

Our Ref : GBF6284C / T270722
Your Ref : 33769MID
Date : 10 January 2023

MINDEF
MINDEF BUILDING
303 GOMBAK DRIVE
Singapore 669645
Attn: Motor Claims Department

BY EMAIL
WITHOUT PREJUDICE

Main Office:
Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel : **(65) 6476 3333**
Fax : (65) 6271 5891
www.mova.com.sg

Workshop Dept:
Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722
Tel : **(65) 6272 3892**
Fax : (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088864-2

Dear Sir/Mdm

ACCIDENT INVOLVING: **GBF6284C & 33769MID**
DATE OF ACCIDENT: **16 April 2022**
ALONG: **TUAS VIADUCT**

We refer to the above mentioned accident. We are claiming as per below:

Cost of Repairs	\$	4,333.50
#Loss of Use (\$_ x _ days)	\$	-
Loss of Rental (\$ <u>150</u> x <u>16</u> days) + 7% GST	\$	2,568.00
Loss of Income (\$_ x _ days)	\$	-
LTA Fees		
Police Report / GIA	\$	-
Medical Fee	\$	-
Excess	\$	-
Grand Total	\$	6,901.50

Car date in: 27/6/2022
Car date out: 12/7/2022

Authorized Repair Days: 5 (~~TP/OD/WS/Recovery of Incidental Costs~~)

Please pay the amount of **\$ 6,901.50** in favour of **MOVA AUTOMOTIVE PTE LTD.**
If you have any enquiries, please call Ms Suann @ 6272 3892 or email suann@moval.com.sg

Yours faithfully,
MOVA AUTOMOTIVE PTE LTD
For Claims Manager

Note: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: **(65) 6476 3333**
Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:

Block 1008,
Bukit Merah Lane 3,
#01-04/06/08/94
Singapore 159722
Tel: **(65) 6272 3892**
Fax: (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088864-2

PERFORMA INVOICE

21/12/2022

MINDEF

MINDEF BUILDING
303 GOMBAK DRIVE
SINGAPORE 669645

Page: 1
Vehicle No: GBF6284C
Vehicle Model: NISSAN NV350
Tax Invoice: CD0845
Claims ref: T270722
Accident Date: 16/04/22
Terms: C.O.D Days
Remarks:

No	Description	Qty	U. Price	Amounts S\$
1	LUMP SUM AMOUNT			\$ 4,050.00

AMOUNT S\$ \$ 4,050.00
GST @ 7% \$ 283.50
AMOUNT DUE S\$ \$ 4,333.50



Customer's Signature

MOVA AUTOMOTIVE PTE LTD

RENTAL DETAILS				INSURANCE EXCESS AMOUNT			
Vehicle Make/Model:	NV 3500	Vehicle No:	NV 49205	Singapore	Malaysia	Signature	
Date/Time Out:	27-6-22		11.00	S\$ 2000	S\$		
Petrol Level Out:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Per Accident	Per Accident		
Date/ Time In:	12/7/22		1625	Charges			
Petrol Level In:	E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			Months @\$	Per Month		
Change Over 1:	Date:	Initial:		Weeks @\$	Per Week		
Change Over 2:	Date:	Initial:		16 Days @\$ 150	Per Day	2400	
KM Out: 87540	KM In:			Hours @\$	Per Hour		
HIRER DETAILS				Sub-Total			
Named Hirer				Less Discount	%		
Name:	ARUNASALAM PARANTHAMAN			Rental Charges			
Address:	BLK 290G Bukit Birtok St 24 #02-95 S(656290)			CDW @\$	per day / week / month		
				PAI @\$	per day / week / month		
				Petrol Top-Up			
				Misc Charges			
Identity Card No:	S00979599			GST 7%		168.00	
Date of Birth:	06/10/1954			Total			
Driving License:	S00979599			2568.00			
Country of Issue:	SG			VISA / MASTER CARD / AMEX	CASH / COMPANY BILLING / OTHERS		
Tel:	(HP) 82112400	(O)		Pre-Payment			
Nationality:	SG			Downpayment and Deposit			
Effective Date:	03 Sep 1979			Amount Refunded/ Due			
Additional Hirer				Signature of Refund			
Name:				Remarks:			
Address:				GBFG284C			
				Aurel			
				Invoice No:	Ref. No:		
Identity Card No:				Checked Out By:	Checked In By:	Checked By:	
Date of Birth:							
Driving License:				Sales-In Charge:			
Country of Issue:				Past 3 years accidents YES ☐ NO ☐			
Tel:	(HP)	(O)					
Nationality:							
Effective Date:							

I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/ credit card voucher given above. All above information given by me are true in connection to this agreement.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAI. Late return of more than 4 hours will be considered as a day rental.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.



Automotive Pte Ltd



Main Office: Mova Building, No. 22 Jalan Kilang, Singapore 159419. Tel : (65) 6476 3333 Fax : (65) 6271 5891 Website: www.mova.com.sg

Workshop: Block 1008, Bukit Merah Lane 3, #01-04/06/08/94, Singapore 159722 Tel : (65) 6272 3892 Fax : (65) 6270 8314

POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) GBF6284L and (Third
Party's Vehicle No.) 33769MID on 16/4/22 along
Tuas Viaduct

BY THIS POWER OF ATTORNEY, *I/We, VLF PTE LTD
NRIC/Passport No. 200516094K (Address)
/
a company incorporate in Singapore and having its registered office at
(Address)* owner of Vehicle Registered No.

hereby irrevocably appoint MOVA AUTOMOTIVE PTE LTD,
(MOVA) a company incorporated in Singapore and having its registered office at Block 1008 Bukit Merah
Lane 3 #01-04/06/08 its agents or any person authorized by MOVA to be *my/our Attorney and in *my/our
name(s) and on *my/our behalf to do all or any of the following :

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. taken up by *me/us (subject to approval by my Insurance Company) in respect of the cost of repairs, loss of use/rental and all other costs and expenses, etc suffered by *me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as *my/our Attorney shall in MOVA absolute **discretion, deem fit.**
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of **MOVA AUTOMOTIVE PTE LTD** and to give a valid receipt and discharge thereof.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of MOVA.**

*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/our behalf by the Attorney, its agents or any person authorized by MOVA in its behalf shall be as good valid and effectual to all intents and purposes whatsoever as it is the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

*I/We further confirm that the acceptance by MOVA of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

***IN WITNESS WHEREOF.** *I/We have hereunto to set *my/our hand and seal this day 27 of the month of 6, Year Two Thousand - 20 (22).

Signed, Sealed & Delivered By

VLF PTE LTD
304 ORCHARD ROAD #03-20
LUCKY PLAZA
SINGAPORE 238863
TEL: 67333277 FAX: 67333272

Customer's Name:

NRIC No:

Co's Rubber Stamp, where applicable.

MOVA's copy

***delete as appropriate.**