



THINK ONE AUTOCARE PTE LTD
RCB:201322501G GST:201322501G
No.60 Jalan lam Huat #02-32 Carros Centre
Singapore 737869
Tel:(65)6454 3300 Fax:(65)6256 4988
Email:enquiry_autocare@thinkone.com.sg

Our Ref :CB6636E
Your Ref :SMG6089P
Date :31.05.2022

AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY #09-16 AIG BUILDING
SINGAPORE 079120

Dear Sirs,

Accident involving **CB6636E** along **SIMEI AVENUE TOWARDS TAMPINES AVENUE 5**
on **19.05.2022** at **14:20** hrs

We are authorized by the owner **LIM TOR ENG** of vehicle **CB6636E**

to claim damages and loses against your insured in connection with the above road
accident. Our client's vehicle was damaged and our client has been put to loss and
expenses, particular of which are as follows:

a) Cost of repair (inc 7%gst) JO202205-0185	\$ 6,848.00
b) Loss of rental 7days incl 1sunday@\$200.00 toyota hiace hi-roof PC4738Z 23.05.2022 to 30.05.2022	\$ 1,400.00
c) Lta search fee	\$ 2.00
	<hr/>
	\$ 8,250.00

We enclose herewith the supporting documents for your perusal.

Please let us have your cheque payment made in favour of Think One Autocare Pte Ltd.

Your Faithfully



Michael Ng
HP:91288488
DID:65453300
michaelng@thinkone.com.sg



THINK ONE AUTOCARE PTE LTD

RCB : 201322501G GST : 201322501G
60 JALAN LAM HUAT, #02-32 CARROS CENTRE, SINGAPORE 737869
Tel: (65)6844 3300/ (65)6545 3300 Fax: (65)6842 4988/ (65)6256 1284
Email: enquiry_autocare@thinkone.com.sg

Bill To : AIG ASIA PACIFIC INSURANCE PTE LTD

Address : 78 SHENTON WAY #07-16
SINGAPORE 079120

Attn :

Tel : 6419 - 3000

HP : 6419 - 3000

Fax : 64153723

Invoice Ref : JO202205-0185

Date : 25/05/2022

Vehicle Num : CB6636E

Make/Model : TOYOTA TOYOTA HIACE HI-R

Mileage(km) : 0.00

Staff ID : NSP

Remarks/Ref :

S/N	Description	Qty	Unit Price	Disc %	Amount S\$
1	COST OF REPAIR CB6636E DOA.19.05.2022	1	6,400.00	0.00	6,400.00

E & O.E.

	SUB TOTAL	:	6,400.00
	GST 7%	:	448.00
448.00	TOTAL SGD	:	6,848.00



Customer's Signature / Co.Stamp

for Think One Autocare Pte Ltd.



THINK ONE LEASING PTE LTD

(of Think One Group of Companies)
20 Ubi Road 4 #02-06 Think One Building Singapore 408622
Tel: (65) 6844 3300 24/7 roadside asst: 9678 8488 Fax: +65 6844 4164 Email: info@tol.com.sg Website: www.tol.com.sg
ROC No.: 201115609M GST Reg No.: 20-1115609M

Bill To : AIG ASIA PACIFIC INSURANCE PTE LTD

Address : 78 SHENTON WAY #09-16
AIG BUILDING
SINGAPORE 079120

: MOTOR CLAIMS DEPT

Tel :

Fax :

HP :

Invoice Ref : JO202205-0189

Date : 31.05.2022

Vehicle Num : CB6636E

Make/Model : TOYOTA HIACE HI-ROOF

Mileage(km) : 0.00

Staff ID : MICHAEL

Remarks/Ref :

S/N	Description	Qty	Unit Price	Disc %	Amount S\$
1	Being rental of Toyota Hiace Hi-Roof PC4738Z for 7 days from 23.05.2022 to 30.05.2022	7day	200		1400.00

E & O.E.

SUB TOTAL : 1400.00
GST 7% : 98.00
TOTAL SGD : 1498.00



Customer's Signature / Co. Stamp

for Think One Leasing Pte Ltd.


INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SMG6089P

Date of Accident

19/05/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**

Period of Insurance **27/12/2021 - 26/12/2022**

Requested By **Ng Shee Pan (THINK ONE AUT...**

Requested Date **20/05/2022 10:06**

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**

AUTHORISATION TO ACT

I / We, **LIM TOR ENG** of **BLK 507 BEDOK NORTH**
("the third party claimant") (address)

AVENUE 3 #07-460507 SINGAPORE 460507 owner of **CB6636E**
(vehicle number)

hereby authorised **THINK ONE AUTOCARE PTE LTD** ("the workshop) to act for me
with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. **CB6636E** that was damaged pursuant to the accident which
occurred on **19.05.2022** along **SIMEI AVENUE TOWARDS TAMPINES AVE 5**
(date)
involving vehicle number(s) **SMG6089P** ("the other party").

I/We further authorised the workshop to settle my above mentioned claim in a manner that
they deem fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque(s) being made in favour of the workshop.

I/We further acknowledge that any settlement the workshop may reach on my behalf is on
a without prejudice and without admission of liability basis insofar as the driver / owner /
insurers of the other vehicle(s) is concerned.

*Should the case could not reach to a settlement, I / We authorised Think One Autocare to
proceed with all the necessary legal means and should this case failed,

I/We **LIM TOR ENG** agreed and will bear / pay
all the repair costs and legal fees costs due incurred by Think One Autocare Pte Ltd

Dated this **20TH** (day) of **MAY** (month) **20 22** (year)



Signed by "the third party claimant"
(with company's stamp if applicable)



Signed by "the workshop"
(with company stamp)

DISCHARGE \ SATISFACTION VOUCHER

Claim no: _____

I / We **LIM TOR ENG** NRIC/ROC **S1384801G**

hereby state that the repairs to vehicle no **CB6636E** have been carried out to my/our entire satisfaction and I/We agree that the discharge to the account of **THINK ONE AUTOCARE PTE LTD**

shall be in full discharge of all claims under policy no **5114306138-02**

with regards to the damage to my/our vehicle as a result of accident which occurred on
SIMEI AVENUE TOWARDS TAMPINES AVE

19.05.2022 along / at **5** at around **14:20 hrs**
(date) (time)

Vehicle Owner

Name **LIM TOR ENG**

NRIC **S1384801G**

Address **BLK 507 BEDOK NORTH AVE 3 #07-347**

SINGAPORE 460507

Signature : 
(with company stamp if applicable)