

Your Ref : SJD 2356X

Our Ref : SHD 7178J

Mohamed Safie Bin Kalil C/O

CHUNNI MOTOR WORK PTE LTD

Blk 10 Ang Mo Kio Industrial Park 2A

#03-19 AMK AutoPoint

Singapore 568047

3019271950---

Date : 30/12/17



61136388

The Motor Claims Department

AXA INSURANCE SINGAPORE PTE LTD
8 SNEYTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

WITHOUT PREJUDICE



Dear Sir / Madam,

RE: ACCIDENT INVOLVING SHD 7178J / SJD 2356X / OTHERS On 06/04/2017

ALONG TPE (SLE) BEFORE EXIT 5

I am the owner/hirer of motor vehicle/taxi, SHD 7178J, which was involved in the above-mentioned accident.

The motor vehicle/taxi was surveyed by your appointed appraiser at the premises of M/S CHUNNI MOTOR WORK PTE LTD. The accident was caused by your insured's negligent driving and or management of his vehicle. Therefore, I am claiming damages and losses sustained by me against you in connection with the accident based on the appraiser's recommendation.

Our claim is as follows:

1) Cost of Repair	S\$ 42,265.00
2) Loss of Rental	S\$ 3,625.00
3) Loss of Income	S\$ 1,450.00
4) GIA Report Fee	S\$
5) LTA Search Fee	S\$ 2.00
6) Survey Report Fee	S\$ 500.00
	<u>S\$ 47,842.00</u>

We enclose herewith the following relevant supporting documents :

- a) Authorisation Letter
- b) Final repair bill(s)
- c) LTA Search
- d) GIA report(s)
- e) Insurance Certificate

Kindly look into the matter and revert as soon as possible. Thank you.

Yours faithfully

LETTER OF AUTHORITY

To Whom It May Concern :

ACCIDENT INVOLVING **SHD 7178J / SJD 2356X / OTHERS**

ALONG **TPE (SLE)** Before Exit 5 ON 06.04.2017

I, Mohamed Safie Bin Kalil , NRIC NO. S 6941156H of
Blk 423 Yishun Avenue 11 #03-536 (S) 760423

Owner/hirer of motor vehicle Registration No **SHD 7178J** ,insured by
First Capital Insurance Ltd under Policy No. D-1572701 MFSH

do hereby authorize M/s **Chunni Motor Work Pte Ltd** as my authorized representative to write,
negotiate and settle claim on my behalf in my claim against the owner and/or Motor Vehicle
Registration No. SJD 2356X in respect of the above mentioned accident. I also
hereby authorize that the agreed settlement sum (cost of repair, loss of use, earnings and rental,
Survey report fee, LTA fee & GIA report fee) be made in favour of my representative, M/s
Chunni Motor Work Pte Ltd and that the said payment be forwarded to them as full and final
discharge of my claim.

Dated : 06.04.2017

Signature : 
(Company's chop if necessary)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 9036Y (Insd veh)	Model: Mercedes E220 (2143cc)
	SH 6177S (TP veh)	
Date of Accident/ Time:	09/03/2017	

Repair Estimate	: \$	170,687.25	
Final Repair Cost (w/GST)	: \$	42,425.50	
Loss of Use	: \$	---	days at \$ per day
Rental (if any)	: \$	3,957.84	23days at \$172.08per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	46,383.34	

Payee Name : Chunni Motor Work Pte Ltd

Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)
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]

CHUNNI MOTOR WORK PTE LTD
Blk 10 Ang Mo Kio Industrial Park 2A
#03-19 AMK Autopoint
Singapore 568047
Tel: 6542 7162 Fax: 6542 6039
(Co. Reg. No. 200923110D)

Signature of workshop representative / Workshop stamp

Name of Representative: Chen Yang Feng
Date: -5 OCT 2020



Signature of Witness / Workshop stamp (if applicable)

Name of Witness: William
Date: -5 OCT 2020

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:
Date:

"The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document."

CHUNNI MOTOR WORK
PTE LTD

TAX INVOICE

MOHAMED SAFIE BIN KALIL APT BLK 423 YISHUN AVENUE 11 #03-536 SINGAPORE 760423	VEHICLE NO	DATE
	SHD 7178 J	30.12.2017
	MAKE	INVOICE NO
	HYUNDAI	7443
	MODEL	ACC DATE/TIME
	I40	06.04.2017 @ 20:30 HRS

Cost of Repair \$ 39,500.00

Sub-total \$ 39,500.00

Add : 7 % - GST \$ 2,765.00

Total \$ 42,265.00

(SINGAPORE DOLLARS: FORTY TWO THOUSAND TWO HUNDRED AND
SIXTY FIVE ONLY)



Our Ref: CT17040251

Date: 11 April 2017



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 06/04/2017 @ 20:30 hrs
ALONG TPE(SLE) B4 EXIT 5
INVOLVING SJD2356X, SHB9797U, SJK1846T, RM5228, SHA8352G,
SLL2783E

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHD7178J** (the "Taxi"). The Taxi was hired to **MOHAMED SAFIE BIN KALIL IC NO S6941156H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.00** per day (inclusive of GST).

Please be advised that the Taxi was insured with **First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Executive, Fleet Safety

This is a computer generated letter. No signature is required.

SHD 7178J

[illegible]



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

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-17-049719

Date of Request: 07/04/2017

Your Ref No: Online Purchase

Soon Hock Motor Pte Ltd
Blk 10 Ang Mo Kio Industrial Park 2A
#01-05/06 AMK Autopoint
Singapore 568047

Dear Sir/Madam,

Enquiry Date 07/04/2017

Enquiry By Chris Lim

TP Vehicle No. SJD2356X

Accident Date 06/04/2017

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJD2356X	AXA Insurance Pte Ltd	16/01/2017-15/01/2018	6338 7288

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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Your Ref No: Online Purchase

Soon Hock Motor Pte Ltd
Blk 10 Ang Mo Kio Industrial Park 2A
#01-05/06 AMK Autopoint
Singapore 568047

Dear Sir/Madam,

Enquiry Date 07/04/2017

Enquiry By Chris Lim

TP Vehicle No. SJD2356X

Accident Date 06/04/2017

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

Thank You.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque