



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643

TEL: 6453 1235, 6452 0850 FAX: 6453 7944

24hrs Towing Services Tel: 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Your ref: YN5450G

Our ref: GBE6193L

21/06/2018

WITHOUT PREJUDICE

Attn: Motor Claim Dept

AXA INSURANCE SINGAPORE PTE LTD

NO. 8

SHENTON WAY

AXA TOWER

SINGAPORE 068811

Dear Sir/Mdm,

Accident involving GBE6193L and YN5450G on 06/03/2018

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Repair tax invoice
- Letter of authorization
- GIA search receipt

As instructed, we are claiming the following as stated below:-

Cost of Repair	:	S\$ 6,309.58
Loss of use (6 Days x \$100.00)	:	S\$ 600.00
LTA Search Fee	:	S\$ 2.00
		<u>S\$ 6,911.58</u>

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to hear from you soonest.

Thanks & regards

Veronica Law (Claim dept.)

Tel: 6453 1235

Fax: 64537944

Email: cityauto@singnet.com.sg



Auto
Consultants
Pte Ltd

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

27 March 2018

YEW LEE HENG LP-GAS TRADING PTE LTD

15 DEFU LANE 1,
DEFU INDUSTRIAL PARK A,
SINGAPORE 539489,

Dear Sir/ Mdm

OUR REF : CC4/ASM18004845/Kwa3
YOUR REF : YN 5450G

ACCIDENT INVOLVING YN 5450G & GBE 6193L ALONG AMK AVE 1 ON 06/03/2018

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 City Auto Pte Ltd acting on behalf of the owner of GBE 6193L against your motor insurance policy.

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.

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 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 Vivianlau@lkkauto.com within 7 days **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



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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.

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 6841 8625 or email us at Vivianlau@lkkauto.com

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

Yours sincerely,

Vivian Lau
Case Handler
DID: 6841 8625
FAX: 6741 4108
EMAIL: Vivianlau@lkkauto.com

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



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Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

RE: LETTER OF AUTHORIZATION

Name of owner: TONG SHING CONTRACTORS PTE LTD NRIC: 197401925N

Address: _____

Name of Driver: TAY SENH LEE NRIC: 503867136

Address: 23 SPRINGLEAF LANE SINGAPORE 722068

Accident on 06/03/2018 Involving YN5450G and 9BE6193L

At/along ANG MO KIO ST 22 BEFORE BLK 276 - b 5226C

In consideration of City Auto Pte Ltd, repair my/our Motor Vehicle Mercedes-Benz at my/our request I/We the above owner of Motor Vehicle No: 9BE6193L do authorize them to demand claims, settle and received whatever amount payable by the Insurance Co or Third Party or to commence legal proceeding if necessary in my/our name for the cost or repair and the loss of use/rental, etc and to any of there appointed solicitors to act for me/us in respect of the said accident/claim and all amounts claimed or settled shall be belong to them absolutely. I/We further authorize them to give an absolute discharge on my/our behalf.

I/We hereby authorize City Auto Pte Ltd, my/our repairer to give further instruction on my/our behalf concerning the said claim and such, all future correspondence should be addressed to the said firm/co.

My/Our repairer authorize to receive on my/our behalf monies claims, correspondence and give a valid discharge voucher or any other documents in connection with this on my/our behalf and for me/us.

I/We further agree to fully co-operate and attend all court hearing that are necessary and subject to prosecution and claim maintained by City Auto Pte Ltd.

I/We further agree to undertake to indemnify them against my/our claim for the cost which arises therewith.

In the event that my/our unsuccessful claim, I/We undertake to pay the repairer for the cost of repairs to my motor vehicle.

Owner Signature: [Signature]

Name: Tong Shing Contractors Pte Ltd

Date: 19-03-2018

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)

Witness Signature: [Signature]

Name: _____

Date: 19-03-2018



redefining / insurance

CLAIM REF : S8M00A9A
INSURED : YEW LEE HENG LP-GAS TRADING PTE LTD

DISCHARGE VOUCHER

We/I TONG SHING CONTRACTORS PTE LTD hereby agree to accept the sum of dollars Six Thousand Seven Hundred Ninety One and Cents Fifty Eight Only (S\$ 6,791.58) paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. YN 5450G as a result of an accident along AMK AVE 1 on 06/03/2018 of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. GBE 6193L.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. YN 5450G in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. YN 5450G.

Dated this 05th day of DECEMBER 2018

Claimant's Signature : 
NRIC no./ Company Stamp : 
Occupation/ Business : _____
Address : _____
Telephone No. : _____
Witness's Name : CITY AUTO PTE LTD
Witness's Signature : Blk 8 Sin Ming Road
Witness's NRIC No. : #01-58/60/62/Sin Ming Ind Est
Singapore 1576643
Tel: 6453 1238 Fax: 6453 7944
(Claims Section)



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AXA INSURANCE SINGAPORE PTE LTD

NO. 8

SHENTON WAY

AXA TOWER

SINGAPORE 068811

Attention: Motor Claim Department

Contact : 64510622/96799407 Fax No. :

TAX INVOICE

Tax Invoice : I2018-004410

Date : 21/06/2018

Vehicle No. : GBE6193L

Make / Model : MERCEDES BENZ CITAN 108 CDI
PANEL VAN LONG MT 5DR

Mileage (km) : 0

Chassis No. : WDF4156032U161047

Accident Date : 06/03/2018

Claim No. : YN5450G

Reference : JO201803-0228

Policy No. : DMCV17S022447

S/No.	Particular	Quantity	Unit Price	Amount
			S\$	S\$
	LIST ITEMS :			
1	Front face panel	1.0	532.00	532.00
2	Front emblem	1.0	78.00	78.00
3	Front grille	1.0	327.00	327.00
4	Front grille emblem	1.0	87.00	87.00
5	Headlamp	2.0	452.00	904.00
6	Front bumper	1.0	1,684.00	1,684.00
7	Support panel	1.0	827.00	827.00
8	Radiator fan cowl	1.0	455.00	455.00
9	Clips	10.0	3.00	30.00
10	Front grille base	1.0	278.00	278.00
	List Total :			5,202.00
	10% Discount S\$:			520.20
				4,681.80
	SPECIAL NET :			
1	Number plate garnish	1.0	45.00	45.00
	SPECIAL NET Total S\$:			45.00
	LABOUR :			
	*To check and re-wiring		20.00	20.00
	- To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts		550.00	550.00
	- Spray painting on affected & replace parts		600.00	600.00
	LABOUR Total S\$:			1,170.00

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NO. 8

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AXA TOWER

SINGAPORE 068811

Attention: Motor Claim Department

Contact : 64510622/96799407 Fax No. :

TAX INVOICE

Tax Invoice : I2018-004410

Date : 21/06/2018

Vehicle No. : GBE6193L

Make / Model : MERCEDES BENZ CITAN 108 CDI
PANEL VAN LONG MT 5DR

Mileage (km) : 0

Chassis No. : WDF4156032U161047

Accident Date : 06/03/2018

Claim No. : YN5450G

Reference : JO201803-0228

Policy No. : DMCV17S022447

S/No.	Particular	Quantity	Unit Price	Amount
			S\$	S\$

Total S\$: 5,896.80

GST @ 7% S\$: 412.78

Grand Total S\$: 6,309.58

CASH / NETS / CREDIT CARD PAYMENT ONLY

Customer's Signature/Co. Stamp

for CITY AUTO PTE LTD

Please note all works performed by City Auto Pte Ltd as performed in this invoice is subjected to the following Warranty conditions:

- 1) Any replacement of electrical components will carry 1 month warranty period from date of this invoice.
- 2) Any replacement of mechanical components will carry 3 months warranty period.

Please note that all warranty does not cover wear and tear conditions regardless of any components.

City Auto Pte Ltd reserves the right to determine any warranty conditions.

Thank You For Your Business !



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE

RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-035449

Date of Request: 07/03/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date 07/03/2018

Enquiry By Jason Quak Leng Hui

TP Vehicle No. YN5450G

Accident Date 06/03/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YN5450G	AXA Insurance Pte Ltd	24/06/2017-23/06/2018	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-035449

Date of Request: 07/03/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date 07/03/2018

Enquiry By Jason Quak Leng Hui

TP Vehicle No. YN5450G

Accident Date 06/03/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque