

Zero Gravity

2 Kaki Bukit Ave 2

#01-25 Kaki Bukit Autohub Singapore 417921

Tel: 67412845 Fax: 67412170

11 Nov 2022

AXA INSURANCE PTE LTD

ROBINSON ROAD
P.O. BOX 1094
SINGAPORE 902144

Dear Sirs / Madams,

RE: ACCIDENT INVOLVING VEHICLE(S) SNG5667R/SHC8287B NEAR MBFC TOWER ON
27 OCTOBER 2022

We understand that you are the insurer of vehicle SHC8287B.

I/We wish to inform you that my/our vehicle SNG5667R have been completed repairs to my/our satisfaction by ZERO GRAVITY. I/We therefore propose to claim from you as follows:

1. Cost of Repair	S\$3800.00
2. LTA Search Fee	S\$7.45
3. Loss of Rental (S\$120.00 X 3 days)	S\$360.00
4. Total	S\$4167.45

Please let us have your reply soonest possible.

Thank you.

Yours faithfully

Zero Gravity

LETTER OF AUTHORITY

ACCIDENT ON: 27/10/2022

INVOLVING VEHICLE(S) NO.: SNG5667R / SHC8287B

AT/ALONG: Near MBFC Tower

I, ABC Carmart NRIC No/Co Reg. No.: 53445045L of

980 Upper Serangoon Road # 05-03 Singapore 533856

Owner/Driver of motor vehicle registration no: SNG5667R insured by

MS Income under policy no: 5126773087-000003 do hereby authorize m/s **Zero Gravity** ("my Repairer") of 2 Kaki Bukit Ave 2, # 01-25 Kaki Bukit Autohub, Singapore 417921, to act as my representative in my claim against my insurance and/or against the owner(s) / driver(s) of motor vehicle(s) registration no(s): SHC8287B in respect of the above-mentioned accident.

I also hereby authorize my repairer to proceed repair to my vehicle, give all further instructions on my behalf concerning the said claim and as such, all future correspondences should be addressed to my repairer.


My repairer is further authorized to receive on my behalf monies claims, correspondence and to give a valid discharge and I also hereby appoint my repairer as my attorney and to sign any discharge voucher or any other documents in connection with this matter on and for my behalf.

I confirm that in the event of unsuccessful claim against the negligent party and/or my own insurer (if only under comprehensive cover) for the damages caused to my vehicle, I agree to pay for all the costs and incidentals incurred by my repairer.

I the above-mentioned vehicle owner/driver hereby affirm the above-mentioned statement to be true and correct.

Date this 07 day of 11 Year 2022

Signature :


ABC CARMART
53445045L
(Company Stamp if applicable)

Full Name : Tang Jea Ling

NRIC No : 7232310 F

Contact No : (HP) 97800182 (O) - (H) -



HSBC Life (Singapore) Pte. Ltd.
10 Marina Boulevard,
Marina Bay Financial Centre Tower 2 #48-01,
Singapore 018983
☎ +65 6880 4888
🌐 www.hsbclife.com.sg
✉ cc.gi@mail.life.hsb.com.sg

HSBC Life Third Party Direct Settlement

Vehicle No:	SHC 8287B (Insd veh)	Model:
	SNG 5667R (TP veh)	HONDA SHUTTLE 1.5G CVT SENSING
Date of Accident/ Time:	27/10/2022	

Repair Estimate	: \$	6,427.56	
Final Repair Cost	: \$	3,800.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	300.00	3 days at \$ 100 per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
Final Settlement Sum	: \$	4,107.45	
Payee Name: Zero Gravity			

Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)	
A) For Non GIA Registered	Agreed Liability 100 (%)
Workshop:	
B) For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: ____
BOLA Liability: ____ (%)	Assessed Liability (*): ____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.	
Remarks:	

Note:

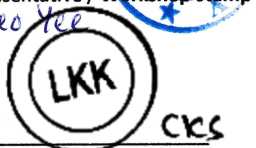
1. Please expressly reserve your client's rights if so required in this settlement document.
2. This settlement is on a without prejudice basis and should not construed as an admission of liability on HSBC Life and their client/tortfeasor in any manner whatsoever.
3. HSBC Life reserves their rights under the policy terms & conditions as well as their rights in law.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (HSBC Life and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident

Signature of workshop representative / Workshop stamp
Name of Representative: Yeo Yee
Date: 2/2/2023



Signature of Witness / Workshop stamp (if applicable)
Name of Witness: Ng Suet Yi
Date: 2/2/2023

Signature of HSBC Life's surveyor & stamp / representative
Name of HSBC Life's surveyor / Representative:
Date: 10/02/2023



ZERO GRAVITY

2 Kaki Bukit Avenue 2, #01-25 Kaki Bukit Autohub, Singapore 417921

Tel: +65 67412845 Fax No: +65 67412170

Email: zero_gravity@singnet.com.sg

Reg.No.: 52888887X

FINAL REPAIR BILL

No. : SO-000057

AXA INSURANCE PTE LTD

ROBINSON ROAD

P.O. BOX 1094

SINGAPORE 902144

Attention: Motor Claim Department

TEL : 63387288

FAX : 63382522

Your Ref. : SHC8287B

Vehicle No. : SNG5667R

Make & Model : HONDA SHUTTLE

Chasis No. : GK82102531

Engine No. : L15B6022977

Accident Date : 27/10/2022

Policy No. : 5126773087-000003

Date : 11/11/2022

Page : 1 of 1

Thank you for your inquiry. We are pleased to submit our quote as follows:

Item	Description	Qty	U/ Price S\$	Amount S\$
1	Lumpsum	1 X	3,800.00	3,800.00

SINGAPORE DOLLAR THREE THOUSAND EIGHT HUNDRED ONLY

E. & O.E

Total S\$ 3,800.00

Discount S\$ 0.00

Net Total S\$ 3,800.00

Terms: C.O.D.

Customer's Signature/Co. Stamp

ZERO GRAVITY

Any claim for faulty workmanship is limited solely to the rectification free of cost of such work, no claim for loss consequential or otherwise being admissible. Any objections to the validity of these charges must be made seven (7) days from the date of this invoice otherwise it is assumed that this bill is accepted as correct.



ZG PTE LTD

2 Kaki Bukit Avenue 2, #01-25 Kaki Bukit Autohub, Singapore 417921

Tel: +65 67477100

Buss.Reg.No.:2013171552

HIRER'S PARTICULARS

I/We ABC Carmart

If Different From

of

Section ①

Hereinafter called "the Hirer" hereby confirm having agreed to hire this day from ZG PTE LTD. Hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below and I further agree that I shall be held responsible for:-

1) **THIRD PARTY ONLY MOTOR VEHICLE COVERAGE**

the Excess which is the maximum amount of \$2500 to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

2) **COMPREHENSIVE MOTOR VEHICLE COVERAGE**

A) If the Rental Vehicle is damaged or destroyed while it is in the possession the Renter, Renter agrees to pay any required insurance deductible.

B) Renter will be responsible for the full amount of the excess not exceeding \$2000 for own damages and \$1500 for third party claims upon reporting of any accidents.

3) Only persons above 22 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the Vehicle whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me of the Terms and Conditions of Hire, hereinafter mentioned and printed at the back hereof.

Vehicle Regn No: <u>SLG548ZE</u>		Rental Agreement: NO.: <u>C0059</u>	
Section ① Hirer's And/Or Driver's Particulars		Date & Time OUT: <u>07/11/2022 @ 10:30 a.m</u>	
Name: <u>Foo Yang Cheng (Fu Yang Zhang)</u>		Date & Time IN: <u>10/11/2022 @ 8:50 a.m</u>	
Address: <u>Apt B1k 105 Henderson Crescent</u> <u>#16-19 Singapore 150 105</u>		Chargeable	Rates Amount
Mobile No.: <u>82921126</u>		3	Days @\$ 120.00 \$360.00
I/C No./Passport No: <u>S74084909</u>			
Type of I/C./Passport: <u>SINGAPORE IC</u>			Weeks @\$
Driving Licence No: <u>S74084909</u>			Months @\$
Pass Date: <u>05 Feb 2001</u>			Surcharge @\$
Date of Birth: <u>09 Mar 1974</u>			
Place of Issue: <u>Singapore</u>			
a) Third Party Only Policy Excess \$2500/-			
b) Comprehensive Policy Excess \$3500/-			
Vehicle Must Be Returned To Owner's Office By:		Insurance:	
Remarks:		Total Charge:	\$360.00
<p>IMPORTANT!</p> <p>For Singapore Use only</p> <p>Fuel Tank OUT (E) (1/4) (1/2) (3/4) (1) (1 1/4) (1 1/2) (F)</p> <p>Fuel Tank IN (E) (1/4) (1/2) (3/4) (1) (1 1/4) (1 1/2) (F)</p> <p>Vehicle No: 1) From: To:</p> <p>Vehicle No: 2) From: To:</p> <p>Tools Spare Tyre Accessories</p> <p>Vehicle Issued By:</p> <p>Vehicle Collected By:</p> <p>NOTE:</p> <p>HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING, TRAFFIC AND SMOKY EXHAUST VIOLATION</p>		Security Deposit	
		Total Payable	
		Amount Paid	
		Delivery Fees	
		Collection Fees/Misc.	
		Extra Hours @\$	
		Rates Do Not Include Fuel Refuelling	
		Total Additional Charges	
		Grand Total	\$360.00

I/We have read and hereby agree to the terms and conditions on both sides of this rental agreement.

HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE

PLS CHECK ENGINE OIL AND RADIATOR WATER EVERY MORNING

Date: 07/11/2022

Hirer's Signature:
ABC CARMART
53445045L

Driver's Signature:

7th Nov 2022
1019

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 04 Nov 2022 / 17:41:10

Receipt Date/Time : 04 Nov 2022 / 17:41:10

Tax Invoice/Receipt

Receipt No. : ITNET-00000-221104-003336

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHC8287B				
As at 27 Oct 2022/08:58:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHC8287B			
	Enquiry Fee	7.00	0.49	7.49
	20221104173620736819			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
Paid By				
	426588XXXXXX5595	eNETS Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



Paynow Authorisation Form

This form must be completed and returned to HSBC Life (Singapore) Pte. Ltd. Payment will be credited directly into the policyholder/claimant's designated bank account stated below. The Policyholder/claimant has to complete **all fields** of this form and return to:

HSBC Life (Singapore) Pte. Ltd.
Robinson Road P.O. Box 1094
Singapore 902144

Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)	
Name of Policyholder/Claimant :	ABC Carmart
Contact Person :	Tang Jea Ling
Contact Number :	97800182
Email Address :	
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	

Payee's Paynow Details (Please tick <u>only 1 option</u> & provide the Paynow Details)	
Payee's name as per bank account :	Zero Gravity
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	52888887X

I/We hereby authorise HSBC Life (Singapore) Pte. Ltd. to credit the payment due to me/us to the bank account linked to above Paynow account, and undertake to return to HSBC Life immediately upon demand any sum which shall not be so credited into such Paynow account. I/We agree that HSBC Life shall be fully absolved of any liability to pay me/us such insurance payout once such amounts are credited into the bank account linked to above Paynow account.

This authorisation shall continue in force until I/we have expressly revoked it by notice in writing delivered to you. In the event of a change of PayNow details, I/we shall inform you in writing 30 days in advance before the change.

In connection with my/our and/or the claimant's claims, I/We give consent for HSBC Life (Singapore) Pte. Ltd. ("HSBC Life") and its representatives or agents to collect, use, store, transfer and/or disclose the information (including that provided by sources other than myself) concerning me/us and/or the claimant, to or with all such persons (including any member of the HSBC Group or any third party service provider, and whether within or outside of Singapore and the Policyholder when claiming under a Group Policy) for the purpose of enabling HSBC Life and its representatives or agents to provide me/us and/or the claimant (where applicable) with services required of an insurance provider, including the evaluating, processing, administering and/or managing my/our and/or the claimant's claims or the Policyholder Group Policy(ies) with HSBC Life (as the case may be), and for the purposes set out in the Data Use Statement which can be found at www.hsbclife.com.sg. ("Purposes").

Authorised Signature & Company Stamp (as per bank records)



2/2/2023

Date (DD/MM/YYYY)