



Auto  
Consultants  
Pte Ltd

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

8<sup>th</sup> May 2018

**D&H MULTIBUILD PTE LTD**

11 Woodlands Close,  
#03-17, Woodlands 11,  
Singapore 737853.

Attn: Ms April Cindy Jodi

Dear Sir/Madam,

**OUR REF : CC4/ASM18004277/Uja3**

**YOUR REF : SKA 9197X**

**ROAD TRAFFIC ACCIDENT INVOLVING SKA 9197X AND SJP 475K ALONG SLIP  
ROAD OF BUANGKOK ROAD TOWARDS SENG KANG EAST DRIVE ON 22.02.2018**

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 M/s CHIN MENG MOTORS, acting on behalf of the owner of SJP 475K against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided into the Third Party vehicle SJP 475K while moving out from slip road. 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 [vicalpeh@lkkauto.com](mailto: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)
- Statement and/or police report from independent witness(es) (if any)



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- 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 6841 2132 or email us at [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com).

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

Yours sincerely,

Poh Kin, Chong  
Case Handler  
DID: 6841 2132  
FAX: 6741 4108  
Email: [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com)

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

## AUTHORISATION TO ACT

I, WEE CHIN KEUNG ("the third party claimant") of B1K 67C  
Runggol Dr #05-766 S823677 (address), owner of SJP 475K (vehicle no.) hereby  
authorize Chin Meng Motors ("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. SJP 475K that was damaged pursuant to the accident which occurred on 22/2/18  
(date) along Sengkang East Dr (location) involving vehicle  
no/s SKA 9197X ("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.

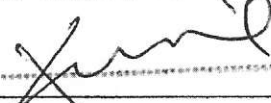
I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other  
vehicle/s is concerned.

Dated this 22 (day) of 02 (month) 2018 (year)



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

蔡明摩多  
CHIN MENG MOTORS



Signed by "the workshop"  
(with company stamp)



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKA 9197X	(Insd veh)	Model: MITSUBISHI LANCER
	SJP 475K	(TP veh)	
Date of Accident/ Time:	22/02/2018		

Repair Estimate	: \$		
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	2,650.00 (GLOBAL SUM)	
Payee Name : CHIN MENG MOTORS			
Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)	
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:

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/TORTEFEASOR 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:

QUEK KIM PUAY  
S7417796D

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

QUEK KIM SENG  
S8013338C

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

14/6/19

# 振明摩托 CHIN MENG MOTORS

1 Kaki Bukit Ave 6, #01-40 Autobay@Kaki Bukit, Singapore 417883  
Tel: 6747-4810 Fax: 6745-5018  
cmmotors@singnet.com.sg

Our Ref: CMM044/19/TP  
Your Ref: TP claim against SKA9197X

30-Mar-19

**AXA Insurance Singapore Pte Ltd**  
#01-01 GB Building  
Singapore 069542

**Attn: Motor Claims Department**

Dear Sir/Ms,

**Re: Final cost of repair to Mitsubishi Lancer no: SJP475K**

Date of accident: 22-02-2018

Total cost of repair and labour charge incurred for dismantling and replacement for parts of the above mentioned vehicle etc as recommended in nett as lump sum by surveyor.

Total lump sum: S\$ 2,500.00

Dollars: Two thousand and five hundred only.

振明摩托  
CHIN MENG MOTORS





Chin Mung

**DAWN ENTERPRISES**

21 Seletar West Farmway 1

Singapore 798125

Tel: 63832661 Fax: 64842836

Reg No.430058/00D

N<sup>o</sup> 35453**RENTAL AGREEMENT**

DATE

6/3/18

**HIRER'S PARTICULARS**Name WEE CHIN KEONGAddress 667C PUNJAB DR

# 03-766

I/C or Passport No. 57732655C Country \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Driving Licence No. \_\_\_\_\_ Date Passed \_\_\_\_\_

Tel: (HP) 9727244 (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 \$55,000.00 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.

**SCHEDULE****MODEL**SKF S3174T/ALH's

Date

Time

Mileage

6/3/1811.15 am**FROM**6/3/18**CHARGES**

4 Days at \$ 120/- per days

Day at \$ \_\_\_\_\_ per week

Day at \$ \_\_\_\_\_ per month

40/-

TOTAL AMOUNT

\$40/-

AMOUNT PAID

BALANCE DUE

Days Extension From \_\_\_\_\_ To \_\_\_\_\_

Amount Deposit (refundable) \$ \_\_\_\_\_

**TO**11/3/18

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



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 06 Mar 2018 / 10:59:00

Receipt Date/Time : 06 Mar 2018 / 10:59:00

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-180306-000759

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SKA9197X

As at 22 Feb 2018/16:00:00

Insurance Co: AXA INSURANCE PTE LTD

1 Insurance Enquiry - SKA9197X

Enquiry Fee

20180306105717989471

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

xxxxxxxxxxxx0994	Credit Card:	7.45
	Visa/MasterCard	

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,