Your Ref: SJT2716G Our Ref: 150155/03

M/s Richards Car Rental Pte Ltd

Postal Address:

Blk 34 Sin Ming Drive

#01-114

Singapore 575708

Date: 05.10.2017

AXA Insurance Pte Ltd (LLC)
Motor Claims De9t
8 Shenton Way
#24-01 AXA Tower
Singapore 068811

Dear Sir/Madam

ACCIDENT INVOLVING YM3069T AND SJT2716G ALONG TPE ON 06.03.2015.

I am the owner of the m/vehicle $\ensuremath{YM3069T}$ in the above accident.

which was involved

========

My vehicle sustained damages as a result of the said accident and I am now claiming against you for the followings:-

Costs of repairs Loss of use of vehicle at \$140.0	٠.	• •	• •	• •	\$ 2	2,033.00
per day for 04 day(s) (REFER DS Police documents/Search fees	CAR	RENTAI	٠.(ــ		\$ \$	560.00
Surveyor report fee						
•			Tot	al:	\$ 2	2,595.00

Please advise whether you are prepared to settle my claim as outlined above. As I have yet to settle my repair bill with my repairers, I hereby authorise my repairers and/or their representatives to negotiate/compromise settlement of above claim on my behalf.

Looking forward to hear from you soon.

Yours faithfully

encl.

Letter of Authorization

To Whom	m It May Concern				
Accident	t on 06th March 2015	involving	YM3069T and	SJT2716G	
Along_	TPE		4 m Maryan Marian (1984) -		
I/We	Richards Car Rental Pte				
	Blk 34 Sin Ming Drive #0	1-108 S(575708)		
owner of	f Motor Vehicle Registration	NoYM30697	_		insured by
	ISURANCE (INTERNATION				
do hereb	by authorize M/s K. Kim	Hin Auto Pte Lt	d		as my/our
behalf ag	ntative with full authority to a gainst the owner and for drived to the above mentioned ac	er of Motor Veh			
iii i vear	a to allo do o o montonoa ac-	old Skit			
	Iso consent to the agreed sett				
	K. Kim Hin Auto Pte Ltd				and the said
	at be forwarded to them to be	construct as ful	i sha mai disch	arge of Inyrodi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Owner'	Signature & Company Stan	np			
	05.10.2017				
	Date				



Vehicle No:

AXA THIRD PARTY DIRECT SETTLEMENT

SJT 2716G (Insd veh)

		YM 3069	9T(TP veh)	Model: Mits	subishi l	FE83PE (3908cc)
Date of Accident/ Time:		06/03/2015		1			
Repair Es	timate	:\$	***************************************				
Final Rep	air Cost	:\$					
Loss of U	se	:\$		**************************************		days at \$	per day
Rental (if	any)	:\$				days at \$	per day
LTA / GIA	Search Fee	:\$					
Others:		:\$					
		:\$					
Final Sett	tlement Sum (Global Sum)	1,250.00)				
Payee Na	ame : K Kim Hin Auto						
Is Third P	arty Workshop GIA Registere	d? [X] YES	[] NO	(Kindly indicate	below)		
۹)	For Non GIA Registered	d Workshop:	Agreed	Liability	(%)		
3)	For GIA Registered Wo	rkshop:	BOLA A	oplicable : Ye s/ N	o BOLA So	cenario No: N	IIL
	BOLA Liability:	(%)	Assesse	d Liability (*):	50	_(%)	
	* Assessed Liability to b	e filled only for chain o	collisions and f	or cases where B	OLA does n	ot apply.	
Remarks:							
				Part of the Control o			

NOTE:

- 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.
- 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.

We confirmed the time 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: DANA ICHONG

Date:

29.9.2020

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: MARGARET

Date:

29.9.2000

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

Date: 29/09/2020



CO. REG. NO: 199402370D GST NO: M2-0123250-3

TAX CLAIM INVOICE

金興(襲)汽車私人有限公司

新民通道(大牌34座)門牌114號

Blk 34 Sin Ming Drive, #01-114, Singapore 575708.

Tel: 6452 7018 (5 Lines) Fax: 6454 9575

Email: service@kkimhin.com.sg

Accident Date : 06-Mar-2015

Date: 05-Oct-2017

No: 121731

Our Ref: 150155 / ANGIE

PAGE : 1

RICHARDS CAR RENTAL PTE LTD C/O AXA INSURANCE PRIVATE LIMITED 8 SHENTON WAY #24-01 AXA TOWER Singapore 068811

FINAL REPAIR BILL FOR MITSUBISHI FE83PEOSRDEA (2006) YM3069T

To supply spare parts

To remove, cut out damaged parts, panel beating, welding, align, refix and to renew affected parts.

To putty and respray on affected portions.

To focus taillamps. To check rear wiring and lighting operation.

To remove rear wooden carriage & renew affect part in order to facilitate repairing works.

1,900.00

Add 7% GST:

133.00

Total:

s\$ 2,033.00

Singapore Dollars Two Thousand and Thirty Three Only

DS CAR RENTAL PTE LTD

Vehicle No.

Blk 1 Sin Ming Industrial Estate Sector C #01-119 Singapore 575636

Tel: 6452 7793 Fax: 6454 9575

RENTAL AGREEMENT

Make / Model

No: DS 10537

Co. Reg. No.: 201400889N

	YM-6043	T ISMM LORRY	Date:
HIRER'S PART	TCULARS	CHAR	eds.
Name : CLIANT	UM CLEAN!		\$ cts
		(L Day(s) @ S\$ / (40.	
Address : LTD		Week(s) @ S\$	
		Month(s) @ S\$	
	steam!		
		Insurance	
Telephone (Home) :		Additional Rental Payable	
(Office) :		Surcharge of Fuel	
H/Phone:		333338931.433	
NRIC or Passport No :		Total	\$60 00
Nationality :		Less Deposit (Cash / Cheque No.	
Date of Birth :	Age :	Balance Payable / Refundable	<u> </u>
Driving Licence No :	Expires :	Refund Received (Cash / Cheque No	
Type : Local / Int'l	Issued :		
Driving Experience :	135404	Note: 1) Hirer is liable for all violations.	ii parking tines and traffic
DITTING Experience .	THE STATE OF THE S	— Violations.	
		Excess - In the event	of any accident, the Hirer i
DRIVER'S PAR	FICULARS		<u> 3000 '00</u>) plus loss o
(If different from			aged vehicle is being repaired
. MA VO	4 61	- $(574n)$ $(52u)$	\sim
Address :	MANAGEMENT AND	3) Young Inexperience	d or Aged driver, additiona
Address :		excess of (S\$ 350	<u>ੇ ੴ</u>) will apply.
		I/We declare that the above part	iculars are true and correct in
The last of the la	THUS TO THE STATE OF THE STATE	every respect and I/We have re	ad and understood the term
Telephone (Home) :		and conditions of the Hire Agree	ement printed overleaf.
(Office):	w 3 /2	In Twindseen da	in \$160 it 304
H/Phone: 33cl	2211	Just - com to and Just	
NRIC or Passport No :		(3)	
Nationality :		12/20/20/20	La San Carlo
Date of Birth :	Age :	Stamp & Signation Stare	Signature of Driver
Driving Licence No :	Expires :		(If different from Hirer)
Type : Local / Int'l	Issued :		_
Driving Experience :	·	Date	Date
Date Out 18 - 3 - 15		Date In 71 03 7018	
Time Out	AM / PM	Time In 4 2)	AM/PM)
Mileage at Delivery / Pick-up		Mileage on Returning	1 141/
Fuel Level at Delivery / Pick-up	E 1/4 1/2 3/4 F		1/4 1/2 3/4 F
Surcharge of Fuel will be at S\$	per 1/4 tank	Tao on rectaining D	74 74 F
			· · · · · · · · · · · · · · · · · · ·
Remarks:	not holders	(2x /1) Mr Wo (2) / 6(loved - dave v.
- No Anvers La	100 37 100	all latter de la la	

2/11: 230(0



RECORDS MANAGEMENT CENTRE

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-15-021331

Date of Request:

06/03/2015

Your Ref No:

Online Purchase

K Kim Hin Auto Pte Ltd Blk 34, #01-114 Sin Ming Drive Singapore 575708

Dear Sir/Madam,

Enquiry Date

06/03/2015

Enquiry By

Jane

TP Vehicle No.

SJT2716G

Accident Date

06/03/2015

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

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



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

Our Ref: CC6/AXA15004834/Kse3 Policy Number: P1440118

27th May 2015

TAN SZE HUI BLK 541 WOODLANDS DRIVE 16 #09-49 SINGAPORE 730541

ATTN: LOH CHEE GUAN

Dear Sir/Madam,

ACCIDENT INVOLVING SJT 2716G AND YM 3069T ON 06/03/2015

We refer to the above accident where we are acting for AXA Insurance Singapore Pte Ltd (AXA) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

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.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Accordingly your No Claim Discount (NCD - if applicable) may not be preserved.

Please call us if you have further queries.

Yours faithfully,

Kenneth Tan Case Handler DID: 6841 2132

DID: 6841 2132 FAX: 6741 4108

Email: vicalpeh@lkkauto.com

c.c. AXA Insurance Singapore Pte Ltd (AXA) (Motor Claims Dept)