

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

Our Ref : SJK5147B / T270123
Your Ref : 22/22/22/VC05/026560
Date : 11 January 2023

Lonpac Insurance Bhd
300 Beach Road
#17-04/06 The Concourse
Singapore 199555
Attn: Motor Claims Department

BY EMAIL
WITHOUT PREJUDICE

Dear Sir/Mdm

ACCIDENT INVOLVING: **SJK5147B & GBC2333L**
DATE OF ACCIDENT: **10 November 2022**
ALONG: **PIE**

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

Cost of Repairs	\$	4,644.00
#Loss of Use (\$ 120.00 x 5 days)	\$	600.00
Loss of Rental (\$ ___ x ___ days) + 7% GST		
Loss of Income (\$ ___ x ___ days)	\$	-
LTA Fees	\$	2.00
Towing Fee	\$	-
Medical Fee	\$	-
Excess	\$	-
Grand Total	\$	5,246.00

Car date in: 21/11/2022
Car date out: 25/11/2022

Authorized Repair Days: 6 **(TP/OD/WS/Recovery of Incidental Costs)**

Please pay the amount of **\$ 5,246.00** in favour of **MOVA AUTOMOTIVE PTE LTD.**
If you have any enquiries, please call Ms Suann @ 6262 3377 EXIT 0 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).

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PERFORMA INVOICE

18/2/2023

LONPAC INSURANCE BHD
300 BEACH ROAD
17-04-07 THE CONCOURSE
SINGAPORE 199555

Page: 1
Vehicle No: SJK5147B
Vehicle Model: T/CAMRY
Tax Invoice: T270123
Claims ref: CD0041
Accident Date: 10/11/2022
Terms: C.O.D Days
Remarks:

No	Description	Qty	U. Price	Amounts S\$
1	COST OF REPAIR			\$ 4,300.00

AMOUNT S\$	\$ 4,300.00
GST @ 8%	\$ 344.00
AMOUNT DUE S\$	\$ 4,644.00

Customer's Signature


MOVA AUTOMOTIVE PTE LTD


INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

GBC2333L

Date of Accident

10/11/2022 

Reset

% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**Period of Insurance **27/09/2022 - 26/09/2023**Requested By **KEE SIOK KANG (MOVA AUTOM...**Requested Date **10/11/2022 11:59****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**



Automotive Pte Ltd



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POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SJK 5147 B and (Third
Party's Vehicle No.) GBC 2333 L on 10/11/22 along
PIE

BY THIS POWER OF ATTORNEY, *I/We, Chiew Cheng San
NRIC/Passport No. S12677092 (Address)
48 Ton Tuck Rd #07-05 / 596739

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 25 of the month of Nov, Year Two Thousand - (20 22).

Signed, Sealed & Delivered By

Customer's Name: Chiew Cheng San
NRIC No: S12677092
Co's Rubber Stamp, where applicable.

MOVA's copy

***delete as appropriate.**