

From: Joy Irene (LKKAuto) [mailto:JoyIrene@lkkauto.com]
Sent: Wednesday, July 25, 2018 5:34 PM
To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: SNM18D00652C02/1/LKKDS & YR REF: SGY9997A (TP : LKK REF - CC6/CTI18002249/Akb3) on 01.02.2018

REF: SNM18D00652C02/1/LKKDS
LKK: CC6/CTI18002249/Ajb3

Dear Sirs,

This is a scenario whereby our insured driver reversed and hit parked TP vehicle.

Liability is down against us.

Insured agreed to settle and aware of NCD issue.

Summary of offer to repairer M/s LEANG AUTOMOTIVE is as follows:

	TP CLAIMED	OUR <u>REVISED</u> TO OFFER
Cost of Repairs	\$ 18,666.63 (per estimate)	\$ 6,400.00
Loss of Rental	\$ 1,000.00 (\$200 x 5 days)	\$ 900.00 (\$180 x 5 days)
TOTAL	\$ 19,666.63	\$ 7,300.00

750.00 (150 x 5)
7,150.00

- 5 days recommendation for repair .
- TP Vehicle : LEXUS NX200 1998CC YEAR 2017

Relevant supporting claim documents attached for your perusal and reference.

The above summary is subject for your approval.

Kindly advise.

Thank you.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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From: Joy Irene (LKKAuto)

Sent: Tuesday, 3 July 2018 11:11 AM

To: 'Claims Dept of CTI' <claimsdept@sg.cntaiping.com>; 'Angie Foo' <angie.foo@sg.cntaiping.com>

Cc: Admin A <admin-a@lkkauto.com>

Subject: REF: SNM18D00652C02/1/LKKDS & YR REF: SGY9997A (TP : LKK REF - CC6/CTI18002249/Akb3) on 01.02.2018

REF: SNM18D00652C02/1/LKKDS

Dear Sirs,

Attached marked estimate and preliminary advice for your reference and records.

Thank you.

Best Regards,

Joy Irene | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108

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

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From: Angie Foo [<mailto:angie.foo@sg.cntaiping.com>]

Sent: Wednesday, 7 February 2018 4:23 PM

To: Shu Pei (LKKAuto) <shupe@lkkauto.com>

Cc: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>; Hsiao Tong (LKKAuto) <chewht@lkkauto.com>; Zaini (LKK Auto) <Zaini@lkkauto.com>

Subject: OUR REF: SNM18D00652C02/1/LKKDS & YR REF: SGY9997A (TP : LKK REF - CC6/CTI18002249/Akb3) on 01.02.2018

Dear Shu Pei,

We refer to your email of 6th February 2018.

We attached our Insured's SAS Report and Assignment Letter for your necessary action.

Kindly take note, the claim handler is Chong Boon Sen 63896171.

Thank you.

Regards,

Angie Foo

Executive

Motor Division

Claims Department

China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road #16-00

Springleaf Tower

Singapore 079909

Co.Reg.No.200208384E

DID: 6389 6186
Fax: 6224 7478 /6224 7175
Email: angie.foo@sg.cntaiping.com
Email: claimsdept@sg.cntaiping.com
Website: www.sg.cntaiping.com

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From: Shu Pei (LKKAUTO) [<mailto:shupeil@lkkauto.com>]
Sent: Tuesday, 6 February, 2018 7:25 PM
To: Claims Dept of CTI
Cc: Chong Boon Sen; Admin A; Hsiao Tong (LKKAUTO); Zaini (LKK Auto)
Subject: Direct Settlement - Accident Involving YL7101L (OI : CAI - TBA) and SGY9997A (TP : LKK REF - CC6/CTI18002249/Akb3) on 01.02.2018

WITHOUT PREJUDICE

Dear Boon Sen,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SGY 9997A at M/s Leang Automotive.

Enclosed for your perusal is:
- TP GIA report

Please be informed that estimated cost of repair and preliminary advice is not ready yet.

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Hsiao Tong and she can be contacted at DID: 6742 3197.

Thank you

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

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LEANG AUTOMOTIVE

Auto Bay @ Kaki Bukit 1 Kaki Bukit Ave 6 #01-68 Singapore 417883
Tel: 6909 3048 Fax: 6909 3046

16.07.20018

Our ref: SGY 9997A

M/s CHINA TAIPING INSURANCE CO. (S) PTE LTD
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

Dear Sir,

ACCIDENT INVOLVING SGY 9997A AND YL 7101L ON 01.02.2018

We write in behalf of the owner of SGY 9997A to claim as follows:

1) COST OF REPAIRS	: \$6,400.00
2) LOSS OF RENTAL	: <u>\$1,000.00</u> ((\$200 x 5 days)
3) TOTAL	: \$ 7,400.00

We enclosed supporting documents as follows:

- 1) Letter of Authority;
- 2) Final Bill; and
- 3) Rental Receipt

We hope to receive our prompt response.

LEANG AUTOMOTIVE



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC6/CTI18002249/Akb3

12 FEBRUARY 2018

NAM HUP PRODUCTIONS PTE. LTD.
9 LINK ROAD
SINGAPORE 619031
ATTN: HR / MANAGEMENT

Dear Sir/Madam,

ACCIDENT INVOLVING YL 7101L AND SGY 9997A ON 01.02.2018

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Zaini
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: Zaini@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd
(Motor Claims Dept)*

Date: _____

To: M/s Leang Automotive
No. 1 Kaki Bukit Avenue 6
#01-68
Singapore 417883

LETTER OF AUTHORITY & INDEMNITY


I/We TAY SEOW TIAK NRIC No/ Co Registration No. S1822671E of (address) 30 LORONG KILANG (S) 598130
the registered owner (or his/her/their/agent) of motor vehicle registration no. 8449997A
hereby authorise M/s Leang Automotive ("the Repairer") to commence repairs to my/our
vehicle and to forward the claim for inter alia the costs of repairs to the owner/insured of the
Third Party responsible for the said accident on (date) 1-2-2018 involving motor vehicle
nos YL7101L along LINK RD PARKING LOT. I further authorise M/s
Leang Automotive to sign and execute all documents in my name including but not limited to
the Discharge Voucher in connection with the claim against the Third Party

However, if the third party rejects liability for whatever reasons and/or if the claim is
reverted to my/our insurers and my/our insurers do not settle the repair costs and
disbursements under my/our own insurance policy, I/we will be fully responsible for the
repair costs and disbursements.

I also agree that if I do not fully co-operate in the Third Party claim, I will be
responsible for any losses incurred by my Repairer.

My/our vehicle is repaired by the Repairer on my/our own free will and without any
threat, inducement and/or promise.

In the event that the Repairer is compelled to enforce this undertaking, I/we agree that
I/we shall pay for the legal costs incurred by the Repairer on a solicitor and client full
indemnity basis.



Signature/ Co. Stamp

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN307261700
Claimant : TAY SEOW TIAK

Claim No : SNM18D00652C02/1

Amount : S\$7,150.00

SINGAPORE DOLLARS SEVEN THOUSAND ONE HUNDRED FIFTY ONLY

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SGY 9997A
Insured Vehicle No. : YL7101L

Date of Loss : 01/02/2018
Place of Accident : LINK ROAD PARKING LOT

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : NAM HUP PRODUCTIONS PTE. LTD
Driver Name : TAY SOUW PHORN

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Repair Cost	S\$	6,400.00
(2) Loss of Rental	S\$	750.00

TOTAL	S\$	7,150.00
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Claimant Name : TAY SEOW TIAK NRIC No : 81822671ESignature : [Signature] Date : 30-07-2018

No. 1135

M/s _____

Vehicle Model: LEXUS LX200T

Date: 11-4-2018

Authorised Signature

For LEANG AUTOMOTIVE



DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1
SINGAPORE 798125
TEL: 6383 2661 FAX: 6484 2836
REG. NO. 430058/00D

No. 19163

Date, 7/2/18

OFFICIAL RECEIPT

Received from

the sum of Dollars

Tay Seow Tiale
One thousand only

being Payment Of

SFH3989P (2/2/18 - 7/2/18)

DAWN ENTERPRISES

\$

1000/-

Cash/Cheque No.



DAWN ENTERPRISES

21 Seletar West Farmway 1
Singapore 798125
Tel: 63832661 Fax: 64842836
Reg No.430058/00D

Nº 35299

RENTAL AGREEMENT

DATE 2/2/18

HIRER'S PARTICULARS

Name Tay Seow Tjak

Address 30 Lorong Kilad
5598130

I/C or Passport No. 1822671E Country _____

Occupation _____

Date of Birth _____ Age _____

Driving Licence No. _____ Date Passed _____

Tel: (HP) 94749889 (Residence) _____

DRIVER'S PARTICULARS

Name _____

Address _____

I/C or Passport No. _____ Country _____

Occupation _____

Date of Birth _____ Age _____

Driving Licence No. _____ Date Passed _____

Tel: (Office) _____ (Residence) _____

IMPORTANT NOTES:

- 1 No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
- 2 This vehicle is licenced to carry 04 passengers only.
- 3 Hirer is liable to pay first \$ 2000 as excess all claims any accident plus loss of earning while damaged vehicle is under repair.
- 4 For usage to Malaysia subject to higher excess all claims of S\$5,000.00 and different rental rate
- 5 Please notify our office should there be any accident involving this hired vehicle within 24 hrs
- 6 No refund will be given for vehicle returns early.
- 7 No refund will be given for petrol left in vehicle.
- 8 Hirer is liable to pay all parking fee and traffic summonses.
- 9 Vehicles to be return during office hour only.
- 10 No Service on Public Holiday and Sunday.

CHARGES

5 Day at \$ <u>200.00</u> per days	\$ <u>1000.00</u>
Day at \$ _____ per week	
Day at \$ _____ per month	
TOTAL AMOUNT	\$ <u>1000.00</u>
AMOUNT PAID	\$ <u>1000.00</u>
BALANCE DUE	
Days Extension From _____ To _____	
Amount Deposit (refundable) \$	

SCHEDULE

MODEL

SFH 3989P

T/Lorry

Date

Time

Mileage

2/2/18

2pm

7/2/18

FROM

2/2/18

TO

7/2/18

I/we have read and understood the terms and conditions above and hereby agreed to abide

Hirer's Signature

Driver/Gurantor's Signature

DAWN ENTERPRISES