

INS. CASE OWNER:

Vale

CC 4 / AXA17022379 / 423

LKK:

IDAC:

## ASSIGNMENT

Surveyor:

DOI:

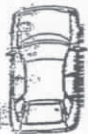
Date / Time:

23/11/17

Registered in Merimen:

23/11/17

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHC 5849A

Claim No.:

Name of Insured:

TRANS-CAB SERVICES PTE LTD

Policy No.:

P1680520

Insured Tel No.:

HP:

Make / Model:

RENAULT LATITUDE - 2.0 L (A)

Excess Sec II :S\$

5,000.00

D.O.A.:

21/11/17

Place of Accident:

TAMPINES AVENUE 2

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: ANG SAY BENG

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

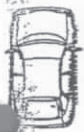
Driver Tel No.: 9048 0749

(V/L YES / NO)

Insured Liability: %

Final ? Yes / No

SLN 1796P



INSRS:

WSP: Premium Auto

Tel:

Liability: ARC

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

STAGE

DATE / PIC

SLN 1796P - X

SHC 5849A - CC3/FCI15021291/KubC2 DOA: 14/04/17

- CC3/II160007925/Ky6302 DOA: 27/04/17

- CS/TP13001129/Kun DOA: 21/04/17

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

27/11/17 (V.C)

27/11/17

FIVE REVIEWED. CONFLICTING VERSIONS.  
CUTTING LAMP. BOTH REPORTED THE OTHER  
CAR CUT LAMP. SEND BULK TO OI TO  
NOTIFY TP CLAIM.

BULK LIABILITY UNCLARIFIED.

27/09/18

NO TOPUP FROM TP.  
NO SURVEY DONE.  
BULK TO AXA TO TRIP. CLOS  
CASE.

04-10-18 TO CANCEL FILE NO SURVEY.

PRELIMINARY ADVICE Date/Time:

Sent By:

Post-Repair Photos:

Others:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

CONFLICTING VERSIONS

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(\$

x

days)

Loss of Income (LOI):

S\$

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

CANCELLED  
"NO SURVEY"  
TP INACTIVITY



## Status of Driving Licence

<b>Licence No. :</b>	S1743914F
<b>Status of Driving Licence :</b>	Valid
<b>Class of Driving Licence :</b>	3
<b>Expiry Date :</b>	Valid for life unless revoked, suspended or disqualified.

The above information is accurate as at 23/11/2017 12:01 AM.



## Vic (LKKAUTO)

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**From:** Vic (LKKAUTO)  
**Sent:** Monday, 27 November, 2017 11:31 AM  
**To:** claims@transcab.com.sg  
**Cc:** Carrine Leong; icewong@ava-ins.com; ireneng@ava-ins.com; foonghon@ava-ins.com; Admin A; Vic (LKKAUTO)  
**Subject:** YOUR REF : P1680520 (SHC 5849A)\_ACCIDENT INVOLVING SHC 5849A & SLN 1796P ALONG TAMPINES AVENUE 2 ON 21/11/2017



Auto  
Consultants  
Pte Ltd

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

27 November 2017

Transcab Taxi  
Singapore

Dear Sir/Madam,

**OUR REF : CC4/AXA17022379/ha3**

**YOUR REF : P1680520 (SHC 5849A)**

**ACCIDENT INVOLVING SHC 5849A & SLN 1796P ALONG TAMPINES AVENUE 2 ON 21/11/2017**

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 Pte Ltd to deal with the third party claim against your policy.

We have received a claim from PREMIUM AUTOMOBILES PTE LTD acting on behalf of the owner of SLN 1796P against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that this is a conflicting version unless proven otherwise. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of **\$5,000.00** attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

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 AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following **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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) / [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com) or deliver it by hand to our Customer Care Centre.

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 authorized driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we 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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or [cst@axa.com.sg](mailto:cst@axa.com.sg) / [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com). Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

**Vic Alpeh** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-2096 | email: [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com) | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



*Save the Earth. Print only when necessary.*

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## Print Sent Message

This mail is associated with :

**\*SLN1796P (C0464034)**

**[SHC5849A]**

TP

TAY KOK PEOW

Nov 21 2017 6:00PM

[TRANS-CAB SERVICES PTE LTD]

Premium Automobiles Pte Ltd

**From** LKK Auto Consultants Pte Ltd (LKK\_HQ), sent on 27/09/2018 08:32 AM.  
**To** AXA\_SG; jas.tan@axa.com.sg  
**CC** vicalpeh@lkkauto.com  
**Subject** Re: PLEASE UPLOAD IA AND ADVISE STATUS AND GET BACK TO HANDLER JAS.

Dear Sir / Madam,

We refer to the below email.

Please be informed that TP repairer did not arrange for survey until now.

In view of no further development, we will proceed to temporary close the file. If any new development in future, we will keep you informed for an update and follow up the matter accordingly.

Please note that no survey done and we will close our file herein without billing to your good office.

Kindly assist to cancel / close case in Merimen.

Thank you.

Best Regards,

**Mei Kwan** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

<-- Original Message -->

From: AXA\_SG

To: LKK\_HQ; sur@lkkauto.com; assignments@lkkauto.com

CC: AXA\_SG

Sent On: 26/09/2018 09:27 PM

Subject: PLEASE UPLOAD IA AND ADVISE STATUS AND GET BACK TO HANDLER JAS.



AXA INSURANCE PTE LTD  
8 Shenton Way, #24-01 AXA Tower  
Singapore 068813  
Customer Centre #01-01  
☎ (65) 6840 4888  
☎ (65) 6338 2522  
🌐 www.axa.com.sg  
GST Reg No.: 190903512M  
Co. Reg No.: 190903512M