

輝陽汽車有限公司

HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

GST Reg No. 201629438M

Date: 25/04/2023

India International Insurance Pte Ltd

Motor Claims Department

64 Cecil Street

#04-04/05 IOB Building

Singapore 049711

RE: ACCIDENT INVOLVING SNH4265T & SLK4583H ON 14/03/2023

ALONG THOMSON ROAD (OUTSIDE THOMSON MEDICAL CENTRE)

SETTLEMENT OF OUR CLAIM FOR SNH4265T

Lump sum repair cost as recommended by surveyor (TP1093)	\$	3,402.00
3 Days Loss of Rental @ \$86.40 per day	\$	259.20
LTA Insurance Enquiry	\$	26.75
Total	\$	<u>3,687.95</u>

**The above claim applies only to vehicle damage and expressly exclude all personal injuries and other consequential loss.*

Please let us have your reply soonest possible, thank you.

Best Regards,

Marco Neo

HUI YANG MOTOR PTE LTD

DID: 64515752

Fax: 64514658

email: hui_yang_motor@hotmail.com

HUI YANG MOTOR PTE LTD

Bill To:

India International Insurance Pte Ltd
Motor Claims Department
64 Cecil Street
#04-04/05 IOB Building
Singapore 049711

TAX INVOICE

TP Claim Invoice No: TP1093
Bill Date: 25/04/2023

	Description	Amount
	Date of Accident : 14/03/2023 Owner : YOONG PUI MEI Vehicle No : <u>SNH4265T</u> Make & Model : <u>HONDA VEZEL</u>	
	<u>Lump sum repair cost as recommended by surveyor</u>	\$ 3,150.00
	Sub-Total :	\$ 3,150.00
	Add 8% GST :	\$ 252.00
	Total Amount SGD :	\$ 3,402.00

Reg No.:201629438M

GST No.:201629438M

HUI YANG MOTOR PTE LTD

Authorised Signature

Hui Yang Motor Pte Ltd

Sin Ming Autocare Blk 176 Sin Ming Drive

#04-02 Singapore 575721

Email: hui_yang_motor@hotmail.com

H/P: 98625891 Office: 64515752 Fax : 64514658

HYMS CAR LEASING PTE LTD

BLK 176 SIN MING DRIVE
#04-02 AUTOCARE
SINGAPORE 575721
HP : 8333 6725 FAX : 6451 4658
REG NO : 201320561K
GST REGISTER NO: 201320561K

TAX INVOICE

BILL TO: HUI YANG MOTOR PTE LTD
BLK 176 SIN MING DRIVE
#04-09 SIN MING AUTOCARE
SINGAPORE 575721

TAX INVOICE : LT032023-006
DATE : 20/03/2023
REFERENCE : SNH4265T

NO.	DESCRIPTION	AMOUNT
	AGREEMENT NO : 13749 HIRER'S NAME : HUI YANG MOTOR PTE LTD REGISTRATION NO : SNJ8334R MAKE : VOLVO S60 DURATION : 20/03/23 - 23/03/23 (\$80 X 3 DAYS)	\$240.00
	SUB TOTAL	\$240.00
	8% GST	\$19.20
	TOTAL AMOUNT	\$259.20

Payment:

- A. For cheque payment, please crossed and issue to "HYMS CAR LEASING PTE LTD".
Please indicate vehicle number on the back of the cheque and mail the cheque to:
HYMS CAR LEASING PTE LTD
Blk 176 Sin Ming Drive
#04-02 Sin Ming AutoCare
Singapore 575721
- B. For internet banking transfer, please indicate vehicle number and transfer to:
Bank OCBC Current Account 531-756864-001

HYMS CAR LEASING PTE LTD

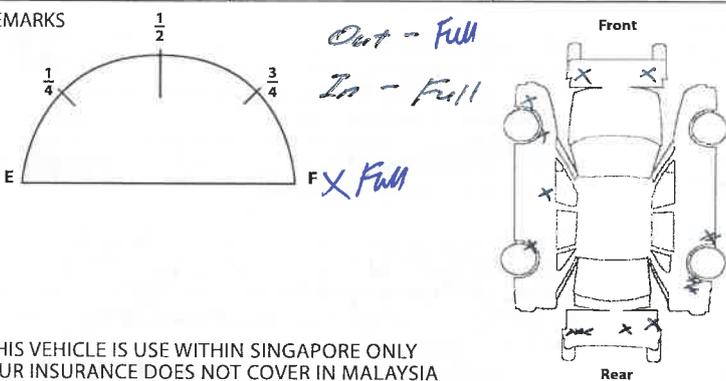
Blk 176 Sin Ming Drive #04-02 Sin Ming AutoCare Singapore 575721 Hp:8333 6725 Fax 6451 4658

RENTAL AGREEMENT

SNH4265T

RENTAL TERMS AND CONDITIONS

No: 13749

NAME <i>Hui Yang Motor Pte Ltd</i>		REG. NO. <i>SNJ8334R</i>	CAR MAKE <i>Volvo S60</i>
ADDRESS <i>Blk 176 Sin Ming Drive</i>		KM OUT <i>155448</i>	DATE & TIME OUT <i>20/03/23 11.40 am</i>
<i>A 04-09 Sin Ming Auto Care.</i>		KM IN <i>155445</i>	DATE & TIME IN <i>23/03/23 11.50 am</i>
<i>s(575721)</i>		KM DRIVEN	TIME USED
TEL <i>HP 92321624</i>	NAMED DRIVER <i>Neo Tey Sian</i>		Deposit
DRIVING LICENCE NO. <i>57707582H</i>	DATE OF EXPIRY	PLACE OF ISSUE	HOURS @\$\$
PASSPORT NO.	DATE OF ISSUE	PLACE OF ISSUE	<i>3</i> DAYS @\$\$ <i>80</i>
ADD NAMED DRIVER			WEEKS @\$\$
DRIVING LICENCE NO.	DATE OF EXPIRY	PLACE OF ISSUE	MONTHS @\$\$
PASSPORT NO.	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)
REMARKS  <p><i>Out - Full</i> <i>In - Full</i> <i>F X Full</i></p>			SUB-TOTAL <i>\$240</i>
			TOTAL RENTAL
THIS VEHICLE IS USE WITHIN SINGAPORE ONLY OUR INSURANCE DOES NOT COVER IN MALAYSIA			DELIVERY FEE
			COLLECTION FEE
			7% GST <i>\$19.20</i>
			PER DAY \$ PER WEEK \$ PER MONTH \$
			BY INITIALING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)
			PER DAY \$ PER WEEK \$ PER MONTH \$
Vehicle Number	Date From	Date To	REMARKS
			Replacement
			Replacement
1st Party Excess <i>\$2500</i>			PREPAYMENT
3rd Party Excess <i>\$2500</i>			TOTAL CHARGE <i>\$259.20</i>
FORM OF PAYMENT IN ADVANCE CASH BILL CHARGE CLUB CHEQUE NO.			CHECK DEPOSIT
			CASH
			RECEIPT NO. NETT CHARGE
			AMOUNT DUE/ REFUND
I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF. I UNDERTAKE NOT TO USE OR LET OTHERS USE THE VEHICLE TO CARRYOUT ANY ILLEGAL OR CRIMINAL ACTS INCLUDING CARRYING OF DUTY UNPAID GOODS ESPECIALLY CIGARETTES.			
SIGNED BY THE PARTIES HERETO ON THE _____ DAY OF _____			
X _____		X _____	
OWNER		RENTER'S/DRIVER'S SIGNATURE	

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 14 Mar 2023 / 12:29:30

Receipt Date/Time : 14 Mar 2023 / 12:29:30

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230314-001845

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 - SLK4583H As at 14 Mar 2023/08:30:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SLK4583H Enquiry Fee 20230314122833344722	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

20230314122840209

Direct Debit: eNETS Debit
(Internet Banking)

26.75

Total

26.75

Cash Change

0.00

Tendered Amount

26.75

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.

AUTHORIZATION LETTER

TO WHOM IT MAY CONCERN

I/We, Yeong Pui Mei hereby declare and agree to use the address of **Hui Yang Motor Pte Ltd**, that is at Blk 176 Sin Ming Drive, #04-09 Sin Ming Autocare Singapore 575721 in all my correspondences with any party in connection with my claim.

Arising from an accident involving my motor vehicle registration number SNH42657 and other vehicles registration number SK 4583H along Thomson Road (Outside Thomson Medical Centre) on 14/03/23.

I/We, further grant authority to Messrs **Hui Yang Motor Pte Ltd** or any of their representatives to negotiate my/our claim on my/our behalf and to execute, sign discharge voucher / indemnity forms and all necessary documents in connection with and arising of the above accident claim.

I/We wish to inform you that you could issue the cheque payment in favour of my/our repairer Messrs **Hui Yang Motor Pte Ltd**.



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Signature of registered owner and/or Company's stamp