



# LETTER OF AUTHORITY AND INDEMNITY

14 days grace period  
ends 18/10/2002

Survey on Friday 09/10/2002 @ 11am

## Motor Image Enterprises Pte Ltd

- ☐ Toa Payoh Service Center, 19, Lorong 8, Toa Payoh, Singapore 319255  
☒ Leng Kee Service Center, 25, Leng Kee Road, Singapore 159097


## Type of Claim:

- ☐ Third Party (Direct Settlement)  
☒ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SFU1771U AND SLP8933D

ON 05/10/2002 AT DOVER ROAD TOWARDS AVE

1. 05 I, the owner of vehicle no. SFU1771U hereby instruct you and authorise you to act for me with respect to the following: -
- To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
  - To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
  - To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
  - To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
- For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
  - For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name <u>Wong Kai Juan</u>		Company Name <u>Jefferson Motor Image Enterprises Pte Ltd.</u>	
Address <u>751 Upper East Coast Road</u>		Claim Officer's Name <u>Jeffery Tan</u>	
<u>S465565550</u>			
Telephone No		Telephone No	
Date <u>05/10/2002</u>	Email <u>wongkaijuan@outlook.com</u>	Date <u>05/10/2002</u>	
Company Stamp [For Co Regn Vehicle]	Authorized Signature <u>[Signature]</u>	Claim Officer Signature <u>[Signature]</u>	



**Motor Image Enterprises Pte Ltd**  
25 Leng Kee Road  
Singapore 159097  
Tel : (65) 6703 8333  
Fax : (65) 6479 3811  
BRN 198702032R

### DISCHARGE VOUCHER

Name of Insured: WONG KAI JUAN (HUANG KAIZHUANG)  
Address of Insured: 238 WESTWOOD AVENUE #12-41 S(648363)  
Name of Repairer: MOTOR IMAGE ENTERPRISES PTE LTD / WORKSHOP  
Address of Repairer: NO. 25 LENG KEE ROAD SINGAPORE 159097  
Place of Accident: DOVER ROAD TOWARDS AYE  
Date of Accident: 05/12/2022 Vehicle No.: SFU1771U  
Policy No.: D 300583648 QMY MSIG Claim no.: \_\_\_\_\_

I/We hereby declare that I/We have received from the aforesaid repairer(s) my/our aforesaid Motor Vehicle in good running order and repaired to my/our entire satisfaction and in consideration of INDIA INTERNATIONAL INSURANCE PTE LTD settling the repair costs stated above with the said repairer(s), I/We hereby release and discharge the said insurer(s) from all further obligations and liabilities under the aforesaid policy in respect on and accident involving my/our said motor vehicle on or about the abovementioned date and place.

I/We agree that by virtue of such payment, all my/our rights and remedies in respect of the damages to the said Motor Vehicle are subrogated to the said insurer(s) in accordance with the laws governing such matters.

I/We hereby grant the said insurer(s) the authority to use my/our name to the extent necessary to effectively exercise all or any of such rights and remedies including the right to give discharge and receipts therefore.

I/We further agree to furnish the said insurer(s) with any assistance that they may reasonably require of me/us when exercising such rights and remedies whilst on their parts they agree to indemnify me/us against liability for costs charges and expenses arising in connection with any proceedings which they may take in my/our name in the exercise of such rights and remedies.

### REPAIRER(S):


Company's Stamp & Signature

DENNIS LEONG

Name

03/01/2023

Date

### INSURED:



SXXXX249C

NRIC No. & Signature/Company's Stamp

WONG KAI JUAN (HUANG KAIZHUANG)

Name

03/01/2023

Date



www.tanchong.com



## BREAKDOWN OF PAYMENT

VEHICLE NO : ...SFU1771U.....

ACCIDENT ON ...05 Dec 2022.....AT .....

INVOLVING VEHICLE / S ...SLP8933D.....

- 1) Repair cost \$.....9,691.62..... Payable to Motor Image Enterprises Pte Ltd
- 2) GIA or LTA  
Search fees \$ .....7.49..... Payable to Motor Image Enterprises Pte Ltd
- 3) Medical fees \$ .....-..... Payable to .....
- 4) Loss Of Use or <sup>\$120 x 8 days</sup>  
~~Rental Car~~ \$ .....960.00..... Payable to Motor Image Enterprises Pte Ltd.
- 5) Total Claim Amount \$.....10,659.11.....

**\*KINDLY SEPARATE THE PAYMENT IN 2 CHEQUES**

\*Contact Person :



Motor Image Enterprises Pte Ltd

25 Leng Kee Road Singapore 159097

Service Centre Tel: (65) 6703 8163 Fax : (65) 6479 1137

Website: www.subaru.asia



## TAX INVOICE

GST Reg No. M2-0076975-9

Co. Reg No. 198702032R

**Sales:** INSURANCE CUSTOMER

**Invoice No:** M237727

**For cash sales, payment will be  
endorsed on this invoice and no  
separate receipt will be issued.**

**DATE REC'D:** 22-Dec-2022

**SERVICE ADVISOR:** DENNIS

**JOB No.:** M231249

**MILEAGE:** 100095

**ID:**

**NAME:** INDIA INTERNATIONAL INSURANCE PTE LTD

**ADDRESS:** 64 CECIL STREET

#05-00. S(049711)

**TELEPHONE:** 63476100

**MODEL:** FORESTER 2.0I-L AWD CVT

**ENGINE No.:** FB20YD92313

**CHASSIS No.:** JF1SJ5KC5JG110205

**REGISTRATION No.:** SFU1771U

ITEMS	CODE	DESCRIPTION OF REPAIRS	AMOUNT
1	TPCLAI	CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST INDIA INT INS (SLP8933D)	
2	REMARK	DOA:05/12/2022 TIME:1131 HRS LOCATION:DOVER ROAD TOWARDS AYE	
3	REMARK	REPLACE REAR BUMPER,BUMPER BEAM AND TAILGATE	1,200.00
4	REMARK	RESPRAY REAR BUMPER AND TAILGATE	1,040.00
5	REMARK	TRANSFER (TAILGATE) MECHANISM	150.00
6	REMARK	REMOVE AND REFIX REVERSE SENSOR	80.00
7	REMARK	TO CONDUCT WATER SEEPAGE TEST	100.00
8	REMARK	FAULT DIAGNOSTIC (RESET)	280.00
9	REMARK	TO CONDUCT (REAR) PROTECTANT COATING	280.00
10	REMARK	SUNDRIES	20.00
11	REMARK	TO CONDUCT (REAR) ANTI-RUST COATING	280.00
12	REMARK	REPLACE REAR END PANEL & REPAIR SPARE TYRE FLOOR (2.0 SUPP)	1,200.00
13	REMARK	RESPRAY REAR BUMPER BEAM & SPARE TYRE FLOOR (1.0 SUPP)	520.00
14	REMARK	TO APPLY SEALANT TO EFFECTED AREA (SUPP)	100.00
15	REMARK	TO INSTALL CARGO STEP PANEL (SUPP)	60.00
16	AUTOTA	AUTO TAIL GATE REPLACEMENT	723.00
TOTAL(LABOUR)			6,033.00
1		SKIRT COMPL R 5.2F 52401SG0109P(Qty : 1 @ 296.00 each(Discount 20.00%))	236.80
2		BUMPER FACE REAR FORESTER 1L 57704SG012(Qty : 1 @ 555.00 each(Discount 20.00%))	444.00
3		BRKT SD R RH 57707SG080(Qty : 1 @ 14.80 each(Discount 20.00%))	11.84
4		BEAM COMPL R EU (SUPP)	236.80

**Motor Image Enterprises Pte Ltd**

25 Leng Kee Road Singapore 159097

Service Centre Tel (65) 6703 8163 Fax (65) 64791137

Website: www.subaru.asia

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**Sales: INSURANCE CUSTOMER****Invoice No: M237727****For cash sales, payment will be  
endorsed on this invoice and no  
separate receipt will be issued.****DATE REC'D: 22-Dec-2022****SERVICE ADVISOR: DENNIS****JOB No.: M231249****MILEAGE: 100095****ID:****NAME: INDIA INTERNATIONAL INSURANCE PTE LTD****ADDRESS: 64 CECIL STREET**

#05-00, S(049711)

**TELEPHONE: 63476100****MODEL: FORESTER 2.0I-L AWD CVT****ENGINE No.: FB20YD92313****CHASSIS No.: JF1SJ5KC5JG110205****REGISTRATION No.: SFU1771U**

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
5	57711SG0219P(Qty : 1 @ 296.00 each(Discount 20.00%)) COVER HOOK R	10.40
6	57731SG010NN(Qty : 1 @ 13.00 each(Discount 20.00%)) COVER BMPR R (EXHAUST)	11.84
7	57731SG060(Qty : 1 @ 14.80 each(Discount 20.00%)) PANEL CPL R/G NA	882.08
8	60809SG0109P(Qty : 1 @ 1102.60 each(Discount 20.00%)) GLASS R/G	657.12
9	63019SG000(Qty : 1 @ 821.40 each(Discount 20.00%)) RUBBER DAM GLS -1 CAN USE SC000X2	5.92
10	63232SG000(Qty : 2 @ 3.70 each(Discount 20.00%)) CLIP BMPR *09PCS	17.28
11	909140007(Qty : 9 @ 2.40 each(Discount 20.00%)) CLIP *2PCS	4.80
12	909140062(Qty : 2 @ 3.00 each(Discount 20.00%)) LETTER MARK FORESTER	32.56
13	93079SG000(Qty : 1 @ 40.70 each(Discount 20.00%)) LETTER MK R SUB	53.28
14	93079SG030(Qty : 1 @ 66.60 each(Discount 20.00%)) CARGO STEP PANEL (RESIN)FORESTER	336.00
	E775ESG000(Qty : 1 @ 420.00 each(Discount 20.00%)) TOTAL(SPARE PARTS)	2,940.72

Subtotal 8,973.72  
GST(8%) 717.90  
**TOTAL \$9,691.62**

DATE : 16-Jun-2023

CUSTOMER

MANAGER



The customer acknowledges and confirms by taking delivery of the vehicle and/or upon receipt of this invoice, either personally or by an agent that his/her complaints relating to the vehicle have been rectified to his/her satisfaction and that the Company's liability for defective work and/or materials will be limited to rectification works and/or replacement of parts without charge or at discounted charge, at the Company's option. The customer further acknowledges that any discrepancy in this invoice (with the exception of errors and omissions) must be brought to the Company's attention in writing within three(3) days from the date of this invoice failing which it will be deemed correct.

**CUSTOMER****Not yet a DUO Member? Join us now at [www.DUORewards.com](http://www.DUORewards.com) and start accumulating your points for your invoice today!**



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 05 Dec 2022 / 18:21:54

Receipt Date/Time : 05 Dec 2022 / 18:21:54

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-221205-003956

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 - SNB9042T As at 02 Dec 2022/08:45:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SNB9042T Enquiry Fee 20221205182041423535	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SLN8873D As at 04 Dec 2022/18:09:00 Insurance Co: TOKIO MARINE INSURANCE SINGAPORE LTD				
2	Insurance Enquiry - SLN8873D Enquiry Fee 20221205182041490735	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SLP8933D As at 05 Dec 2022/11:31:00 Insurance Co: INDIA INT'L INS PTE LTD				
3	Insurance Enquiry - SLP8933D Enquiry Fee 20221205182041561283	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		21.00	1.47	22.47
Rounding Difference				0.02
Total Amount Payable				22.45
Paid By				
460517XXXXXX2978		eNETS Credit Card		22.45
Total				22.45
Cash Change				0.00
Tendered Amount				22.45
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.