

**Cecilia Chong (LKK Auto)**

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**From:** Cecilia Chong (LKK Auto)  
**Sent:** Wednesday, 25 September 2019 9:56 AM  
**To:** hayhaidir@gmail.com  
**Subject:** <STANDARD NOTIFICATION LETTER> Your ref: FBD 4017G (OUR REF: CC4/ASM18003532/Uga3) \*\*\* ACCIDENT INVOLVING FBD 4017G & SLJ 5792U ON 21/02/2018 \*\*\*

25 SEPTEMBER 2019

**MUHAMMAD HAIDIR BIN IBRAHIM**

Dear Sir/ Mdm

**OUR REF : CC4/ASM18003532/Uga3**  
**YOUR REF : FBD 4017G**  
**ACCIDENT INVOLVING FBD 4017G AND SLJ 5792U ALONG/AT YISHUN CENTRAL ON 21/02/2018**

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 **JIN AUTO SERVICES PTE LTD** acting on behalf of the owner of SLJ 5792U against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in our favour. 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 [ceciliachong@lkkauto.com](mailto:ceciliachong@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)
- Driver's Work Permit
- Employment Letter from your company
- Authorisation letter
- 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 4274 or email us at [ceciliachong@lkkauto.com](mailto:ceciliachong@lkkauto.com).

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

Best Regards,

Cecilia Chong | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6749-4274 | email: [CeciliaChong@lkkauto.com](mailto:CeciliaChong@lkkauto.com) | fax: 6741-4108

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

## LETTER OF AUTHORISATION

To: Jin Auto Services Pte Ltd

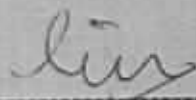
Dear Sir

SLJ5792U & FBD4017G( AXA) ON 21/2/2018 \*\*\* LKK REF: CC4/ASM18003532/Uga3

I/We, the owner of Vehicle Registration Number, SLJ5792U hereby authorise you to repair my/our vehicle repair, submit and settle my/our claim for cost of repair and/or uninsured losses arising from the above accident .

I/We further confirm that the acceptance by M/s Jin Auto Services Pte Ltd of the settlement amount in respect of such claim shall constitute the full discharge of my/our claim in respect of such loss and damage.

Signed by :



Name : Tan Siew Choo

Date: 28 NOV 19



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	F8040170	(Insd veh)	Model: HONDA CITY-1.5 SV CVT (A)
	SLJ8782V	(TP veh)	
Date of Accident/ Time:	21/02/2018		

Repair Estimate	\$	3,522.35	
Final Repair Cost (WOBT)	\$	1,128.50	
Loss of Use	\$	180.00	3 days at \$ 60.00 per day
Rental (if any)	\$	-	days at \$ per day
LTA / GIA Search Fee	\$	-	
Others:	\$	-	
	\$	-	
Final Settlement Sum	\$	1,308.50	

Payee Name: JIN AUTO SERVICES PTE LTD

Is Third Party Workshop GIA Registered? ☐ YES ☒ 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:

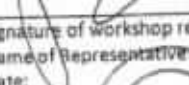

#### NOTE:


- 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.
- 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 for our client to act for and on their behalf in this accident.

Signature of workshop representative:   
Name of Representative:   
Date: 21/2/18

Signature of Witness / Workshop stamp (if applicable)  
Name of Witness:   
Date: 21/2/18

Signature of AXA's surveyor/representative:   
Name of AXA's surveyor/Representative: LKK  
Date: 21/2/18