

AHM Performance

NO 1 KAKI BUKIT AVE 6 #02-46 AUTOBAY
SINGAPORE 417883
TEL : 6846 1884 Fax : 6846 1841

Date : 15-08-2022

Attn: Motor Claims Dept.

Dear Sir/Mdm,

ACCIDENT INVOLVING VEHICLE NO. _____ AND _____
ALONG _____ ON _____

We understand that you are the insurer of _____ vehicle.

We wish to inform you that vehicle no. F27423J have been completed repairs
to the owner of car no. F27423J satisfaction by M/s **AHM Performance**.

We therefore propose to claim from you as follows :-

1. Cost of Repair	: S\$ <u>1050</u>
2. Loss of Use/Rental(S\$ <u>30</u> X <u>3</u> days)	: S\$ <u>90</u>
3. LTA Search Fee/GIA Reports	: S\$ _____
4. Others	: S\$ _____
TOTAL AMOUNT	: S\$ <u>1140</u>

Please let us have your reply soonest possible.

Thank you.

Yours faithfully,

AHM Performance

