



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Your Ref : SLV 8552 M

Our Ref : CIV1301703 / SLK 2566 X

Date : 11-03-19

AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way
#27-01 AXA Tower
Singapore 068811

RE : ACCIDENT INVOLVING **SLK 2566 X & SLV 8552 M**
ACCIDENT DATE **02-03-2018**
ACCIDENT ALONG **BUKIT TIMAH RD BEF SIXTH AVENUE MRT**

We are the workshop for the owner of motor vehicle no : SLK 2566 X which was involved in the captioned accident. The vehicle was surveyed by an independent appraiser and the claims below are based on its recommendation sum being for the repair cost and the period of repair (Strictly on a Without Prejudice Basis)

As the accident was caused by the negligent act of your insured SLV 8552 M we are submitting these claims for your consideration.

1	Cost of repair	S \$	24,214.29
2	Loss of rental <u>20</u> days @ \$ <u>79.95</u> / day	S \$	1,599.00
3	Surveyor Fee	S \$	0.00
4	GIA report fees (S\$ 15.00 for search fee & S\$ 14.00 for each report fee)	S \$	0.00
5	LTA Fee	S \$	7.45
		<u>S \$</u>	<u>25,820.74</u>

We enclosed herewith the following documents to support the claims:-

- a) Authorization letter
- b) Final repair bill(s)
- c) LTA search
- d) GIA report(s) / result
- e) Insurance certificate,etc.....

Kindly look into the matter and let us hear from you on the settlement of our client's claim as soon as possible. Thank you.

Yours faithfully

Carmen Lim
Claims Executive
Email : carmen@esteemperf.com.sg



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio Industrial Park 2, #01-259/01-251, Singapore 569536.

Tel : 6484 1221 Fax : 6484 7829

385 Sin Ming Drive (Inside Vicom) Singapore 575718.

Tel : 6753 2112 Fax : 6451 0394

Co. Reg No. : 200005485N GST Reg No. : 20-0005485-N

M/S : AXA INSURANCE SINGAPORE PTE LTD
8 Shenton Way
#27-01 AXA Tower
Singapore 068811

Claim No: CER1301319
Final No: CIV1301703
Date: 02 Mar 2019
Policy No: A29069766MKF
Veh Reg No: SLK2566X
Make/Model: TOYOTA PRIUS
HYBRID 1.8S
Chassis No: JTDKB3FU903539892
Engine No:
Reg. Date:

ATTN: Motor Claim Department

Your Ref No: SLV8552M
Claim Type: Third Party
Accident Date: 02/03/2018
TP Veh Reg No: SLV8552M

Tax Invoice to Vehicle No :SLK2566X

Description	Quantity	List Price	Amount
		S\$	S\$
Others			
1 COST OF REPAIR	1PCS	22,630.18	
		22,630.18	22,630.18
		Total	S\$ 22,630.18
		Add GST @ 7%	1,584.11
		Total Amount Payable	S\$ 24,214.29

TOTAL: SINGAPORE DOLLAR TWENTY FOUR THOUSAND TWO HUNDRED FOURTEEN AND CENTS TWENTY NINE ONLY

The above vehicle was surveyed by KENNETH on 07/03/2018

For Esteem Performance Pte Ltd



E. & O. E.

AUTHORISED SIGNATURE

CONFIDENTIAL
SCHEDULE TO VEHICLE RENTAL AGREEMENT

Date:	08/18/2017	Vehicle Rental Agreement No.	3792
Renter Details		Additional Driver (if any)	
<input checked="" type="checkbox"/> Name	Juraimi Bin Roosde	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Address	Blk 509 #05-78 Jelapang Road	<input checked="" type="checkbox"/> Address	
<input checked="" type="checkbox"/> Date of Birth	03/06/1964	<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> NRIC/Passport No.		<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Driving License No.	S1630497B	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> Telephone No.	6587427419	<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Mobile No.	6587427419	<input checked="" type="checkbox"/> Mobile No.	
Vehicle Description		Additional Driver (if any)	
<input checked="" type="checkbox"/> Vehicle No	SLK2566X	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Make/Model	TOYOTA Prius	<input checked="" type="checkbox"/> Address	
Rental Period		<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> Minimum Rental Period	272	<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Date Checked Out	08/18/2017	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> No. of Days	286	<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Expected Date of Return	05/17/2018	<input checked="" type="checkbox"/> Mobile No.	
<input checked="" type="checkbox"/> Actual Date of Return	05/31/2018		
Rental Charges* & Deposit			
<input checked="" type="checkbox"/> () RR Rental Charges/Day	Per day @ S \$84.00 Per week @ S \$588.00	Deposit Received	S \$1,500.00
<input checked="" type="checkbox"/> (X) ER Promotion Rental Charges/Day	Per day @ S \$79.95 Per week @ S \$559.65	Total Amount Received*	S \$20,411.7
<input checked="" type="checkbox"/> () DD Promotion Rental Charges/Day	Per day @ S Per week @ S	* Inclusive GST	
Rental Period	272 days / 39 weeks	Total Rental Charges	S \$25,145.84

Insurance Matters (Accident/Theft)			
Liability Assessment / Nature of incident	Non-Refundable Excess Payable by Renter		Rental Charge / Replacement Vehicle
	Renter or authorised driver(s) is 26 years of age or older	Renter or authorised driver(s) is below 26 years of age	
3 rd Party Fault	S\$2140	S\$5350	Rental Charges waived or replacement vehicle provided (subject to availability)
High Liability	S\$2140	S\$5350	No waiver of Rental Charges & no replacement vehicle provided
Own Damage (inclusive of Act of God incidents & accidents in Malaysia)	S\$2140	S\$5350	No waiver of Rental Charges & no replacement vehicle provided
Stolen Vehicle	S\$2140	S\$5350	Rental Charges waived or replacement vehicle provided (subject to availability)
Damage to Windscreen	S\$107	S\$107	No waiver of Rental Charges & no replacement vehicle provided

Payment Method			
<input checked="" type="checkbox"/> Driver Wallet		<input type="checkbox"/> Cash	SG\$
<input type="checkbox"/> Credit Card		<input type="checkbox"/> Debit Account	
Type		Bank Name	
Card No.		Account No.	

CONFIDENTIAL

I, the Renter, agree that the Lessor may collect, use & disclose my personal data, as provided in this Schedule &/or pursuant to the Agreement from time to time, for the following purposes in accordance with the Personal Data Protection Act 2012 & the Lessor's group Privacy Policy (available at www.grab.com/sg/privacy/):

- (a) administration of the vehicle rental under the Agreement;
- (b) for internal administrative purposes;
- (c) to communicate with me; &
- (d) for the Lessor to comply with its obligations under law.

Further, I understand that my personal data may be used for marketing purposes by the Lessor, its affiliated companies or their partners; & I hereby consent to receive marketing & promotional materials by telephone, SMS or e-mail.

Additional Notes:

Subject to Renter's fulfilment of Minimum Rental Period, Renter shall enjoy the following Discounts:

Agreement

The Renter has read, understood & agrees with all terms & conditions of this Agreement.



Renter's Signature/Stamp
Date:



Authorised Signatory/Stamp
Grab Rentals Pte Ltd



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

Print Date/Time : 05 Mar 2018 / 14:58:25

Receipt Date/Time : 05 Mar 2018 / 14:58:25

Tax Invoice/Receipt

Receipt No. : ITNET-00000-180305-001412

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 - SHB7583H As at 02 Mar 2018/19:20:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHB7583H Enquiry Fee 20180305145750306139	7.00	0.49	7.49
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				
	20180305145757975	Direct Debit: eNETS Debit (Internet Banking)		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.



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHB 7583H (Insd veh)	Model: TOYOTA PRIUS HYBRID(1798cc)
	SLK 2566X (TP veh)	
Date of Accident/ Time:	02/03/2018	

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 (Global Sum)	: \$	25,600.00	
Payee Name : ESTEEM PERFORMANCE 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: <u>28</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): <u>100</u> (%)	
* 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 of our client to act for and on their behalf in this accident.



Signature of workshop representative / Workshop stamp

Name of Representative: Carmen Lim
Date: 23-04-2020



Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Severice Chel
Date: 23-04-2020

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date:

"The contents of this document apply to vehicle damages only
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document"

Vic (LKKAuto)

From: Vic (LKKAuto)
Sent: Wednesday, 21 March, 2018 5:11 PM
To: claims@transcab.com.sg
Cc: carrisalee@ava-ins.com; icewong@ava-ins.com; ireneng@ava-ins.com; foonghon@ava-ins.com; Admin A; Vic (LKKAuto)
Subject: YOUR REF : P1680520 (SHB 7583H)_ACCIDENT INVOLVING SHB 7583H / SLK 2566X / OTHERS ALONG BUKIT TIMAH ROAD ON 02/03/2018



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

21 March 2018

Transcab Taxi
Singapore

Dear Sir/Madam,

OUR REF : CC4/AXA18004416/hs3
YOUR REF : P1680520 (SHB 7583H)
ACCIDENT INVOLVING SHB 7583H / SLK 2566X / OTHERS ALONG BUKIT TIMAH ROAD ON 02/03/2018

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 Esteem Performance Pte Ltd acting on behalf of the owner of SLK 2566X against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that liability is not to our favour. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of **S\$5,000.00** attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

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 AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following **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)
- 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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg / vicalpeh@lkkauto.com or deliver it by hand to our Customer Care Centre.

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 authorized driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we 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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or cst@axa.com.sg / vicalpeh@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

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



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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