PRIMA FOUD PTELTO c/o Blk 7 Sin Ming Industrial Estate #01-76 Singapore 575642 Date: 12-01-2018 AXA INSURANCE SINGAPORE ME ETD MOTOR CLAIMS DEPT. 8 SHENTON WAY #137-01 AXA TOWER SINGAPOR = 068811

Dear Sir / Madam

accident.

ACCIDENT INVOLVING MOTO		1973 W & KADDAN & 24 PROST
ALONG CTE (TOWARDS	CITY, BEFORE PIE	\$100 .01. 2018
I / We, the owner of Vehicle No	GRA I SUT M	which was involved in the above

My / Our vehicle sustained damages as a result of the above said accident and I / we are now

- Costs of repair

  Loss-of-Use/Rental fees 16 Days (PRI)

  Ralice / GIA report / LTA fees

  2.00 1. 2.
- Police / GIA report / LTA fees
- Surveyor report fees 4.

claiming against you for the followings:-

- DAVER INJURY HONDLE BY LOWYER \$ 15,602.50 5. Others Total:

Please advise whether you are now prepare to settle my claims as outlined above.

I / We hereby authorise my / our repairers, M/s Alan's United Auto Pte. Ltd. and/or their representatives to negotiate/compromise settlement of my / our above claim on my / our behalf. If there is a settlement I / we further authorise you to pay whatever settlement sum to my / our repairers being the outstanding repair bill and incidentals due to them.

Your kind attention and prompt settlement is much appreciated.

Yours faithfully,



## LETTER OF AUTHORITY

GRA ISUAM SKA 9344 & SH 6 FORT
ACCIDENT INVOLVING
ALONG (TE CTOWARDS CITY, PEFORE PIE CHANGE EXIT)
ACCIDENT INVOLVING 6BA ISUAM, SKA 9344 & SH 6 FORZ  ALONG (TE CTOWHRDS (ITG, PSFORZ PIE CHANGI ZXIT)  ON 06.01, 2018 @ IFIF TRE
DY THE LETTER OF AUTHORITY I/We PRIMA FOOD PAR (7)
BY THE LETTER OF AUTHORITY, I/We, PRIMA FOOD DIE L'D  MRIC NO. 19900712 W  The owner of Vehicle No. GRA 1917 M  The owner of Vehicle No. 1918 Industrial Estate
Hereby irrevocably appoint Messrs Alan's United Auto Pte. Ltd. at Block 7, Sin Ming Industrial Estate,
Sector C, #01-76, Singapore 575642, and/or their representative to process the Third Party claim on my/our
behalf and to do all and/or any of the followings:-
1. To submit, negotiate/compromise and to resolve settlements of my/our above mentioned claim.
2. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to
be made by way of Cheque in favor of Alan's United Auto Pte. Ltd.
3. For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever as they deem
necessary for the purpose of settling my/our said claim.
I/We hereby declare that all the processing and documents done by virtue of this letter of authority on my/our behalf by my/our repairers or any person authorized by them shall be as good valid and effectual to all intends and purposes whatsoever as if the same had been done or executed by me/us in person.
I / We further confirm that the acceptance by Messrs Alan's United Auto Pte. Ltd. of the settlement amount constitute the full discharge of my/our claim(s) in respect of the above accident.
Signed on the (day) (month) (year)

Acknowledged by Owner

(company stamp if applicable)



#### **AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	SKA 934U (Insd veh)	Model: Toyota Hiace (2982cc)		
	GBA 1847M (TP veh)			
Date of Accident/ Time:	06/01/2018			
Repair Estimate	21,486.04			
Clark Daniel Cost				

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			NO	(Kindly i	ndicate	below)		
d Works	hop:		Agreed	Liability		(%)		
For GIA Registered Workshop: BOLA Liability: 100 (%)			BOLA Applicable: Yes/ Ne BOLA Scenario No: 28 Assessed Liability (*): 100 (%)					
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	: \$ : \$ : \$ : \$ : \$ : \$ : \$ : \$ : \$ : \$	: \$ : \$ : \$ : \$ : \$ : \$ : \$	:\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ 14,000.00  AUTO PTE LTD red? [] YES [X]  red Workshop:  **Torkshop:** **T	: \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$     : \$	: \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$   : \$	:\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ :\$ N) :\$ 14,000.00  AUTO PTE LTD red? [] YES [X] NO (Kindly indicate)  and Workshop: Agreed Liability	: \$   : \$	: \$   days at \$     : \$

#### 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 that we 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: Wound CNI Die

\

KSC

Signature of Witness / Workshop stamp (if applicable)
Name of Witness:

Date

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

Date:

## ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550 Company Reg. No.: 201113667N GST Reg. No.: 201113667N

No.: 15491

Date: 09-Feb-2018

PAGE: 1

Vehicle Insured: SKA934U

Accident Date : 06-Jan-2018

Our Ref : 218008 (AXA) / CHAN

PRIMA FOOD PTE LTD 201 KEPPEL ROAD LEVEL 2 ANNEXE BLOCK Singapore 099419

FINAL REPAIR COST FOR TOYOTA HIACE GBA1847M

To supply spare parts

To towing

To rewire damaged parts and refocus headlamp beam.

To remove & refix rear windscreen glass and conduct water leak test.

To remove roof lining, front and rear seats, trim board and carpet

To apply undersealing

To remove and renew exhaust silencer box

To putty and spray replaced parts

To remove, cut-out damaged parts, panel beating, welding, align, refix and to renew above parts

To dismantle and lower rear undercarriage

Con't Page 2 ...

# ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642. Tel: 6453 8686 (3 Lines) Fax: 6459 6550 Company Reg. No.: 201113667N GST Reg. No.: 201113667N

Vehicle Insured: SKA934U

Page: 2

To check and adjust wheel alignment

To remove & renew engine mounting

To supply and install tail gate inner fridge form board, apply silicon, sealant, both side panel silicon, floor panel aliummium plate

> 12,150.00 850.50

S\$13,000.50 Total:

Add 7% GST :

=========

Singapore Dollars Thirteen Thousand and Cents Fifty Only



### 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-18-003636

Date of Request:

08/01/2018

Your Ref No:

Online Purchase

Alan's United Auto Pte Ltd Blk 7 Sin Ming Industrial Estate #01-76

Singapore 575642

Dear Sir/Madam,

**Enquiry Date** 

08/01/2018

**Enquiry By** 

**CHOU HWEE TIAN** 

P Vehicle No.

SKA934U

Accident Date

06/01/2018

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:

[X] GIRO [] Cash [] Cheque



### **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-18-003636

Date of Request:

08/01/2018

Your Ref No:

Online Purchase

Alan's United Auto Pte Ltd Blk 7 Sin Ming Industrial Estate

#01-76

Singapore 575642

Dear Sir/Madam,

**Enquiry Date** 

08/01/2018

Enquiry By

CHOU HWEE TIAN

P Vehicle No.

SKA934U

**Accident Date** 

06/01/2018

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKA934U	AXA Insurance Pte Ltd	19/01/2017-18/01/2018	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.

This is a computer generated document and requires no signature.



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

25 JANUARY 2018

TAN CHEE WEE VICTOR 18 BURGUNDRY DRIVE SINGAPORE 658818

Dear Sir/Madam,

OUR REF : CC4/ASM18000874/Khb3

YOUR REF : SKA 934U

ACCIDENT INVOLVING SKA 934U AND GBA 1847M ALONG CTE TWDS CITY ON

06.01.2018

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

We have received a claim from ALAN'S UNITED AUTO PTE LTD, acting on behalf of the owner of GBA 1847M 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 GBA 1847M. 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 7 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 <a href="mailto:vicalpeh@lkkauto.com">vicalpeh@lkkauto.com</a> within 7 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 vicalpeh@lkkauto.com.

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

Yours sincerely,

Siti Jaafar

Case Handler DID: 6256 3561

FAX: 6741 4108

Email: vicalpeh@lkkauto.com

AXA Insurance Pte Ltd (AXA) C.C.

(Motor Claims Dept)