



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

09 JUNE 2016

**BRIGHTNESS SERVICES**

12 LITTLE ROAD  
#07-02  
SINGAPORE 536986

Dear Sir/ Mdm

**OUR REF : CC4/AXA16010277/M1pg3**

**YOUR REF : P1633547 (GX 6397G)**

**ACCIDENT INVOLVING GX 6397G AND SKM 3350Y ALONG/AT SERANGOON ROAD  
ON 31/05/2016**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Singapore Pte Ltd to deal with the third party claim against your policy.

We have received a claim from EM-1 Auto Pte Ltd acting on behalf of the owner of GX 6397G against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 10 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

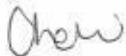
This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at [chewht@lkkauto.com](mailto:chewht@lkkauto.com).

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely



Chew Hsiao Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: [chewht@lkkauto.com](mailto:chewht@lkkauto.com)

Cc *AXA Insurance Singapore Pte Ltd*  
*(Motor Claims Dept)*

**LETTER OF AUTHORISATION**

ACCIDENT INVOLVING (any vehicle) SKM33JDX and GX 6397G,  
ON 31/5/16 ALONG S'goon Rd twds Htoay Pasir

I, Karp Chew Khiem, NRIC No. / Company Reg. No.  
\_\_\_\_\_ of (address) \_\_\_\_\_

Postal Code \_\_\_\_\_, the registered owner (or authorised agent) of motor vehicle registration number  
SKM33JDX hereby authorise your workshop **EM-1 Auto Pte Ltd** (Company/GST REG.No. : 201316380R)

Blk 8 #01-68 Sector C Sin Ming Industrial Estate Singapore 575643 to :-

1. Begin or commence repairs to my/our motor vehicle;
2. Start or initiate third party claims for damages incurred by me against third party(ies) responsible for the accident.
3. To instruct **EM-1 Auto Pte Ltd** on my/our behalf to negotiate a settlement with the third party and/ or his insurers as you deem fit.
4. To appoint vehicle surveyor on my/our behalf to determine reasonable costs of repair and period of repair.
5. To act on my/our behalf for any documents mailed to EM-1 Auto Pte Ltd by the third party and/or his insurers for the claim of my vehicle, if I am not contactable.

I am prepared to attend at my/our solicitors' office or to attend Court in connection with my/our claim, if necessary, I shall give my full co-operation and support for the claim for cost of repair and loss of use and shall keep you informed of any correspondences and/or summons that I may receive due to this action before agreeing to pay up or receive any monies due to this claim.

I authorise you to claim for the period of loss of use as specified by the motor surveyor or such shorter period due to accelerated work. I further authorise you to accelerate the repair period with overtime work and additional resource, I will pay you a reasonable amount to reflect the additional period of time to shorten.

I agree to keep you informed of any document(s), including cheques, mailed to me by third party and/or his insurers before taking any action. I also will not bank in any cheques issued by third party insurance and/or his insurers without the approval of EM-1 Auto Pte Ltd, and should I get approval from EM-1 Auto Pte Ltd to bank in the said cheques, I agree to pay EM-1 Auto Pte Ltd the full settlement amount as stated on the cheques within 5 working days.

Should my/our claim be partly successful or unsuccessful or cannot be proceeded with and/or if any judgement or settlement is not honoured or satisfied by third party, I/We:

1. Agree to pay you the sum of monies (as agreed) or as certified by the surveyor appointed, being the costs of repairs, survey fees and/or any other expenses reasonably incurred by you on my/our behalf. You may use the recovered amount from my claim for loss of us to partially offset the difference.
2. Agree to pay you such increased cost for additional resources and overtime work to shorten the period of repair.
3. Will pay for any shortfall that may result in the settlement amount.

In the event that EM-1 Auto Pte Ltd or the Repairer is compelled to enforce this undertaking, I/We agree that I/we shall pay on a full indemnity basis, the legal costs incurred by EM-1 Auto Pte Ltd or the Repairer.

Signature: 

Company Stamp:  
(if applicable)

Name: Karp Chew Khiem

NRIC No: S69454731

Contact No: 91443766

Date: 31/5/16



Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.

**AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	GX 6397G (Insd veh)	Model: Toyota Lexus (2994cc)
	SKM 3350X (TP veh)	
Date of Accident/ Time:	31/05/2016	

Repair Estimate	: \$	37,429.35	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum (Global Sum)	: \$	20,000.00	

Payee Name : EMVA AUTO 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:**

- 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.
- 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.

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: Chia Sin Muk  
 Date: 17/6/19

Signature of Witness / Workshop stamp (if applicable):   
 Name of Witness: Cheong Moe Choo  
 Date: 17/6/19

Signature of AXA's surveyor/representative:    
 Name of AXA's surveyor/Representative: LKK  
 Date: 19/6/2019

# EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C

#01-68 SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: emlautopteltd@gmail.com

COMPANY / GST REG. NO: 201316380R

## TAX INVOICE

M/S KANG CHEU KHIEM

Invoice No : 19/00195/4602TP

Date : 17-Jun-2019

AXA Insurance Singapore Pte Ltd

Motor Claim Department

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Date of Accident : 31-May-2016  
Our Client's Vehicle Number : SKM 3350X  
Vehicle Make / Model : LEXUS GS 300  
Your Insurer : GX 6397G

DESCRIPTION	SUB-AMOUNT	GST 7%	AMOUNT (SGD)
Lump Sum Repair Cost ( Recommended by LKK Mr Ma)	18,000.00	1,260.00	19,260.00 SR

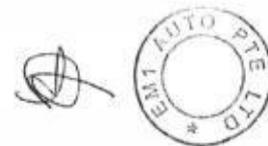
SGD ( Nineteen Thousand Two Hundred Sixty only )

**GRAND TOTAL**

**19,260.00**

Subject to 7% GST

1,260.00



Authorised Signature and Company Stamp

To : EM-1 Auto Pte Ltd  
Blk 8, #01-68 Sin Ming Rd  
Sin Ming Industrial Estate Sector C  
Singapore 575643

A/c : Kang Cheu Khiem  
SKM3350X

Date : 15/07/2016  
Tax Invoice No : S0816/16  
Contract No : -  
Rental Agreement No : ST/19658  
Contract Period : 31/05/16 - 10/06/16  
Payment Terms : CASH  
Payment Period : 31/05/16 - 10/06/16  
Payment Due Date : 15/07/2016

Vehicle No.	Driver	Model	Item	Amount
SJQ4301Y	Chua Siew Piy Angeline	Toyota Camry	Rental Charges 10 days @ \$200 per day	\$ 2,000.00

Total : \$ 2,000.00  
GST 7% : \$ 140.00  
Amount Payable : \$ **2,140.00**

**Billing Enquires**

Contact : Michelle  
Tel. No. : 6743 6266  
Fax No. : 6420 6328

for Fulco Leasing Pte Ltd



Authorized Signature

Cheques should be crossed and made payable to "Fulco Leasing Pte Ltd"

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Please detach and return with  
your remittance to :

**Fulco Leasing Pte Ltd**  
22 Ubi Road 4, Fulco Building  
Singapore 408617

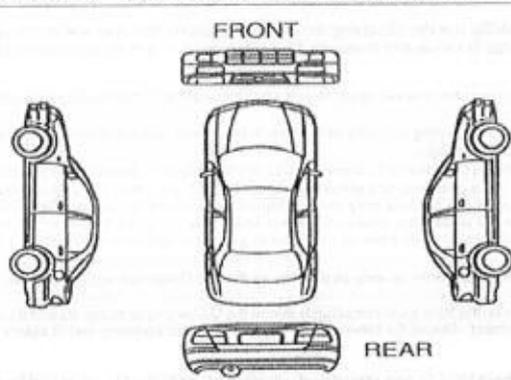
Invoice No : S0816/16  
Vehicle No : SJQ4301Y  
Due date : 15/07/2016

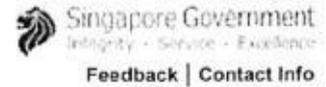
Amount Payable : \$ 2,140.00

Cash/Cheque : \_\_\_\_\_

EM1

**RENTAL AGREEMENT No. ST/19658**

<b>Hirer Particulars -</b>				Veh. No. <u>SJQ9301Y</u> Replace Veh. No.				
Name	<u>Kang Cheu Khien</u>			Make / Model	<u>TLCamry</u>	Auto/Manual		
Address				Date/Time Out	<u>31/5/16 - 1315</u>	KM Out		
				Date/Time In	<u>10/6/16 - 1620hrs</u>	KM In		
NRIC/Passport	Mobile	Tel (Office)	Occupation	Estimated Date/Time Return				
Employer				<b>Rental Charges -</b>		<b>S\$</b>		
<b>Authorised Driver's Particulars -</b>				Hours	@	Per Hour		
				Name	<u>10</u>	Days	@	Per Day
				Address	<u>Blk 468B Fernvale Link #17-543</u>	Weeks	@	Per Week
				NRIC/Passport	<u>S'792468</u>	Months	@	Per Month
				Date of Birth	<u>8/9/240746</u>			Per Trip
D/Licence No.	<u>889240746</u>	Pass Date	<u>15-6-07</u>	Collection	@	Per Trip		
Expiry Date		Country of Issue		M'sia Surcharge	@	Per Day		
Tel (Res)		Tel (Office)		PAI	@	Per Day		
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES				Others				
				Sub-Total		<u>2000.00</u>		
				Add 7% GST		<u>140.00</u>		
				(A) Estimated Total Rental		<u>2140.00</u>		
				<b>Extension -</b>				
Extension Rental		x						
M'sia Surcharge		x						
		x						
Others -				Sub-Total				
				Add 7% GST				
				(B) Extension/others Total				
				(A) + (B) Grand Total Rental Charges				
				Less Prepayment				
				<b>Balance Due</b>				
<b>Physical Damage Excess</b>				<b>Mode of Payment :</b>				
Singapore - Own Damage	S\$2,000.00			Cash/Nets/Cheque/VISA/MC Card No:				
Singapore - 3rd Party Damage	S\$2,000.00			Deposit	Deposit Refunded			
Malaysia (if applicable)	S\$8,000.00			Amount				
For Driver aged below 24 or above 65 or Less than 2 yrs driving experience regardless of age.	S\$3,000.00 (Additional)			Remarks:	Received by			
<b>IMPORTANT NOTE:</b>				The hirer hereby read and understood all terms and conditions stated on this page and overleaf :				
<p>1. Only drivers registered with FULCO Leasing Pte Ltd (the Owner) are authorised to drive the Vehicle. Should the Vehicle is damaged or stolen while being driven by unauthorised drivers, the Hirer is liable for the full cost of repair or the value of the Vehicle if the Vehicle is being stolen &amp; other losses suffered by the Owner.</p> <p>2. The Hirer shall not permit the Vehicle to be used for purposes which conflict with the Law in connection with theft, drug pedaling or trafficking, smuggling or any other criminal action. Should the Vehicle is confiscated by the Government under such circumstances, the Hirer shall indemnify the Owner the value of the Vehicle plus all cost and expenses incurred.</p>				<p>for Fulco Leasing Pte Ltd</p> 				
				Hirer Signature/Co's Stamp/Date		Authorised Signature/Date		



SKM3350X

Text size + -



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 31 May 2016 / 15:34:35

Receipt Date/Time : 31 May 2016 / 15:34:35

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-160531-001065

Previous Receipt No. :

<b>S/N Item Description/ Business Transaction Reference No.</b>	<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
Result of Insurance Enquiry - GX6397G As at 31 May 2016/11:55:00 Insurance Co: AXA INSURANCE SINGAPORE PTE LTD			
1 Insurance Enquiry - GX6397G Enquiry Fee 20160531153123318402	5.00	0.35	5.35
<b>Sub-Total</b>	5.00	0.35	5.35
<b>Total Before Rounding</b>	5.00	0.35	5.35
<b>Rounding Difference</b>			0.00
<b>Total Amount Payable</b>			5.35
<b>Paid By</b>			
20160531153331858	Direct Debit: eNETS Debit (Internet Banking)		5.35
<b>Total</b>			5.35
<b>Cash Change</b>			0.00
<b>Tendered Amount</b>			5.35
<b>Excess Refundable Amount</b>			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.

Print Receipt OK