Usia, Toy

Workshop Address: Blk 1008, Bukit Merah Lane 3 # 01-04/06/08 Singapore 159722



### "WITHOUT PREJUDICE"

Your Ref

: SFL2828G

Our Ref

: SKV9288G / T290416

Date

: 30 April 2019

LKK AUTO CONSULTANT PTE LTD 51, Ubi Avenue 1 #01-25 Paya Ubi Industrial Park Singapore 408933.

ATTN: MOTOR CLAIMS DEPT

Dear Sir / Madam,

# ACCIDENT INVOLVING SKV9288G & SFL2828G ON 03/04/2016 ALONG HILLCREST VILLA BASEMENT CARPARK

We refer to the above.

Enclosed herewith are documents for your attention and actions.

### Please issue payment in favor of **MOVA AUTOMOTIVE PTE LTD**.

If you have any enquiries, please contact us at 6272 3892 or alternatively:

- Ms Vivian, <u>vivianwkl@mova.com.sg</u> for feedback, workshop & claims matters, Lawyer Cases and all Own Damages & Windscreen matters.
- Ms Suanne Chiu, <u>suann@mova.com.sg</u> for all Third Party matters.

Thank you.

Note: Enclosed tax invoice & discharge voucher.

Yours faithfully For Claims Manager Claims Department Tel: 62723892

Fax: 627083149

<sup>\*</sup>This is a computer generated letter and does not require a signature.



Vehicle No:

#### AXA THIRD PARTY DIRECT SETTLEMENT

SFL 2828G (Insd veh)

			SKV 9288G (TP veh)	Model: Audi A6 (198	(4cc)	
Date of A	Accident/Time:		03/04/2016			
Repair Est	timate	:\$				
Final Repa	air Cost	:5				
Loss of Us	58	: \$			days at \$	per day
Rental (if	any)	i S			days at S	per day
LTA / GIA	Search Fee	: \$			11.	
Others:		:5				
		5				
Final Settlement Sum (Global Sum)		: 5	8,500.00			
Payee Na	ime :					
Is Third P	arty Workshop GIA Registere	d?	X ] YES [ ] NO	(Kindly indicate below)		
A)	For Non GIA Registere	d Works	shop: Agreed	Liability(%	)	
B)	For GIA Registered Workshop:		BOLA A	pplicable: <del>Ves/</del> No BOL	A Scenario No:	
	BOLA Liability:	(%)		ed Liability (*):		

#### NOTE:

Remarks:

- 1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.

\* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

3. AXA 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 (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

Signature of workshop representative / Workshop stamp
Name of Representative: Avril H

Date: 30 (4 ) 4

MOVA AUTOMOTIVE PTE LTD

Bik 1008, BUKIT MERAH LANE 3

#01-04 (S) 159722

Tel: 62723892 Fax: 62708314

GST Reg No : M2-0088864-2

Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date

# AUTHORIZATION TO ACT

I, Tan Hee Meng ("the third party claimant")
of 17F Hillcrest Road S(286776) (address).
owner of SKU9288 G (vehicle no.) hereby authorize  MOVA AUTOMOTIVE PTE LTD
("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. SKV 9288 Gthat was damaged pursuant to the
accident which occurred on 3. Apr. 2016 (date) along Hill crest
Villa Basement Carpark (location)
involving vehicle no/s SFL 2828 G
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.  I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other wehicle/s is concerned.
Dated this day of (month) 20 (year)



Main Office:

Mova Building No. 22, Jalan Kilang,

Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept:

Block 1008 Bukit Merah Lane 3 #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

**Tax Invoice** 

30/04/2019

AXA INSURANCE PTE LTD 8 SHENTON WAY AXA TOWER #27-01

SINGAPORE 068811

Attention :- XA009

No.

Description

Lump Sum Amount

Qty

Page #

Veh#

Tax#

JOB#

Terms

Remarks

U.Price

124571

:- SKV9288G

CK630107

:- merimen system

:- T290416

:- C.O.D

Veh Model :- AUDI A6

ACC. Date :- 03/04/16

Amounts S\$

7,943.93

E. & O.E

AMOUNT S\$ GST @ 7 %

7,943.93 556.08

AMOUNT DUE S\$

8,500.01

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD



CO. REG. NO.: 198904033G

Automotive Pte Ltd Main Office: No. 22 Jalan Kilang, Singapore 159419

Bukit Merah Branch:
Bik 122 Bukit Merah Lane 1 #01-50, Singapore 150122
Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792
Tel: (65) 6476 3333 Fax: (65) 6270 8314 24 Hours Breakdown Service: (65) 9799 8888 Website: www.mova.com.sg

## RENTAL AGREEMENT

RANO.: I 10464

		VEHICLE				21/10/20/20				125	
	Vehicle No.:	Z 17/5 / Model:	THE CHOICE			CHECK O	OUT / CHEC	KIN	V		
	Change Over 1:	Date:	Initial:	DATEO	UT:	04/16	TIME OUT:	7	15		
	Change Over 2:	Date:	Initial:	PETROL	LEVEL OUT	E .	1/8 1/4 3/8 1/2	2 5/8	3/4 7/8	F	
		CORPORATE H	IIRER	DATEIN	20		TIME IN:	IN	00	1	
	Co. Name:		IKLK	PETROL			/8 1/4 3/8 1/2	5/8	3/4 7/8	6	
	Co. Address:			KM	J 2		KM . >		-17 110/		
				OUT	TO 4	7	IN /	3.	705		
				KM DRIV	EN:						
L	Contact Person:		Tel:			愚		Z			
		NAMED DRIV	ER		1						
-	Name:	4/EE 0/21	6								
-	Address: //	F Mucot	V ROAD								
1	5	TONE DRG	776			0				0	
-	Office Tel:	Residence	Tel:	INDICAT	E: PO			1	11	4	
	Occupation:	Hp / Pgr N	No: 9768 3111	A - Accid D - Dents				1		Amil	
L	P.P/LC No:	Nationality	y: Sportalin	S - Scrate	hes						
н	Date of Birth:	/ (4/197/ Place of B	irth: Spere	X - Crack	Mary III	B. /		7			
100	Dr. Licence No:	1-1				EXCESS	AMOUNT				
Ľ	Date of Issue:	Country of	Issue: Sport	SING	APORE		LAYSIA		SIGNATU	PE.	
	ADI	DITIONAL NAMED	DRIVER	5 20	Cres	\$		26			
	Name:					СНА	RGES		11	T	
A	Address:			Mon	ths @\$		per month				
				Week	cs @\$		per week				
-	Office Tel:	Residence '	[el:	9 Days	@\$	180	per day		112.	-	
- 11	ecupation:	Hp / Pgr No	0.	Hour	s @\$	100	per hour		1620	00	
-	P/I.C No:	Nationality:				S	UB-TOTAL	(1)		-	
-	ate of Birth:	Place of Bir	th:	Less 1	Discount:	9		(1)			
	ate of Issue:	2400000000				- 22	MA.				
72-10	emarks:	Country of I	ssue;	CDW	@\$		AL CHARG	100	the open		
				PAI	@S		er day / week / m				
	1010-0	ron = SKN 9	27.66		OL TOP-UP	P	er day / week / m	onth			
			mane	MISC	JE TOP-UP						
Inv	roice No:	Rec. No:		Mide		- CV					
IMI	PORTANT: The vehicle will	not be issured after the expiry of the h	tire period and in case of any accident	COTT		Si	UB-TOTAL	(2)			
befo	re the expiry time and navn	neur for the automical at the state of	u please inform us at least 24 hours	GST @	7%				113	40	
will be imposed (i.e., a full day central will be observed that exceeding the time for return of the Vehicle		leve.	TOTAL STATE OF THE	TOTA	AL CHARGI	ES	1733	40			
neki	ehicle.) Any vehicle not returned with 24 hours will be reported as stolen. Hirer is responsible for all arking & traffic violations and missing items.			VISA MAS		CASH	COMPANY BILLING OT	HERS			
firi	ER'S DECLARATION 1	server to the turns and			ISION @\$	pe	r day / week / mor	nth	(Cheny		
HRER'S DECLARATION: I agree to the terms and conditions above and as set overleaf and in declare and in declare are its to be deemed to have been made on the applicable credit card voacher.  PRE-PAYMENT  PRE-PAYMENT											
CHECKED OLT BY: CHECKED BY BY BY						T					
200	4	S. MCALD IN DI:	CHECKED BY:	AMOUNT REF		(					
34	Manual I			SIGNATURE C	F REFUND:-						
	Mova Automotive As Managers on Bel	e Pte Ltd half of	Past 3 years acc	cidents YES	NO						

OWNER

HIRER SIGNATURE

COMPANY STAMP



# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

10 Anson Road, #06-16 International Plaza, Singapore 079903 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

### TAX INVOICE

Our Ref No:

GR-16-035385

Date of Request:

04/04/2016

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd No. 22 Jalan Kilang,#03-01 Mova Building Singapore 159419

Dear Sir/Madam,

**Enquiry Date** 

04/04/2016

Enquiry By

CAREN

TP Vehicle No.

SFL2828G

Accident Date

03/04/2016

DESCRIPTION	
TP Insurer Enquiry	AMOUNT (S\$)
GST Amount	1.87
Total Amount Due (GST Inclusive)	0.13
- Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

10 Anson Road, #06-16 International Plaza, Singapore 079903 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

# Third Party Insurer Enquiry

Our Ref No:

GR-16-035385

Date of Request:

04/04/2016

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd No. 22 Jalan Kilang,#03-01 Mova Building Singapore 159419

Dear Sir/Madam,

**Enquiry Date** 

04/04/2016

Enquiry By

CAREN

TP Vehicle No.

SFL2828G

Accident Date

03/04/2016

#### **Enquiry Result**

TP Vehicle No.	Tax constant				
	Insurer	Period of Insurance	Insurer Tel. No. 6338 7288		
SFL2828G	AXA Insurance Singapore Pte Ltd				
	3-7-10-10-10	09/11/2015-08/11/2016			

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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