SM AUTOMOTIVE

Our Ref : GBH9782B

Your Ref : SLD6007D

Date

: 08th Nov 2022

1 Kaki Bukit Avenue 6 Blk C #01-43 Autobay@KB

Singapore 417883

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Dear Sirs,

WITHOUT PREJUDICE

RE: ACCIDENT INVOLVING GBH9782B & SLD6007D AT CHOA CHU KANG AVE 6 SLIP ROAD BRICKLAND ROAD ON 15.09.2022 @ 17:30HRS

We are instructed by **MUM'S KITCHEN CATERING PTE LTD** to claim damages and losses against you in connection with the above captioned road traffic accident which our client's vehicle **GBH9782B** was damaged by vehicle **SLD6007D** driven by your insured at the material time.

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

| 1) Repair Costs (Inc 7% gst) | \$ 3,852.00 |
|--|----------------|
| 2) Loss of Use for 04 days [10 feet box lorry] | \$ 720.00 |
| 3) LTA Search Fees | \$ 2.00 |
| | \$ 4,574.00 |

A copy each of the following supporting document is enclosed:

- 1) Final Repair Bill
- 2) LTA Receipt
- 3) Warrant to Act

Please let us have your cheque for the sum $\frac{$4,574.00}{}$ made payable to us, $\underline{$SM$ AUTOMOTIVE}$ in the next 14 days.

Yours faithfully,

SM AUTOMOTIVE

SM &UTOMOTIVE

Block C, 1 Kaki Bukit Avenue 6 #01-43 Singapore 417883 Email: SM_AUTOMOTIVE@HOTMAIL.COM Tel: (65) 6747 9241 Fax: (65) 6741 7276

RCB No: 53231488C GST Reg No: 53231488C

TAX INVOICE

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Invoice No : SMPL2211-0202

3 Anson Road #16-00

Date: 8-Nov-22

Springleaf Tower Singapore 079909

Date of Accident : 15-Sep-22

Client:

MUM'S KITCHEN CATERING PTE LTD

Vehicle No. : GBH9782B

Model Type : TOYOTA DYNA

| Descriptions | | | Amount | |
|----------------------|--|--------|--------|----------|
| Lump Sum Repair Cost | | | | 3,600.00 |
| | | GST 7% | : | 252.00 |
| | | Total | : | 3,852.00 |

SIN DOLLARS: THREE THOUSAND EIGHT HUNDRED AND FIFTY TWO ONLY



INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLD6007D

Date of Accident

15/09/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Period of Insurance 30/06/2022 - 29/06/2023

Requested By SUKYI CHONG (CHEW MOTOR ...

Requested Date 16/09/2022 13:36

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): **\$\$2**

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

LETTER OF AUTHORISATION

SM AUTOMOTIVE Kaki Bukit Avenue 6

Blk 1 #01-43

| Singapore 417883 |
|---|
| Dear Sir, Accident on Involving Vehicles Along 15.09. W C 1730 hD Chou Chu Kany Ave 6 Stip road Brickland Road |
| I/We, the registered owner/driver of vehicle registration no: |
| I/We hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith. |
| I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor,, to act on my/our behalf in respect of the above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis. |
| I/We undertake to co-operate fully with you and our solicitors to ensure that claim is successful. |
| I/We also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence. |
| Your kind co-operation in this matter will be much appreciated. |
| Yours truly, |
| Owner's Signature |
| (Company's stamp if applicable) |
| Name: Mum's Hichm Cathring Ph Ind NRIC No.: 2009174084 |
| Date: |

Assignment

| To: SM Au | tomotive | (Workshop) | | |
|---|---|--|------------------------------------|---|
| In consideration for you and to defer demanding irrevocably assign absolutes and expenses (incluare to be paid to the particularity). | ng for payment of the lutely to you all the produing legal costs / disb | ne cost of repair roceeds of my/our oursements payab | r, I/we the under claim(s) includi | ersigned do hereby ing damages, interest, d party basis which |
| I/We further confirm the payment shall constitute aforesaid proceeds of my | e a good and effectua y/our claim(s). | al discharge of t | he obligations b | by any party of the |
| I/We confirm that by this cheque is sent to me/us accepting any payment. | is assignment, I/we sha | all not be entitled | l in law to receiv | e any payment. If a |
| Dated this | day of | | 20 | |
| Signature : Name : ID No. : Address : | Mum's Fifthyn Cathyr Joug17408 | n fle the | OF PINE | |
| Witness Signature : Witness Name : Witness ID : | AUTO _A | la gukuji | | |