

INSURANCE

INS. CASE OWNER:

CC 4 ASM / AXA1800

LKK:

IDAC:

Surgeon:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE:



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

Excess Sec II :\$:

Is driver the owner?

If NO, Driver Name / Age:

Driver Tel No.:

Nature of Accident:

(V/L: YES/NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

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

Insured Liability: % Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call (y):

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:

16-1-18 @ 2:39 OI DISPUTED LIABILITY.
DISPUTED EVEN AT 50%.
HE WILL ASK HIS
LAWYERS TO CALL US.

19-1-18 @ 1:18 W/OI HE DISPUTED LIABILITY
NO EVIDENCE ON HIS SIDE
50:50 HE WILL DISCUSS
WITH HIS FAMILY.

13-5-18 @ 4:15 NO ANSWER.

CONFLICTING. PEND. EVIDENCE.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

\$:

(\$ days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

(Agreed / Assessed)

BOLA S/N No.:

Repair Cost:

\$:

(\$ days)

120

Loss of Rental (LOR):

\$:

(\$ x days)

120

Loss of Use (LOU):

\$:

(\$ x days)

120

Loss of Income (LOI):

\$:

(\$ x days)

120

LOR only

LOU only

LOR + LOU

LOR + LOI

Tick one, use

GIA/LTA Search

\$:

2. x 6

Medical:

\$:

-

Disbursement:

\$:

-

(e.g. Tow/ Independent)

Legal Cost:

\$:

-

Total:

\$:

6,989.74

Global Sum \$: 6,985

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$:

6,985. x 4

Name 1:

CITY AUTO PTE LTD

Payee 2: (Strike if N.A.)

\$:

x

Name 2:

x

Payee 3: (Strike if N.A.)

\$:

x

Name 3:

x



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD		Ref : CC4/ASM18000854/jb3		
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date : 15-01-2018		
		Code : ASM		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGX 4368D	Veh. Inspected	SLE 2938M	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	15/01/2018	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
4. Description of Damages				
5. General Information				
Accident Date	05/01/2018	Inspection Date		
Survey held at	CITY AUTO PTE LTD BLK 8, SIN MING IND. ESTATE #01-60/62 SIN MING ROAD SINGAPORE 575643.			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel: 9823 9898
Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

AXA INSURANCE SINGAPORE PTE LTD

NO. 8
SHENTON WAY
AXA TOWER
Singapore 068811

*Not authorized
1. B.1 16/1/2018 &?
5 days*

Estimate : QUOT201801-000133(00)

Date : 06/01/2018

Vehicle No. : SLE2938M

Make/Model : TOYOTA HARRIER PREMIUM 2.0 A

Mileage (km) : 0

Chassis No. : ZSU600075513

Accident Date : 0 /01/2018 00:00:00

Claim No. : SGX4368D

Reference : SLE2938M

Policy No. : 5082204710-01

S/No	Particular	Quantity	Unit Price	Amount S\$
LIST ITEMS :				
1	Front bumper	1	1,650.40	1,650.40 ✓
2	Front fender - LH	1	1,322.70	1,322.70 ✓
3	Front fender innershield	1	614.73	614.73 ✓
4	Front door - LH	1	1,677.80	1,677.80 ✓
5	Front door chrome - LH	1	184.90	184.90 ✓
6	Clip	10	3.79	37.90 ✓
7	Wheel rim	1	2,157.80	2,157.80 ✓
8	Wheel bearing with hup	1	727.40	727.40 ✓
9	Door hinges	2	78.90	157.80 ✓
10	Rocker panel garnish	1	872.03	872.03 ✓
List Total :				9,403.46
30% Discount S\$				2,821.04
				6,582.42
LABOUR :				
	Computerized wheel alignment	1	60.00	60.00 ✓
	To remove and install door glass and mechanism	1	120.00	120.00 ✓
	To change wheel bearing	1	80.00	80.00 ✓
	To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts	1	650.00	650.00 ✓
	Spray painting on affected & replace parts	1	900.00	900.00 ✓
LABOUR Total S\$:				1,810.00

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

Total S\$: 8,392.42

GST 7% S\$: 587.47

Amount Due S\$: 8,979.89

Acknowledged by Repairer
Signature
Date

for CITY AUTO PTE LTD



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

*We have not authorized repairs. VIDEO SHOWED TP VEHICLE
WITHIN LANE. INSURED VEHICLE CUT LANE.*

Mandate:

Liability(TP)	100%	
Proposed repair cost	\$ 6,387.74	GST
Loss of use	\$ -	
Loss of rental	\$ 600.00	\$120 x 5 days
Loss of income	\$ -	
LTA search fees	\$ 2.00	
Others	\$ -	
Proposed Total	\$ 6,989.74	



Re:MANDATE IA

Type

🔗 Question

Message

Hi LKK, please proceed as per mandate IA. Thank you.

Reply



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 21/11/2018

Survey Details:

Date of loss	05.01.18
Date of appointment	15.01.18
Date of survey	22.01.18
Location of survey	CITY AULP PTE LTD

Vehicle Details:

Claim Type:	Third party
Vehicle number	SLE 2938M
Make and Model	TOYOTA HARRIER 1986CC
Date of registration	01.07.2016
Excess	
Market Value	
Part Rebate	
Nett Loss	

Repair details:

Initial Estimate	\$ 8,392.42
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Proposed/Revised repair cost:

Parts	\$ 4,689.85
Check items (estimate)	\$ -
Labour	\$ 1,280.00
Total	\$ 5,969.85
Lump Sum(if applicable)	

Number of days for repair	5
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CITY AUTO PTE LTD

One Stop Automotive Solutions
BLK 8, SIN MING IND. ESTATE, #01-80/82, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel: 9823 9898
Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Your ref: SGX4368D
Our ref: SLE2938M

14/09/2018

WITHOUT PREJUDICE

Attn: Motor Claim Dept

AXA INSURANCE SINGAPORE PTE LTD

NO. 8
SHENTON WAY
AXA TOWER
SINGAPORE 068811

Dear Sir/Mdm,

Accident involving SLE2938M and SGX4368D on 03/09/2018

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Repair tax invoice
- Letter of authorization
- GIA search receipt

As instructed, we are claiming the following as stated below:-

Cost of Repair	:	S\$ 6,387.74
Rental (5 Days x \$120.00)	:	S\$ 600.00
LTA Search Fee	:	S\$ 2.00
		<u>S\$ 6,989.74</u>

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to hear from you soonest.

Thanks & regards

Veronica Law (Claim dept.)
Tel: 6453 1235
Fax: 6453 7944
Email: cityauto@singnet.com.sg

Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Friday, 19 January 2018 1:33 PM
To: 'victorsmh@hotmail.com'
Subject: ACCIDENT INVOLVING SGX 4368D AND SLE 2938M ALONG BISHAN ST 22 ON 05/01/2018

SIM YU XIONG VITTERS

Policy Holder

Dear Sir,

OUR REF : CC4/ASM18000854/jb3
YOUR REF : SGX 4368D

ACCIDENT INVOLVING SGX 4368D AND SLE 2938M ALONG BISHAN ST 22 ON 05/01/2018

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 M/s City Auto Pte Ltd acting on behalf of the owner of SLE 2938M against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that liability may be shared equally in case of no conclusive evidence from both parties giving conflicting versions. 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 joyirene@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 6749 5792 or email us at joyirene@lkkauto.com.

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

Best Regards,

Joy Irene | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6749-5792 | email: joyirene@lkkauto.com | Fax: 6741-4108

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

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CITY AUTO PTE LTD

BLK 8, SIN MING IND. ESTATE, #01-80/82, SIN MING ROAD, SINGAPORE 575843.
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel: 6823 8888
Co. Reg. No.: 198503435C GST Reg. No.: M2-8920979-4

RE: LETTER OF AUTHORIZATION

Name of owner: YIP PUI CHEE NRIC: S1352556J

Address: APT BLK 238 BISHAW STREET 22 # 10-222 SINGAPORE 570238

Name of Driver: YIP PUI CHEE NRIC: S1352556J

Address: APT BLK 238 BISHAW STREET 22 # 10-222 SINGAPORE 570238

Accident on 05/01/2012 Involving SERX 4362 D abd SLE 2932M

At/along JUNCTION BETWEEN BISHAW ST 22 AND MARY MOUNT RD

In consideration of City Auto Pte Ltd, repair my/our Motor Vehicle TOYOTA HARRIER at my/our request I/We the above owner of Motor Vehicle No: SLE 2932M do authorize them to demand claims, settle and received whatever amount payable by the Insurance Co or Third Party or to commence legal proceeding if necessary in my/our name for the cost or repair and the loss of use/rental, etc and to any of there appointed solicitors to act for me/us in respect of the said accident/claim and all amounts claimed or settled shall be belong to them absolutely. I/We further authorize them to give an absolute discharge on my/our behalf.

I/We hereby authorize City Auto Pte Ltd, my/our repairer to give further instruction on my/our behalf concerning the said claim and such, all future correspondence should be addressed to the said firm/co.

My/Our repairer authorize to receive on my/our behalf monies claims, correspondence and give a valid discharge voucher or any other documents in connection with this on my/our behalf and for me/us.

I/We further agree to fully co-operate and attend all court hearing that are necessary and subject to prosecution and claim maintained by City Auto Pte Ltd.

I/We further agree to undertake to indemnify them against my/our claim for the cost which arises therewith.

In the event that my/our unsuccessful claim, I/We undertake to pay the repairer for the cost of repairs to my motor vehicle.

Owner Signature: 

Name: _____

Date: _____

WITNESS SIGNATURE: CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-80/82 Sin Ming 1st
Singapore 575843
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)

Name: _____

Date: _____



redefining / insurance

CLAIM REF : S8M006QQ
INSURED : SIM YU XIONG VITTERS

DISCHARGE VOUCHER

We/I YIP PUI CHEE NRIC NO. S1352556J hereby agree to accept the sum of dollars [SIX THOUSAND NINE HUNDRED EIGHTY FIVE.] (\$6,985.00) 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. [SGX 4368D] as a result of an accident along [BISHAN ST. 22] on [05/01/2018] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ Insurer of motor vehicle no. [SLE 2938M].

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. [SGX 4368D] 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. [SGX 4368D]

Dated this 17th day of DECEMBER 2018

Claimant's Signature : YIP PUI CHEE
NRIC no./ Company Stamp : NRIC NO. S1352556J

Occupation/ Business : _____
Address : _____
Telephone No. : _____

Witness's Name : CITY AUTO PTE LTD
: Blk 8 Sin Ming Road
: #01-58/60/62 Sin Ming Ind Est
: Singapore 575643
: Tel: 6453 1235 Fax: 6453 7944
: (Claims Section)

Witness's Signature : _____
Witness's NRIC No. : _____



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643

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AXA INSURANCE SINGAPORE PTE LTD

NO. 8

SHENTON WAY

AXA TOWER

SINGAPORE 068811

Contact : 6338 7288

Fax No. : 6880 4838

TAX INVOICE

Tax Invoice : I2018-006481

Date : 13/09/2018

Vehicle No. : SLE2938M

Make / Model : TOYOTA HARRIER PREMIUM 2.0
A

Mileage (km) : 33378

Chassis No. : ZSU600075513

Accident Date : 05/01/2018

Claim No. : SGX4368D

Reference : JO201801-0164

Policy No. : 5082204710-01

S/No.	Particular	Quantity	Unit Price	Amount
			S\$	S\$
LIST ITEMS :				
1	Front fender - LH	1.0	1,322.70	1,322.70
2	Front door - LH	1.0	1,677.80	1,677.80
3	Front door chrome - LH	1.0	184.90	184.90
4	Clip	10.0	3.79	37.90
5	Wheel rim	1.0	2,157.80	2,157.80
6	Rocker panel garnish	1.0	872.01	872.01
List Total :				6,253.11
25% Discount S\$:				1,563.26
				4,689.85
LABOUR :				
Computerized wheel alignment			60.00	60.00
To remove and install door glass and mechanism			60.00	60.00
To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts			500.00	500.00
Spray painting on affected & replace parts			660.00	660.00
LABOUR Total S\$:				1,280.00

Total S\$: 5,969.85

GST @ 7% S\$: 417.89

Grand Total S\$: 6,387.74

CASH / NETS / CREDIT CARD PAYMENT ONLY

Customer's Signature/Co. Stamp

for CITY AUTO PTE LTD

Please note all works performed by City Auto Pte Ltd as performed in this invoice is subjected to the following Warranty conditions:

1) Any replacement of electrical components will carry 1 month warranty period from date of this invoice.

2) Any replacement of mechanical components will carry 3 months warranty period.

Please note that all warranty does not cover wear and tear conditions regardless of any components.




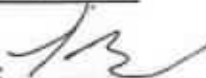
City Auto Pte Ltd reserves the right to determine any warranty conditions.

Thank You For Your Business !

CITY LEASE PTE LTD

VEHICLE RENTAL AGREEMENT

Our ref: SLE2938M

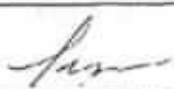
HIRER'S PARTICULAR Name(as in I/C): <u>YIP Pui CHEE</u> NRIC / Passport No.: <u>S125256T</u> Address: <u>SLE 278 S. J. HAN ST 22</u> <u>#10-222 S57022D</u> Name & Address of Employer: _____ Occupation: _____ Driving Exp.: _____ Driving Licence No.: _____ (Local / International) Pass Date: _____ Date Of Birth: _____ Tel: (O) _____ (R) _____ (HP) _____		Veh No.: <u>SLT 29644</u> Replace Veh No.: _____ Mileage Out: _____ Mileage Out: _____ Make & Model <u>Toyota Altis</u> Make & Model _____ Auto / Manual _____ Auto / Manual _____ Out Date: <u>22/01/2018</u> Out Date: _____ Out Time: <u>09:15 AM</u> Out Time: _____										
ADDITIONAL DRIVER'S PARTICULARS Name(as in I/C): _____ NRIC / Passport No.: _____ Address: _____ Pass Date: _____ Date Of Birth: _____ Tel: (O) _____ (R) _____ (HP) _____		RENTAL CHARGES Daily <u>05</u> @ \$ <u>120.00</u> 600 00 Weekly @ \$ _____ Monthly @ \$ _____ Hours @ \$ _____ Others @ \$ _____ Delivery / Pick-up Service _____ Extension _____ Misc. _____ Total \$ <u>600.00</u>										
Accessories Check <table border="1"> <tr> <td>Ashtray</td> <td>Cig Lighter</td> <td>S / Tyre</td> </tr> <tr> <td>STD Tools</td> <td>Jack</td> <td>Hub Caps</td> </tr> <tr> <td>Radio</td> <td>CD Changer</td> <td>S / Rim</td> </tr> </table>		Ashtray	Cig Lighter	S / Tyre	STD Tools	Jack	Hub Caps	Radio	CD Changer	S / Rim	Refundable Deposit: _____ Out  in  Hirer is responsible for the first \$ _____ excess for collision / damage to first party. (i.e.) CITY LEASE PTE LTD. Vehicle (Including Windscreen) and also first \$ _____ excess for collision / damage to third party's vehicle for each and every accident / damage. Hirer's Signature:  Driver's Signature: 	
Ashtray	Cig Lighter	S / Tyre										
STD Tools	Jack	Hub Caps										
Radio	CD Changer	S / Rim										

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

IMPORTANT

- Only person above 25 years of age with more than 2 years driving experience, authorized, licensed and signing this agreement may drive the vehicle.
- Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company CITY LEASE PTE LTD.
- In the event of an accident, the HIRER or AUTHORIZED DRIVER:
 - shall report all accidents involving the said vehicle to the company CITY LEASE PTE LTD immediately.
 - shall take immediate steps to complete and sign Form MAR 1 (Motor accident report form) and do all other acts required in compliance with the "Non-injury motor accident report scheme" (the form will be made available when the accident is reported to Company CITY LEASE PTE LTD).
 - shall report to the police within 24 hrs from the occurrence the following types of accident:
 - injury case
 - non-injury case involving a Government vehicle or damage to Government property
 - non-injury case involving a foreign vehicle (to obtain their motor insurance policy, passport no, name of driver, vehicle no, reg card, and fiscal information)
 - non-injury case involving a pedestrian or cyclist

RETURN OF VEHICLE - THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN SIGNATURE OF HIRER/DRIVER, DURING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CITY LEASE PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	DEPOSIT REFUND	SIGNATURE OF HIRER / DRIVER
27/01/2018	09:15 AM					



CITY LEASE PTE LTD

Blk 160 Sin Ming Ind Est #05-01 S575722

ROC: 201120461H

INVOICE

Name: **Yip Pui Chee**
Address: **Blk 238 Bishan St 22**
#10-222 Singapore 570238

Vehicle No.: **SLT 2964 H**
Invoice No.: **2017-000196**
Date: **28-Jan-18**

ITEM	DESCRIPTION	AMOUNT
1	Rental Charge from 22 Jan 2018 to 27 Jan 2018 Number of 05 Days at \$120 per day	\$ 600.00
TOTAL:		\$ 600.00

SINGAPORE DOLLARS:

Six Hundred Only

For Payment by Cheque

Please issue cheque payable to City Lease Pte Ltd or

For Internet Banking

Please transfer to OCBC (current Account) No.: 514767870001

City Lease Pte Ltd



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-18-002849

Date of Request: 05/01/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date: 05/01/2018

Enquiry By: Jason Quak Leng Hui

TP Vehicle No: SGX4368D

Accident Date: 05/01/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGX4368D	AXA Insurance Pte Ltd	23/08/2017-23/08/2018	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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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

TAX INVOICE

Our Ref No: GR-18-002849

Date of Request: 05/01/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date 05/01/2018

Enquiry By Jason Quak Leng Hui

TP Vehicle No. SGX4368D

Accident Date 05/01/2018

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:

☒ GIRO ☐ Cash ☐ Cheque

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SGX 4368D (Insd veh)	Model:	TOYOTA HARRIER (A)
	SLE 2938M (TP veh)		
Date of Accident:	05/01/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Repair Estimate	:	\$		8,979.89
Final Repair Cost	:	\$		6,387.74
Loss of Use	:	\$		days at \$0.00 per day
Rental (if any)	:	\$		600.00 5 days
LTA / GIA Search Fee	:	\$		2.00

Others:	:	\$	0.00
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	:	\$	
Final Settlement Sum (GLOBAL SUM)	:	\$	6,985.00

Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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 _____ _____			

Payment Instruction: Payee's Breakdown			
1)	CITY AUTO PTE LTD	:	\$ 6,985.00

JOANNE LEE KHANG MIN
LKK Auto Consultants Pte Ltd

28/12/2018
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))



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM18000854/Kjb3q2

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811
ATTN: RICHARD ANG

Date : 28-12-2018



Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGX 4368D	Veh. Inspected	SLE 2938M
Policy No.	GA260190/1	Coverage (\$)	0.00
Claim No.	S8M006QQ	Excess (\$)	0.00
Assign From		Assign Date	15/01/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA HARRIER (A)	c.c	1986
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	ZSU600075513	Colour	METALLIC BLACK
Odometer	33377	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	235/55 R18	BRIDGESTONE	6 mm
L/H Front Tyre	235/55 R18	BRIDGESTONE	6 mm
R/H Rear Tyre	235/55 R18	BRIDGESTONE	7 mm
L/H Rear Tyre	235/55 R18	BRIDGESTONE	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT BODY. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	05/01/2018	Inspection Date	22/01/2018
Survey held at	CITY AUTO PTE LTD BLK 8, SIN MING IND. ESTATE #01-60/62 SIN MING ROAD SINGAPORE 575643.		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLE 2938M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER (CONSISTENT)	TO REPAIR SEE LABOUR	1,650.40	-
1	FRONT FENDER -LH (CONSISTENT)	BENT	1,322.70	1,322.70
1	FRONT FENDER INNERSHIELD (CONSISTENT)	NOT NECESSARY	614.73	-
1	FRONT DOOR -LH (CONSISTENT)	BENT	1,677.80	1,677.80
1	FRONT DOOR CHROME -LH (CONSISTENT)	CRACKED	184.90	184.90
10	CLIP @\$3.79 (CONSISTENT)	NECESSARY	37.90	37.90
1	WHEEL RIM (CONSISTENT)	DENTED	2,157.80	2,157.80
1	WHEEL BEARING WITH HUP (CONSISTENT)	SERVICEABLE	727.40	-
2	DOOR HINGES @\$78.90 (CONSISTENT)	NOT NECESSARY	157.80	-
1	ROCKER PANEL GARNISH (CONSISTENT)	DENTED / CUT	872.03	872.03
	LESS 30% DISCOUNT		-2,821.04	-
	LESS 25% DISCOUNT		-	-1,563.28
			6,582.42	4,689.85
	LABOUR			
	COMPUTERIZED WHEEL ALIGNMENT.		60.00	60.00
	TO REMOVE AND INSTALL DOOR GLASS AND MECHANISM .		120.00	60.00
	TO CHANGE WHEEL BEARING.	NOT NECESSARY	80.00	-
	TO KNOCK JACKOUT DAMAGED PARTS ,PANEL BEATING ,WELDING ,ALIGN ,REFIX AND TO RENEW ACCIDENT PARTS .INCLUSIVE OF THE REPAIR OF FRONT BUMPER .		650.00	500.00
	SPRAY PAINTING ON AFFECTED & REPLACE PARTS.		900.00	660.00
			1,810.00	1,280.00
	GRAND TOTAL		8,392.42	5,969.85
	RECOMMENDED COST OF REPAIRS			5,969.85

Report Ref No. CC4/ASM18000854/Kjb3q2

KSC

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Service Request Details

Claim	SJM00060Q
Reference	CC4/ASM10000854/KJB342
Loss Date	5 January 2018
Request Date	21 August 2018
Due Date	
Vendor Name	LKX AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Direct settlement

Actions

Next Step

Wait for Approve Invoice

Next Step

Vehicle Information	
Incident Vehicle Registration #	SLE292AM
Make	TPVD TOYOTA
Model	HARRIER
Service Address	
BUSHAN ST 22...	
Primary Contact/Insured	
SIM YU XIONG VITTERS	
24 SIN MING WALK, S75572, Singapore	
victoranh@hotmail.com	
Claim Handler	
ANG Richard	
richard.angbs@axa.com.sg	

Additional Instructions ARC - YES Please come back on liability

- Messages
- Invoices
- History
- Documents
- Assessment
- Metrics
- Notes

Document Type

Document SubType

+ Upload Documents

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
LKX Invoice 1 (2).pdf	Invoice	Surveyor/ Assessor expense	LKX AUTO CONSULTANTS PTE LTD (TP)	28 December 2018

