



Auto
Consultants
Pte Ltd

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

06 MARCH 2018

**SARAVANAN S/O SILVAMANI
BLK 515 SERANGOON NORTH AVE 4
#03-258
SINGAPORE 550515**

Dear Sir/Madam,

**OUR REF : CC4/ASM18001805/k1hb3
YOUR REF : YM 4743Z
ACCIDENT INVOLVING YM 4743Z / SHC 6750T/ OTHERS ON 25/01/2018**

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 M/s PREMIER AUTOMOTIVE SERVICES PTE LTD, acting on behalf of the owner of SHC 6750T against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

You are aware that your No-Claim Discount (NCD – if applicable) will be with held for the time being. Pending for final allocation of liability in settlement by our principal, AXA Insurance Pte Ltd.

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 vicalpeh@lkkauto.com 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)



Auto
Consultants
Pte Ltd

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

- 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 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,

Bevan Lim
Case Handler
DID: 6749 4274
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

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

This Settlement excludes any
bodily injuries arising out of the
above said accident and pertains
to property damage only

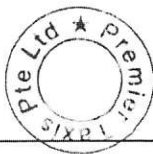
AUTHORIZATION TO ACT

I, PREMIER TAXIS PTE LTD (the third party claimant") of 23 CHANGI SOUTH AVENUE 2
#03-02 SINGAPORE 486443 (address), owner of SHC 6750T (vehicle no.) hereby authorize
PREMIER AUTOMOTIVE SERVICES PTE LTD ("the workshop") to act for me with respect
to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no SHC 6750T
that was damaged pursuant to the accident which occurred on 25/01/2018 (date) along
PIE/JURONG-BKE (AFTER ENG NEO EXIT) (location) involving vehicle no/s YM 4743Z
("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit
and the workshop is further authorized to receive payment further to settlement of my claim with
payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without
prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other
vehicle/s is concerned.

Dated this 20 (day) of 11 (month) 20 19. (year)



Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

LETTER OF AUTHORITY

To: Premier Taxis Pte Ltd
23 Changi South Avenue 2
#03-02
Singapore 486443

And

Premier Automotive Services Pte Ltd
23 Changi South Avenue 2
#01-02
Singapore 486443

ACCIDENT INVOLVING SHC6750T & YM4743Z & others


ON 25.01.2018 AT/ALONG PIE / JURONG - BKE

1. I, TEO TEEN CHOON, NRIC No. 812193299.

am the registered Hirer / Relief Driver of motor taxi No. SHC6750T at the time of the above accident.

2. Hereby you have my authority to:

- (a) send a letter of demand on my behalf;
- (b) negotiate a settlement on my behalf;
- (c) confirm a settlement / accept any offer on my behalf;
- (d) sign any Discharge Voucher (if necessary) on my behalf;
- (e) receive payment of the settlement sum / compensation monies on my behalf including to request that the cheque for the settlement sum be made payable to you.


Signature with NRIC No.

20.11.2018
Date

1219329/9
Name: TEO TEEN CHOON

BLK 436 ANG MO KIO AVENUE 10 HCH-1349 SINGAPORE 560436
Address

Contact No.: 97503963

Email: -



This Settlement excludes any bodily injuries arising out of the above said accident and pertains to property damage only

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	YM 4743Z	(Insd veh)	Model: KIA OPTIMA 1.7(A) DIESEL
	SHC 6750T	(TP veh)	
Date of Accident/ Time:	25/01/2018		

Repair Estimate	: \$	21,312.15	
Final Repair Cost	: \$		
Loss of Use Use <i>Token Sum</i>	: \$		14 days at \$ 40 per day
Rental (if any)	: \$		14 days at \$107.88 per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	16,700.00	
Payee Name : PREMIER AUTOMOTIVE SERVICES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:		Agreed Liability _____ (%)
B)	For GIA Registered Workshop:		BOLA Applicable: Yes/ no BOLA Scenario No: 28(b)(ii)
	BOLA Liability: 100 (%)		Assessed Liability (*): _____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			


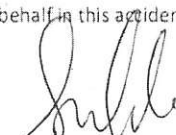

NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. 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: Date:	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: Date:
 Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date:	



02 February 2018

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Teo Teen Choon of NRIC Number S1219329G is a registered driver of SHC6750T. Teo Teen Choon is paying daily rental rate of \$107.88 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Chin Bee Lian".

Chin Bee Lian (Ms)
Assistant Vice President
Taxis Administration

Prepared By: SY

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 200304975H

REPLACEMENT VEH GIVEN YES / NO

VEH NO. _____

JOB NO. _____



CHECK IN / OUT VOUCHER

DRIVER'S NAME WONG TAM SENG (Relief)	
NRIC S25741850	HANDPHONE 92980458
TAXI REGN NO. SHC 67567	MAKE / MODEL KO2
DATE IN 250118 TIME IN 0008	DATE OUT 080318 TIME OUT 1620
KILOMETRES IN _____ FUEL IN <input type="checkbox"/> E <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> F	KILOMETRES OUT _____ FUEL OUT <input type="checkbox"/> E <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> F

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED IN TO WORKSHOP

D D M M Y Y H H M M

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION

D D M M Y Y H H M M

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN

Wong Tam Seng X
DRIVER'S NAME

[Signature] X
DRIVER'S SIGNATURE / DATE / TIME

[Signature]
CHECKED IN BY
(PREMIER'S AUTHORISED WORKSHOP)

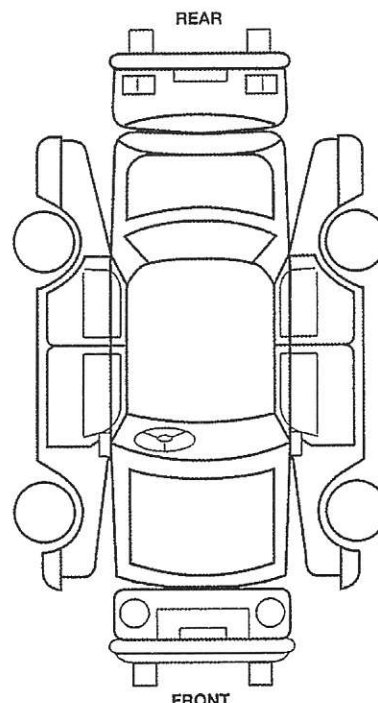
CHECK OUT

Teo Teen Choo X
DRIVER'S NAME

[Signature] X
DRIVER'S SIGNATURE / DATE / TIME

[Signature]
CHECKED OUT BY
(PREMIER'S AUTHORISED WORKSHOP)

INDICATE AREA OF DAMAGE HERE:



FRONT

BODY MARKINGS

- | | |
|---------------------|-------------|
| 1 - Light Dent | 5 - Damaged |
| 2 - Serious Dent | 6 - Chip |
| 3 - Light Scratch | 7 - Crack |
| 4 - Serious Scratch | 8 - Peeling |

SERVICE / REPAIRS DONE	DRIVER'S REMARKS
<input type="checkbox"/> SERVICING <input type="checkbox"/> OTHERS: <input type="checkbox"/> T / BELT <input type="checkbox"/> AIRCON SYSTEM <input checked="" type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT: <input type="checkbox"/> TURBO 250118 2035 <input type="checkbox"/> BRAKE SYSTEM <input type="checkbox"/> CLUTCH SYSTEM <input type="checkbox"/> BULB <input type="checkbox"/> UNDER CARRIAGE TP/W <input type="checkbox"/> CPF <input type="checkbox"/> BATTERY	- Hired - Teo Teen Choo - 9750 3963



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 26 Jan 2018 / 17:34:34

Receipt Date/Time : 26 Jan 2018 / 17:34:34

Tax Invoice/Receipt

Receipt No. : ITNET-00000-180126-001666

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - YM4743Z				
As at 25 Jan 2018/20:35:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - YM4743Z			
	Enquiry Fee	7.00	0.49	7.49
	20180126173209411854			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
Paid By				
	xxxxxxxxxxxx0416	Credit Card: Visa/MasterCard		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	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.