				0	
155000	Flossie	A fism	1-10	TI OLD () LKK	
INS. CASE OWNER:	105516	CC 4/AXA1702	1644 1	IDAC:	
	- LSM	ASSIGNM		/	7
Surrentore	Tantith		11/17	Date / Time : %	1/17
Surveyor:				Registered in Merimen:	aum
Pre-assign / CCU /	FTE			3308	
Tre-ussign/ ecce/		5897		6460884 8=	FMOUGHUJ -
Insured Vehicle No.	500		Claim No.		
Name of Insured	LHRISTOPH	ER VAVIO MOORE	Policy No.	: CPATP	1950504
D_Q	-	HP: 01019049	Make / Model	VOLKSWAY	uen
Insured Tel No.		-HP:		722-1-5	RIVER VALLEY K
Excess Sec II :S\$		D.O.A: 27 11 17	Place of Accid		FIRM RD
Is driver the owner?	(YES / NO)	Nature of Accident :		^	_
If NO. Driver Nam	e / Age :		OI GIA REPO	RT: YES / NO ; TP GIA REPO	RT YES/NO
Driver Tel N	lo. :	(V/L; YES/NO)	Insured Liabili	ty: % Final? Y	es / No
CF DY	UD .	10			
CF OX					
INSRS:	INSRS		INSRS:	INSE	
WSP: WSP	WSP:	***	WSP: Tel:	WSP Tel:	
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RMKS:	RMKS	1W -W	RMKS:	RMF	CS:
MT Secret					
Date/Time	70 3-4/1D - 11U	UPERTURAL UPIA DITE	15/11/14	STAGE	DATE/PIC
6 17 13	xp 3-24/10 - If al	CP4TV (SIII) MPIN		Non-Reporting ltr (1st):	
11-5	8 1 45873 - X			Non-Reporting ltr (2nd):	
Uti	6-1-10-11	TRACTO IN COSE FE	ult used	Non-Reporting ltr (Final): Notification ltr (if non-pickup):	
07122017		intactable. FILES RE		Call OI: 7 04/2	Laz (th
@ S. 33pm.	YCHICK . SCHOLE	yed lane and collided	Call W	After call ltr to Ol:	7 (1112.
93.334/11.				Documentation Check List: 41	andler Typist
2703208:	FIF you to type	mondate report.		Notification ltr (if non-pickup)	
1	110		- WID-0	After call ltr to OI:	~
		RECEIVED	4 / Man 4	Anthorisation To Act:	
				Release Voucher:	
YE:				Final Repair Bill:	
				Car Rental Invoice:	
- DE	CEIVED 8 9 J	111 2018		Towing Invoice LTA / GIA :	
K	CLIVED			Medical Bill:	Y
				PIR:	
				Mandate/Reject Instruction:	~
				LOD	
	22	-1-1		Payment Breakdown Form:	
PRELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos:	
177		4.175		Others:	
FINALIZATION	Dute/Time:	Confirm with:		Confirm by: MTH	
Repair Cost: 45	\$52,400 (3 days) Reduction: St	G _B		Cull
FINAL SETTLEMENT	Date/Time:3.1-18	Confirm with Rese		Email Call	
Final Liability:		/ Assessed) BOLA S/N No.: 5		If NO or B 28, Ass. Lia:	and counted
Repair Cost: 01451	TOTAL CONTRACTOR OF THE PARTY O	0.900.047		(010 Changed land	2 OUCA CTILIONED
Loss of Rental (LOR):	S\$ - (Sum	days)	111/111	toller to	
Los of Use (LOU):	SS 450 (D (S 150 x SS (S x	3 days) days)	0/10/1/14	TINE WEIGHT	
Loss of Income (LOI):		OR + LOI [Tick only one]		A YIN	
GiA/LTA Search	SS5-35				
Medical:	ss - /			1) Claim status: Normal/Rejec	ct/Private Settle
Di-bursement:	SS =	(e.g. Tow/ Independent)	2) Report Format: 17	
Leggi Cost	SS -			3) Survey fee: +>50	/
Count:	\$\$3,03835	Global Sum S\$:		Email Call	
FINAL PAYMENT	Date/Time: 3-7-18	Confirm with: RENE	Dur. mil	Eman Cant	
Payer 1:	\$\$3,003.55	Name 1: YEW AND SERVICE	PIE LIP		
Payob 2: (Strike if N.A.)	SS	Name 2:	/		
Payon 3: (Strike if N.A.)	SS	Name 3:			

Preli. Report Days Of Repair:

| Preli. Report Resurvey No. of Trip: Suite Fire
| Catalina TarRature of Suite Face | Site Insc. | Site

Vfix Auto Service Pte Ltd



Tenfilm 97495749." WP' 30/11/12@1020



Vfix Auto Service Pte Ltd

60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 Email: vfixauto@gmail.com Tel: 64489268 Fax: 64452368

M/S AXA INS (S'PORE) PTE LTD 8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811

ESTIMATE

DATE

: 28/11/2017

ACC DATE

: 27/11/2017

REF NO.

: VFIX-TP20170375

POLICY NO

GRAND TOTAL

Attention: Motor Claim Department

RE: VEHICLE NO XD7299D IVECO TRAKKER

DESCRIPTION		AMOUNT		
		FRONT BUMPER LH K×		1,456.00
2	1	FRONT BUMPER END GARNISH LH de		230.00
3	1	STEP BOARD PLATE CENTER LH out		1,127.00
		STEP BOARD PLATE LOWER LH dis		725.00
5	1	STEP BOARD PLATE HOLDER LOWER LH 64		285.00
			S	3,823.00

	LABOUR & MISCELLANEOUS:	AMOUNT SS
1	To remove damaged parts with all necessary components/attachments apply hot-works where necessary straighten, repair member replace new parts refit align into position with all necessary components attachmets	\$500,800.00
2	To spray paint replaced/repaired body panels inclusive of preparatory works and painting materials	400 600.00
		\$ 1,400.00

SINGAPORE DOLLARS: FIVE THOUSAND TWO HUNDRED & TWENTY THREE ONLY

Vfix Auto Service Pte Ltd



LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before after spray painting
- To display damaged part(s) during resurvey
- · Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- · Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

un 97495749

: \$

5,223.00



MANDATE REQUEST FOR S7M004UJ

Type

Question

Message

Liability: Insured change lane and collided with TP. Spoken to insured and he aware that his NCD is affected and AXA to settle at best. Settlement: Repair Cost: \$2,568.00 (w/GST) Loss of Use: \$450.00 (3days x \$150) LTA: \$5.35 Total: \$3,023.35 Revised Immediate Advice with Mandate uploaded for your easy referance. Please kindly let us have your approval / instruction if any. Thank you - Asher Sng (31/05/2018)

Beply



Re:MANDATE REQUEST FOR S7M004UJ

Type

6 Information

Message

Please proceed

Reply

Our Ref. No.: VFIX-TP20170375

Vtix Auto Service Pte Ltd 60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 Email: vfixauto@gmail.com Teb 64489268 Fax: 64452368 Co Reg . No: 201602964H GST Reg No: 201602964H

MOTOR CLAIMS DEPT AXA INSURANCE (S'PORE) PTE LTD

8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811

WITHOUT PREJUDICE

Dear Sir / Madam

PROPERTY CLAIM ONLY

ACCIDENT INVOLVING XD7299D AND SKJ4589J ON 27 NOV 2017 ALONG RIVER VALLEY ROAD

We refer to the above-mentioned accident.

We are writing on behalf of M/S ALTIVO CIVIL ENGINEERING AND CONSTRUCTION PTE LTD the registered owner of motor vehicle number XD7299D which was involved in the above accident.

We are instructed that the above accident was 'caused by the negligence and management of your insured's vehicle number SKJ4589J . As a result of the above accident, our client's vehicle was damaged and our client's has been put to loss and expense, particulars of which are as follows:

	LTA Fees		5.35 3,023.35
2	Loss of Use	(3 days X \$ 150.00) :S\$	450.00
1	Cost of Repair	(L/40-1400) . :S\$	2,568.00

We enclosed a list of the supporting documents :-

- (a) Original Final Repair Bill
- (b) LTA Tax Invoice
- (c) GIA / Police Report lodged by Our Client
- (d) Letter of Authority

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Any settlement reached is strictly without prejudice to and shall not affect any other claims arising from this accident. Settlement is solely for the items claimed only.

Yours Faithfully,

VFIX AUTO SERVICE PTE LTD





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

13 DECEMBER 2017

CHRISTOPHER DAVID MOORE 5 CANTERBURY ROAD SINGAPORE 119800

Dear Sir/Madam,

OUR REF : CC4/AXA17022654/T1kb3

YOUR REF : SKJ 4589J

ACCIDENT INVOLVING SKJ 4589J AND XD 7299D ALONG JUNCTION OF RIVER

VALLEY ROAD ON 27.11.2017

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 M/s VFIX AUTO SERVICE PTE LTD, acting on behalf of the owner of XD 7299D against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided to the Third Party vehicle XD 7299D while changing lane. As such, liability is down against us.

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 full co-operation in the handling of the claim is required and kindly submit the following to Zaini@lkkauto.com within 10 days from the date of this letter if not provided at AXA's 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)



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

 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 6256 3561 or email us at Zaini@lkkauto.com.

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

Yours sincerely,

Zaini

Case Handler DID: 6841 2132 FAX: 6741 4108

Email: Zaini@lkkauto.com

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

8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811

Dear Sir / Madam,

Claimant:

ACCIDENT INVOLVING XD 72995 AND SKI 45891 ON 27 11 17 AT

I/We, ALTIVO CIVIL ENG & CONSTRUCTION P. L. , am/are the registered owner of motor car no. KD 73995

Please be informed that I have assigned all compensation monies due to me/us in the above accident to VFIX AUTO SERVICE PTE LTD.

I/We hereby authorized you to release all monies pertaining to the above mentioned accident to VFIX AUTO SERVICE PTE LTD and forward the settlement cheque to VFIX AUTO SERVICE PTE LTD whom I/we have authorized to collect the said compensation monies.

Thank you,

Signature of Claimant &

Company Stamp if applicable

1800: SO130581 K

Date: 19 01 18

Signature of Witness

IC no.: SISSFES]

Date: 19/1/18





CLAIM REF

: 57M004UJ

INSURED

: CHRISTOPHER DAVID MOORE

DISCHARGE VOUCHER

We/I [ALTIVO CIVIL ENGRG AND CONST. P/L, NRIC NO. 20130581K] hereby agree to accept the sum of dollars [THREE THOUSAND TWENTY THREE AND CENTS THIRTY FIVE ONLY.] [SS3,023.35] paid to us/me by AXA INSURANCE PTE LTD as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said AXA INSURANCE PTE LTD or their insured or the driver of motor vehicle no. [SKJ 4589J] as a result of an accident along [RIVER VALLEY ROAD] on [27/11/2017] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. [XD 7299D].

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said insurer, owner and/or driver of vehicle no. [SKJ 4589J] in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify AXA INSURANCE PTE LTD against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. [SKJ 4589]].

JUL OH Dated this day of 2018 Claimant's Signature 0130581K NRIC no./ Company Stamp Occupation/ Business S(347.493) FOR-DO Address KALLANG HAY AR FONG TOT BLDG 6294 8828 Telephone No. Lena DOWNIE Witness's Name Witness's Signature 4175118FFF2 Witness's NRIC No.

AXA Insurance Pte Ltd (Company Reg. No. 199903512M) 8 Shenton Wey, 424-01 AXA Tower, Singapore 068811 Customer Centre #81-01

Ter: +65 6880 4888 Firs: +65 6338 2522 Website: www.ava.com.sg

*** This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim on a later date.

Further, the settlement terms herein shall not be used as evidence to prejudice the claimant's personal injuries claim and/or other uninsured losses claim arising out of the subject matter in this action.



50 Kaki Bukit Ave 6 Ark≅KB Singapore 417892 Email: vfixauta®gmal.com Tel: 64489268 Fax: 64452368 Co Reg : No: 201602964H GST Reg Na: 201602964H

FINAL REPAIR BILL

AXA INSURANCE (S'PORE) PTE LTD

8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811 DATE : 19/01/2018 VEHICLE NO : XD7299D

MAKE/MODEL : IVECO TRAKKER

ACC DATE : 27/11/2017

CLAIM NO : 3

: VFIX-TP20170375

POLICY NO

AMOUNT S\$

LUMP SUM REPAIR COST

Repair Amount 2,400.00 7% GST 168.00

Total 2,568.00

SINGAPORE DOLLARS: TWO THOUSAND FIVE HUNDRED & SIXTY EIGHT ONLY

VFIX AUTO SERVICE PTE LTD

Kelvin Poh



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

APPCT DX

Print Date/Time :

27 Nov 2017 / 16:22:49

Receipt Date/Time:

27 Nov 2017 / 16:22:42

Tax Invoice/Receipt

Receipt No.: ITNET-00000-171127-001574

Previous Receipt No. :

	na i radelbi i i di				
S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at a	of Insurance Enquiry - SKJ4589J 27 Nov 2017/09:00:00 noe Co: AXA INSURANCE PTE LTD Insurance Enquiry - SKJ4589J			(54)	(00)
	Enquiry Fee 20171127162149661361		5.00	0.35	5.35
		Sub-Total	5.00	0.35	5,35
		Total Before Rounding	5.00	0.35	5.35
		Rounding Difference			0.00
		Total Amount Payable			5.35
		Paid By			
		хооохиххоохих8539	Credit Caro /MasterC		5.35
		Total			5.35
		Cash Change			0.00
		Tendered Amount			5.35
		Excess Refundable Amount			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.

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SKJ 4589J (Insd veh)		Model:	TPVD IVECO TRAKKER	
	XD 7299D (T	P veh)		12.9	
Date of Accident:	27/11/2017			1	
Global Sum Settlen	nent : [] Yes] [X] No		
Repair Estimate		: \$	5,588.61		
Final Repair Cost		: \$	2,568.00		
Loss of Use		:\$	450.00	3days at \$150.00 per day	
Rental (if any)		: \$		days	
LTA / GIA Search F	ee	: \$	5.35		
Others:		: \$	0.00		
		\$			
Final Settlement Su	m	: \$	3,023.35		
ls Third Party Wor pelow)	kshop GIA Registered	? [] YES [X] NO (Kindly indicate	
A) For Non GIA R	egistered Workshop:		Agreed Liability	(%)	
B) For GIA Regist	tered Workshop:		BOLA Applicable	e: Yes/ No BOLA Scenario No:	
BOLA Liability:	(%)		Assessed Liabili	ty (*):(%)	
* Assessed Lia	bility to be filled only for	chain co	llisions and for c	ases where BOLA does not apply.	
Remarks					
Payment Instruction	n: Payee's Breakdowr	1			
) VFIX AUTO SE	RVICE PTE LTD		: \$	3,023.3	
IOABINE I	EE KHANG MIN		10/07/2019		
	onsultants Pte Ltd	17	10/07/2018 Date		

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)