G
To : **China Taiping Insurance (Singapore) Pte. Ltd**
Attn : Motor Claims Department

Dear Sir/Mdm,

**RE: Accident on 01/04/2022 between SMQ799K & SKM1219G at/along KPE (TPE) Exit from ECP
(Changi)**

We refer to the above matter and would like to settle it directly in an amicable manner.

Please find attached copies of the below mentioned for your kind perusal:

- 1) Invoice No. AAGCL-292 @ **S\$8,200.00**
- 2) Loss of Use @ S\$1,980.00 (9 Days x S\$220)
- 3) Authorization to Act
- 4) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issued upon amount finalization.

Thank you.

Yours faithfully,



Xavier Lim

Advance Auto Garage

Sales Invoice

Advance Auto Garage

23 Kaki Bukit Avenue 4
#04-01 Vicom Kaki Bukit Inspection Center
Singapore 415933
Reg No: 53395571L
(+65) 9007 9247

DATE: 24/3/2023
INVOICE NO.: AAGCL-292
VRN: SMQ799K

Bill To:
China Taiping Insurance (Singapore) Pte. Ltd
3 Anson Road, #16-00 Springleaf Tower
Singapore 079909

ATTN: MOTOR CLAIMS DEPARTMENT

Description	AMOUNT
ACCIDENT REPAIRS CARRIED OUT AS PER YOUR SURVEYOR RECOMMENDATION	\$8,200.00
LUMP SUM	
LOSS OF USE 9 DAYS @\$220/DAY	\$1,980.00
Total:	\$10,180.00

- * All prices stated are in SGD
* Please make all cheques payable to Advance Auto Garage
* Car handed over in satisfactory post repair condition



THANK YOU FOR YOUR BUSINESS

LETTER OF AUTHORITY

Name : Peh Chye Hoon
Address : 9 Sengkang East Avenue #03-25
: Singapore 544742
Contact No : _____

To (Insurance): China Taiping Insurance (Singapore) Pte Ltd

Dear Sirs,


ACCIDENT INVOLVING SMQ799K AND SKM1219G ON 01/04/2022
AT/ALONG KPE (TPE) Exit from ECP (Changi)

I/We, Peh Chye Hoon, am/are the registered owner of
motor car no. SMQ799K

Please note that I have assigned all compensation monies due to me/us in the above stated accident to **ADVANCE AUTO GARAGE**.

I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned accident to **ADVANCE AUTO GARAGE** and forward your settlement cheque to **ADVANCE AUTO GARAGE** whom I had authorized to collect the said compensation monies.

Thank You



Signature of Claimant



Witness By

ADVANCE AUTO GARAGE

23 Kaki Bukit Avenue 4, #04-01

Vicom Kaki Bukit Inspection Center, Singapore 415933

Tel: 9007 9247

Reg. No.: 53395571L

MOTOR CLAIM DISCHARGE

INSURED: Peh Chye Hoon

VEHICLE REGISTRATION NO.: SMQ799K POLICY NO.: DMPCSNW00193672100

ACCIDENT CLAIM NO.: AAG. 20220401

I/We confirm that I/We have taken delivery of Vehicle Registration No. SMQ799K

from the repairers, Messrs Advance Auto Garage

and that all necessary repairs as a result of an accident in which the said vehicle was in on or about the 01/04/2022 have been completed to my / our satisfaction, and that

I / We have no further claim on the above company in Respect thereof.

Date: 09/04/2022 Signature: 

Co's Stamp: _____ NRIC No/Co. Reg. No: 87236883E

01/04/2022 - Accident
02/04/2022 - Reporting & PRI
03/04/2022 - Sunday
04/04/2022 - Survey & Repair
05/04/2022 - Repair
06/04/2022 - Repair
07/04/2022 - Repair
08/04/2022 - Repair
09/04/2022 - Repair & Handover