

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 BI	LL No.	:	SO-000083	
AIG	ASIA PACIFIC INSURANCE PTE. LTD	Your Ref.	:	SLS4077K	
70.0	HENTON MAY	Vehicle No.		CB7463E	
70 5	HENTON WAY	Make & Model	:	TOYOTA HIACE	
#07	16 AIG BUILDING	Chasis No.	:	KDH2010145934	
SIN	SAPORE 079120	Engine No.	:	1KD2407265	
Atte	ntion: Motor Claim Department	Accident Date	•	22/03/2023	
TEL	: 64193000 FAX :	Policy No.	:	D22MTSCBU000071	L
		Date	:	17/04/2023	
Thank	you for your inquiry. We are pleased to submit our quote as follows:	Page	:	1 of 1	
Item	Description	Qty		U/ Price /	Amount
				S\$	S\$
1	Lumpsum	1 X		670.00	670.00

SINGAPORE DOLLAR SIX HUNDRED SEVENTY ONLY

E. & O.E	1	Total	S\$		670.00
		Discount	S\$		0.00
		Net Total	S\$	1	670.00
			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 if is assumed that this bill is accepted as correct.

Zero Gravity

2 Kaki Bukit Ave 2

#01-25 Kaki Bukit Autohub Singapore 417921

Tel: 67412845 Fax: 67412170

17 April 2023

AIG ASIA PACIFIC INSURANCE PTE. LTD

78 SHENTON WAY #07-16 AIG BUILDING SINGAPORE 079120 Attention: Motor Claim Department

Dear Sirs / Madams,

RE: ACCIDENT INVOLVING VEHICLE(S) CB7463E/SLS4077K PUNGGOL ROAD ESSO STATION ON 22/03/2023

We understand that you are the insurer of vehicle <u>SLS4077K</u>.

I/We wish to inform you that my/our vehicle <u>CB7463E</u> 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\$670.00
2.	LTA Search fee	S\$26.75
3.	Loss of Rental (S\$100.00 X 3 days)	S\$300.00
4.	Total	S\$996.75

Please let us have your reply soonest possible.

Thank you.

Yours faithfully

Zero Gravity

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

25 Mar 2023 / 17:26:47

Receipt Date/Time: 25 Mar 2023 / 17:26:47

Tax Invoice/Receipt

Receipt No.: ITNET-00000-230325-001965

Previous Receipt No.:

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Resul	t of Insurance Enquiry - SLS4077K				
As at	22 Mar 2023/07:30:00				
Insura	ance Co: AIG ASIA PACIFIC INSURAN	CE PTE. LTD.			
1	Insurance Enquiry - SLS4077K				
	Enquiry Fee		24.77	1.98	26.75
	20230325172535364836				
		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			
		518834XXXXXX7004	eNETS (Credit Card	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.

LETTER OF AUTHORITY

ACCIDENT (DN: 22/03/2025			
INVOLVING	VEHICLE(S) NO .: SLS4077K/ CB7463E			
AT/ALONG:	Punggel Road Esso Station			
I, Chua-	NRIC No/Co Reg. No.: S1071374 I of			
	Rivervale Drive # 11-145 Singapore 542123			
	of motor vehicle registration no: CB7463E insured by			
Autohub, Sin	under policy no: D22MTS CBM0000+1 do hereby Zero Gravity ("my Repairer") of 2 Kaki Bukit Ave 2, # 01-25 Kaki Bukit gapore 417921, to act as my representative in my claim against my insurance set the owner(s) / driver(s) of motor vehicle(s) registration no(s) 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.				
to give a valid	s further authorized to receive on my behalf monies claims, correspondence and discharge and I also hereby appoint my repairer as my attorney and to sign an other or any other documents in connection with this matter on and for my behalf			
insurer (if onl	t in the event of unsuccessful claim against the negligent party and/or my own under comprehensive cover) for the damages caused to my vehicle, I agree to costs and incidentals incurred by my repairer.			
I the above-m	entioned vehicle owner/driver hereby affirm the above-mentioned statement to b			
	Date this 25 day of 03 Year 2023			
Signature	: (Company Stamp if applicable)			
Full Name	: Chua Ho Seng			
NRIC No	: S10713741			
Contact No	$= (HP) \frac{98381683}{98381683} (O) (H) - (H)$			