

AUTOMOTIVE REPAIR CENTRE PTE LTD

38 WOODLANDS INDUSTRIAL PARK E1 #05-18 SINGAPORE 757700 TEL: 64688834 / FAX: 64622278

E-MAIL: info@automotiverepaircentre.com.sg

Allianz Insurance Singapore Pte Ltd

Attn: Motor Claims Dept

Dear Sir/ Madam

LETTER OF DEMAND

ACCIDENT INVOLVING VEHICLE NO <u>SLH1678D & SKQ3595K</u> <u>OUTSIDE BEAUTY WORLD SHOPPING CENTRE</u> ON <u>30/03/2023</u>.

We understand that you are the insurer of vehicle **SKQ3595K**.

I/We wish to inform you that my/our vehicle <u>SLH1678D</u> have been completed repairs to my/our satisfaction by <u>M/s AUTOMOTIVE REPAIR CENTRE PTE LTD.</u> I/We therefore propose to claim from your as follows:

| 1. | Cost of Repair | S\$ 1,252.80 (w/GST 8%) | | | |
|----|--------------------------------------|-------------------------|--|--|--|
| 2. | Loss of Use (S\$60.00 x total 3 day) | S\$ 180.00 | | | |
| 3. | LTA Search Fee/GIA Reports | S\$ 2.00 | | | |
| | TOTAL | S\$ 1.434.80 | | | |

Please let us have your reply soonest possible.

Thank you.

Yours faithfully

26 04 2023

LETTER OF AUTHORISATION

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|------|--|-----------|---------|---------|-----|-----------|-------------|--|------------|------|
| | I/We, | k | CHOW | CHUNG | JIH | | | ("claima | | of |
| * | 355 A SE | MISAW AN | 4 WAY 7 | 409-100 | (ad | dress), o | owner of | STH1618D | (vehicle n | 10.) |
| | 355 A SEMBAWANG WAY #09-100 (address), owner of SLH1678D (vehicle no.) hereby authorize Automotive Repair Centre Pte Ltd ("the workshop"), to act on behalf of | | | | | | | | | |
| | me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") | | | | | | | | | |
| | for my/car vehicle no. SLH1678D that was damaged pursuant to the accident occurred on | | | | | | | | | |
| | 3003 2023 (date) along outside Beauty world shopping centre | | | | | | | | | |
| | (location) | involving | yehicle | no/s | | SKQ | 1595 K | | (" | the |
| | accident"). | | | | | | | | | |
| | | | | | | | | | | |
| | I/We further authorize the workshop to settle my/our above mentioned claim in a manner that | | | | | | | | | |
| | they deem fit and the workshop is further authorized to receive payment further to settlement | | | | | | | | | |
| | of my/our claim with payment cheque/s being made in favour of the workshop. | | | | | | | | | |
| | | | | | | | | | | |
| | I/We further acknowledge that any settlement the workshop may reach on my/our behalf is | | | | | | | | | |
| | on a without prejudice and without admission of liability basis insofar as the | | | | | | | | | |
| | driver/owner/insurers of the other vehicle/s is concerned. | | | | | | | | | |
| | | | | | | | | | | |
| | Dated this31 (day) ofMARCH (month)2023 (year) | | | | | | | | | |
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| // \ | Signed by ' | the claim | nt" | | | Signed | l by "the y | workshop" | | |
| | (with chop | | | | | (with o | | - The state of the | | |



Company Reg No: 201312913C GST Reg No: 201312913C 38 Woodlands Industrial Park E1 #05-18 Singapore 757700

Tel: 6468 8834 Fax: 6462 2278

79 ROBINSON ROAD

#09-01 SINGAPORE 068897

Email: info@automotiverepaircentre.com.sg



PayNow UEN: 201312913C

Bill To: Tax Invoice No: 00005368 ALLIANZ INSURANCE SINGAPORE PTE LTD

Date: 26/4/2023 Reference: SLH1678D

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No **DESCRIPTION AMOUNT** 1 **COST OF REPAIR** \$1,160.00 Sub-Total: \$1,160.00 GST @ 8%: \$92.80 Customer Signature & Co. Stamp **Amount Due:** \$1,252.80

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SKQ3595K

Date of Accident

30/03/2023

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance Allianz Insurance Singapore P... Period of Insurance 30/09/2022 - 29/09/2023 Requested By PONG JIA JUN OSCAR (Autom... Requested Date 31/03/2023 16:55

Payment details

Request Amount: **\$\$1.85** GST Amount: **\$\$0.15**

Total Amount Due (GST Inclusive): **\$\$2**

General Insurance Association

Records Management Centre GST Registration No: **M400017735**