

**FORZA AUTOHAUS PTE LTD**

39 WOODLANDS CLOSE, #01-34/35, MEGA@WOODLANDS
SINGAPORE 737856
TEL: 62781889 EMAIL: ENQUIRY@FORZAAUTO.SG
CO./GST REG: 201833292C

Our Ref : C23020002
Your Ref : SHC363S

13/02/2023

HSBC LIFE (SINGAPORE) PTE LTD
ROBINSON ROAD POST OFFICE P.O.BOX 1538
Singapore 903038

WITHOUT PREJUDICE

BY EMAIL @ e-surance@hsbc.com.sg

Attn:

Dear Sir/Madam

CLAIMANT: HONG RUI CONSTRUCTION PTE LTD

**RE: ACCIDENT INVOLVING VEHICLES GBF4406G KIA AND SHC363S AT SLE/TPE TWDS WOODLANDS
DIRECTION ON 03/02/2023 AT ABOUT 18:20.**

We refer to the above matter.

Please find our claims as follows:-

1. COST OF REPAIR (\$1900 BEFORE GST)	\$	2052.00
2. LOSS OF USE FOR 3 DAYS @\$100 PER DAY	\$	300.00
3. LTA SEARCH	\$	26.75
Total	\$	<u>2,378.75</u>

Pre-repair inspection arranged on 07/02/2023 and was surveyed on 07/02/2023.

A copy each of the following supporting documents is enclosed:

1. GIA Report
2. Final Repair Bill
3. LTA search
4. Vehicle Registration Card
5. Insurance Certificate
6. Letter of Authority & Payment Authorisation

Yours faithfully



FORZA AUTOHAUS PTE LTD

**FORZA AUTOHAUS PTE LTD**39 WOODLANDS CLOSE, #01-34/35, WOODLANDS CLOSE
SINGAPORE 737856

TEL: 62781889

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LETTER OF AUTHORITY

ACCIDENT INVOLVING VEHICLE NO. G1BF4406G And SHC363S
Along SLE/TPE TWDS WOODLANDS DIRECTION
On 03.02.2023 at about 1820 hrs

1. I/ We, hereby appoint **FORZA AUTOHAUS PTE LTD** to be my agent and I/We authorize my said agent to give you all instructions pertaining to the conduct of my **Third-Party Claim** including instructions to commence legal proceedings in court in my name against the third-party driver/or his employers, if applicable.
2. ** My said agent also has my authority to decide on my behalf whether to accept any offer of settlement from the respective insurer/owner/driver or company.
3. I understand and agree that until I revoke my said agent's authority in writing to you, I am bound by all instructions given by my said agent to you.
4. ** Upon settlement of the Third-Party Claim and in case the settlement monies were sent to me/us by the insurers/owner/company, I/We undertake to make payment to **FORZA AUTOHAUS PTE LTD** for the costs of repairs settled and related expenses and disbursement incurred.
5. The above-mentioned vehicle is to be repair at **FORZA AUTOHAUS PTE LTD** on my own will Without any inducement, threat or promise.
6. In an event should my Third-Party claim being rejected by Insurance. I am liable to pay for the Repair Costs arise from the Accident Repair works done by **FORZA AUTOHAUS PTE LTD**



Signature of Owner/Company
(Company's stamp if applicable)

Name: **HONG RUI CONSTRUCTION PTE. LTD.**

NRIC No: 201230619D

Address



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.hsbc.com.sg

HSBC Life Third Party Direct Settlement

Vehicle No:	SHC 363S (Insd veh)	Model: KIA K2500 6M/T
	GBF 4406G (TP veh)	
Date of Accident/ Time:	03/02/2023	

Repair Estimate	: \$	4,020.95	
Final Repair Cost w/GST	: \$	2,052.00	
Loss of Use	: \$	240.00	3 days at \$ 80 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	26.75	
Others:	: \$		
Final Settlement Sum	: \$	2,318.75	
Payee Name: FORZA AUTOHAUS PTE. LTD.			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A) For Non GIA Registered Workshop:	Agreed Liability		100 (%)
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.

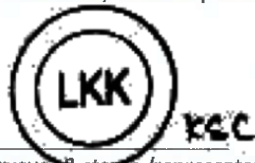
Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

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:
Date: 20/03/2023



Signature of Witness / Workshop stamp (if applicable)
Name of Witness: FOO MEI MEI
Date: 20/03/2023



Signature of HSBC Life's surveyor & stamp /representative
Name of HSBC Life's surveyor /Representative:
Date: 20/03/2023

**FORZA AUTOHAUS PTE LTD**

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SINGAPORE 737856

TEL: 62781889

EMAIL: ENQUIRY@FORZAAUTO.SG

CO./GST REG: 201833292C

Invoice**HSBC LIFE (SINGAPORE) PTE LTD**

ROBINSON ROAD POST OFFICE P.O.BOX 1538

Singapore 903038

Tel: 68804888

Inv No. : DI23020003**Date :** 15 Feb 2023**Ref :** C23020002**Currency :** SGD**Terms :** COD**Veh No. :** GBF4406G KIA

#	Description	Qty	UOM	U/P	Disc	Amt
1	GLOBAL SUM	1.00		1,900.00	0.00	1,900.00

Remarks:

3RD PARTY CLAIM

Payment Instruction:

All cheques payable to: FORZA AUTOHAUS PTE LTD

Bank Account: UOB 374-320-954-9

PayNow UEN: 201833292C



Subtotal : S\$ 1,900.00

GST 8.0% : S\$ 152.00

Total : S\$ 2,052.00

This is a computer-generated document. No signature is required.

**For Forza AutoHaus Pte Ltd**

(Authorised Signature)



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 06 Feb 2023 / 15:17:22

Receipt Date/Time : 06 Feb 2023 / 15:17:22

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230206-002293

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 - SHC363S As at 03 Feb 2023/18:20:00 Insurance Co: HSBC LIFE (SINGAPORE) PTE. LTD.				
1	Insurance Enquiry - SHC363S Enquiry Fee 20230206151528205051	24.77	1.98	26.75
Sub-Total		24.77	1.98	26.75
Total Before Rounding		24.77	1.98	26.75
Rounding Difference				0.00
Total Amount Payable				26.75
Paid By				
559221XXXXXX0113		eNETS Credit Card		26.75
Total				26.75
Cash Change				0.00
Tendered Amount				26.75
Excess Refundable Amount				0.00

(GBF4406G.)

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.

GIRO Credit 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's has to complete all fields of this form and return to:

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

Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)	
Name of Policyholder/Claimant:	Forza Autohaus Pte Ltd
Contact Person:	Debbie Wong
Contact Number:	6278 1889
Email Address:	enquiry@forzaauto.sg
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	
Particulars of Policyholder/Claimant's Bank Account	
Name of Bank:	UOB Bank
Bank Code:	7375
Bank Branch Code:	057
Bank Account Number:	374-320-954-9
Name of Account Holder:	Forza Autohaus Pte Ltd

I/We hereby authorise HSBC Life (Singapore) Pte. Ltd. to credit the payment due to me/us to the above bank account, and undertake to return to HSBC Life immediately upon demand any sum which shall not be so credited into such bank 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 above bank account.

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

17/3/2023
Date

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 :	Forza Autohaus Pte Ltd
Contact Person :	Debbie Wong
Contact Number :	6278 1889
Email Address :	enquiry@forzaauto.sg
(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 :	
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	201833292C

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)

17/3/2023
 Date (DD/MM/YYYY)