

16/2010

INS. CASE OWNER:

Cynthia

CC *ASM* / AXA1800

6095, P1 y63

LKK:

IDAC:

Surveyor:

Falin

DOI:

ASSIGNMENT

7/4/18

Date / Time:

7/4/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SGW 4107X

Name of Insured:

KOH TIANG UNG

Insured Tel No.:

HP: *9098806*

Excess Sec II :SS

D.O.A: *7/7/18*

Is driver the owner? (YES / NO)

Nature of Accident:

If NO, Driver Name / Age: *KOH TIANG UNG 40*

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

SBMO004 (37801

Policy No.:

GA 2161911

Make / Model:

HONDA

Place of Accident:

BUKIT BATOK RD

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: % Final ? Yes / No

SHR 88385



INSRS:
WSP:
Tel:
Liability:
RMKS:

Premier



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/Time	STAGE	DATE / PIC
<i>10/4/18</i>	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	<i>15/5/2018</i>
<i>2/5/2018</i>	Documentation Check List:	<i>16-5-18</i>
<i>5:15pm</i>	Notification ltr (if non-pickup)	<input checked="" type="checkbox"/>
	After call ltr to OI:	<input checked="" type="checkbox"/>
	Authorisation To Act:	<input checked="" type="checkbox"/>
	Release Voucher:	<input checked="" type="checkbox"/>
	Final Repair Bill:	<input checked="" type="checkbox"/>
	Car Rental Invoice:	<input checked="" type="checkbox"/>
	Towing Invoice	<input checked="" type="checkbox"/>
	LTA / GIA :	<input checked="" type="checkbox"/>
	Medical Bill:	<input checked="" type="checkbox"/>
	PIR:	<input checked="" type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: SS (days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: *11-7-18* Confirm with: *GARY* Email Call

Final Liability: % *100* (Agreed / Assessed) BOLA S/N No.: *27* If NO or B 28, Ass. Lia: *COLD (DATE - ENDED UP)*

Repair Cost: *GST* SS *1,070*

Loss of Rental (LOR): SS *358.76* (*4* days) *89.69*

Loss of Use (LOU): SS (*3* x days)

Loss of Income (LOI): SS (*5* x days)

LOR only LOU only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search SS *2.27*

Medical: SS

Disbursement: SS (e.g. Tow/Independent)

Legal Cost: SS

Total: SS *1,430.76* Global Sum SS:

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1: SS *1,430.76* Name 1: *PREMIER AUTOMOTIVE SERVICES PTE LTD*

Payee 2: (Strike if N.A.) SS Name 2:

Payee 3: (Strike if N.A.) SS Name 3:

RECEIVED 16 JUL 2018

ONE
16/7/18
COMPLAINT



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
AXA INSURANCE PTE LTD		Ref : CC4/ASM18006095/K1jb3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date : 03-04-2018	
		Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SGW 4107X	Veh. Inspected	SHB 8838S
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	03/04/2018
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	31/03/2018	Inspection Date	03/04/2018
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511
CO. REG:200707743D GST REG:200707743D

2-Apr-18

REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8838 S

1 pc	Rear bumper — DF	\$	696.00
1 pc	Rear bumper lower cover — DC10	\$	206.00
1 pc	Rear bumper inner sponge ? JVC	\$	114.00
1 pc	Rear bumper o/s reflector JVC	\$	46.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00 X JVC	\$	36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00 X JVC	\$	36.00
		\$	1,134.00
		Less 10%	\$ 113.40
		\$	1,020.60

S/NETT

1 set	Rear bumper clips — ME	\$	48.00
	Sundry MW	\$	50.00 X
	To dismantle / replace reverse sensor to new bumper and reset to the same	\$	80.00 20
	To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.	\$	180.00 X
	To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the same	\$	500.00 200
	To putty and spray painting on rear bumper	\$	250.00 180
		\$	2,128.60

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature: _____
Date: _____

Kelvin (11/11/18)

3/4/18 1320 hrs
2 P 7.15
L/S
After Repair photo

Enquire Transaction History**Transaction History Details**

Log Date/Time:	18 Nov 2013 / 10:20:03	Receipt No.:	AACCK001-AX239-131118-000008
Asset Type:	Vehicle	Transaction Amount:	\$75,658.00
Asset ID:	SHB8838S	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20131118102003337231		
Vehicle No.:	SHB8838S		
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-		
Vehicle Attachment 3:	-		
Vehicle Scheme:	Taxi (Company)		
First Registration Date:	18 Nov 2013		
Original Registration Date:	18 Nov 2013		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414ME5451831		
Engine No.:	D4FDDH308756		
Motor No.:	-		
Trailer Chassis No.:	-		
Propellant:	Diesel		
Passenger Capacity:	4		
Engine Capacity:	1685		
Power Rating:	-		
Unladen Weight:	1584		
Maximum Laden Weight:	2050		
Primary Color:	Silver		
Secondary Color:	-		
Manufacturing Year:	2013		
Open Market Value:	\$19,721.00		
Minimum PARF Benefit:	\$7,332.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	18 Nov 2013 10:20:03		
COE No.:	2013111801000832E		
COE Expiry Date:	17 Nov 2021		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$63,297.00		
Lifespan Expiry Date:	17 Nov 2021		
Owner ID Type:	Company		



Service Request Details

Claim
S8M00CL4

Reference
None

Loss Date
March 31, 2018

Request Date
April 2, 2018

Due Date
April 9, 2018

Vendor Name
LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss
Third Party Vehicle Damage

Services
Pending verification - Direct Settlement

kalvin

Gomy vthin

03/04/2018 @ 11:05pm

LKK AUTO CONSULTANTS PTE LTD (TP) ▾

Actions

Next Step
Agree to perform service

Vehicle Information

Incident Vehicle Registration #
SHB88385

Make
TPVD

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

2-Apr-18

REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8838 S

1 pc	Rear bumper — <i>black</i>	\$	696.00
1 pc	Rear bumper lower cover — <i>cl</i>	\$	206.00
1 pc	Rear bumper inner sponge <i>sun</i>	\$	114.00
1 pc	Rear bumper o/s reflector <i>& sun</i>	\$	46.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00 <i>x sun</i>	\$	36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00 <i>x sun</i>	\$	36.00
		\$	<u>1,134.00</u>
		Less 10%	\$ 113.40
		\$	<u>1,020.60</u>

S/NETT

1 set Rear bumper clips — *new* \$ 48.00

Sundry \$ ~~50.00~~ *x m*

To dismantle / replace reverse sensor to new bumper and reset to the same \$ ~~80.00~~ *20*

To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs. \$ ~~180.00~~ *x m*

To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the same \$ ~~500.00~~ *200*

To putty and spray painting on rear bumper \$ ~~250.00~~ *180*

\$ 2,128.60

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Kohli 16/4/18

3/4/18 1326

2 P 7/1

4/5

After Repair photo

6/4/18 after 45\$ (100/200)

Enquire Transaction History

Transaction History Details

Log Date/Time:	18 Nov 2013 / 10:20:03	Receipt No.:	AACCK001-AX239-131118-000008
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Asset ID:	SHB8838S	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20131118102003337231		

Vehicle No.:	SHB8838S
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	18 Nov 2013
Original Registration Date:	18 Nov 2013
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414ME5451831
Engine No.:	D4FDDH308756
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2013
Open Market Value:	\$19,721.00
Minimum PARF Benefit:	\$7,332.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	18 Nov 2013 10:20:03
COE No.:	2013111801000832E
COE Expiry Date:	17 Nov 2021
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$63,297.00
Lifespan Expiry Date:	17 Nov 2021
Owner ID Type:	Company

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5095103893

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **SHB8838S**
Chassis Number : KNAGM414ME5451831
2. Name of Policyholder : PREMIER TAXIS PTE. LTD.
3. Effective Date of Insurance : 20 Oct 2017
4. Expiry Date of Insurance : 19 Oct 2018

5. Persons or Classes of Persons entitled to drive*

- (a) The Policyholder.
(b) Any licensed taxi driver driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use*

- (a) Use as a Taxi.
(b) Use for social domestic and pleasure purposes.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
(b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third- Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION I) : N/A
EXCESS (SECTION II) : S\$3,500
INSURE WITH COE : N/A
HIRE PURCHASE COMPANY : N/A
SUM INSURED : N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)
Date of Issue : 16 Oct 2017 17:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive



Joy Irene (LKKAuto)

From: LOH Cynthia <cynthia.loh@axa.com.sg>
Sent: Wednesday, 11 July 2018 1:58 PM
To: Joy Irene (LKKAuto)
Cc: Admin A; CS A Team
Subject: RE: Service ID 7801 / S8M00CL4 / SHB 8838S / SGW 4107X / 31.03.2018 (H2R)

Dear Irene,

Mandate approved.

Thanks & Regards,

Cynthia Loh | Specialist, Motor Claims Department
AXA Insurance Pte Ltd | 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 | www.axa.com.sg
Email: cynthia.loh@axa.com.sg
Customer Care No. 1800 8804741



redefining / insurance

Please consider the environment before printing this message

This message is confidential. Any unauthorized disclosure, use or dissemination, either whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.

From: Joy Irene (LKKAuto) [mailto:JoyIrene@lkkauto.com]
Sent: Wednesday, July 11, 2018 11:51 AM
To: LOH Cynthia <cynthia.loh@axa.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; CS A Team <cs-a@lkkauto.com>
Subject: RE: Service ID 7801 / S8M00CL4 / SHB 8838S / SGW 4107X / 31.03.2018 (H2R)
Importance: High

Dear Ms. Cynthia

We refer to our mandate request on 16/05/2018.

TP M/s Premier Automotive Services Pte Ltd is chasing for an offer settlement.

Kindly advise quantum mandate in SMART.

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)

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02
SINGAPORE 486443
TEL:65446671 FAX:62141511
CO. REG:200707743D GST REG:200707743D

Our Ref: SHB8838S/GS

WITHOUT PREJUDICE

21st April 2018

(By Email Only)

Attn: The Motor Claims Department
AXA Insurance Pte Ltd
No.8 Shenton Way
#27-01
Singapore 068811

Dear Sir/Madam

ACCIDENT INVOLVING SHB8838S & SGW4107X ALONG BUKIT BATOK ROAD / PAVILION CIRCLE ON 31.03.18

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHB8838S, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: SGW4107X at the material time of the accident with the driver of our client's vehicle, Mr Perakasam S/o Ramalingam Samy

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SGW4107X, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	1070.00 (Incl. GST)
(2) Loss of Rental - 5Days @\$89.69per day	\$	448.45
(3) GIA Search fee	\$	<u>2.00</u>
	\$	<u>1520.45</u>

A copy of each of the following supporting documents is enclosed:

- (1) Final Repair Bill, GIA report & sketch plan of SHB8838S
- (2) Driver's I/C and Driving Licence
- (3) Vehicle Registration card, Certificate of Insurance
- (4) Check In/Out Voucher, GIA search, Scene video

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02
SINGAPORE 486443
TEL:65446671 FAX:62141511
CO. REG:200707743D GST REG:200707743D

Our Ref: SHB8838S/GS

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,



Claims Department -- Gary Shi

Email: gary.shi@premiertaxi.com

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd



2nd May 2018

KOH CHONG LIANG

Block 194A Bukit Batok West Avenue 6,
#36-217,
Singapore 651194.

Dear Sir/Madam,

OUR REF : CC4/ASM18006095/K1jb3
YOUR REF : SGW 4107X
ROAD TRAFFIC ACCIDENT INVOLVING SGW 4107X AND SHB 8838S ALONG
BUKIT BATOK ROAD ON 31.03.2018

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 Property Damage claim against your policy.

We have received a claim from M/s PREMIER AUTOMOTIVE SERVICES PTE LTD, acting on behalf of the owner of SHB 8838S 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 SHB 8838S. 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 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)



Auto
Consultants
Pte Ltd

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

- 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 6256 3561 or email us at vicalpeh@lkkauto.com.

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

Yours sincerely,

Chong Poh Kin
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

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

AUTHORISATION TO ACT

I/We, PREMIER TAXIS PTE LTD ("the third party claimant") of 23 CHANGI SOUTH AVENUE 2 #03-02 SINGAPORE 486443 (address), owner of SHB 8838S (vehicle no.) hereby authorize PREMIER AUTOMOTIVE SERVICES PTE LTD ("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. SHB 8838S that was damaged pursuant to the accident which occurred on 31/03/2018 (date) along BT BATOK ROAD/PAVILION CIRCLE (location) involving vehicle no/s SGW 4107X ("the accident").

I/We 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/We 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 17 (day) of July (month) 2018 (year)



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



Signed by "the workshop"
(with chop)



redefining / insurance

This Settlement excludes any bodily injuries arising out of the above said accident and pertains to property damage only

CLAIM REF : SSM00CL4
INSURED : KOH CHONG LIANG

DISCHARGE VOUCHER

We, **PREMIER AUTOMOTIVE SERVICES PTE LTD** confirm that by letter of authorisation dated 13/07/18, we are authorised to and do hereby give this discharge for ourselves and on behalf of **PREMIER AUTOMOTIVE SERVICES PTE LTD** and the Hirer, **PERAKASAM S/O RAMALINGAM SAMY** of vehicle no. SHB 8838S

Now we **PREMIER AUTOMOTIVE SERVICES PTE LTD** for ourselves and the said Hirer and the driver jointly and severally:-

- a) agree to accept the sum of Singapore Dollars One Thousand Four Hundred Thirty and cents Seventy Six (S\$1,430.76) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no SGW 4107X arising out of an accident with SHB 8838S on 31/03/2018.
- b) declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SGW 4107X arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- c) We hereby declare that I/we am/are 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 in favour of **PREMIER AUTOMOTIVE SERVICES PTE LTD** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SGW 4107X.

Dated this 17 day of July 2018

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp  _____

Witness : _____
Name : SHAFAWATI MD RABU
I/C No : S830 932 45
Address : _____



PREMIER AUTOMOTIVE SERVICES PTE LTD
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)
TEL: 65436676 / 65436689 FAX: 62141511
CO. REG NO.: 200707743D GST REG. NO.: 200707743D

PREMIER TAXIS PTE LTD
23 CHANGI SOUTH AVENUE 2 #03-02
SINGAPORE 486443

TAX INVOICE

DATE 21-Apr-2018
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8838 S			\$ 1,000.00
TOTAL LUMP SUM REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 1,000.00
GST @ 7%				\$ 70.00
GRAND TOTAL				\$ 1,070.00



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)



04 April 2018

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Perakasam S/O Ramalingam Samy of NRIC Number S1274993G is a registered driver of SHB8838S. Perakasam S/O Ramalingam Samy is paying daily rental rate of \$89.69 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to read "Chin Bee Lian".

Chin Bee Lian (Ms)
Assistant Vice President
Taxis Administration

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 200304975II



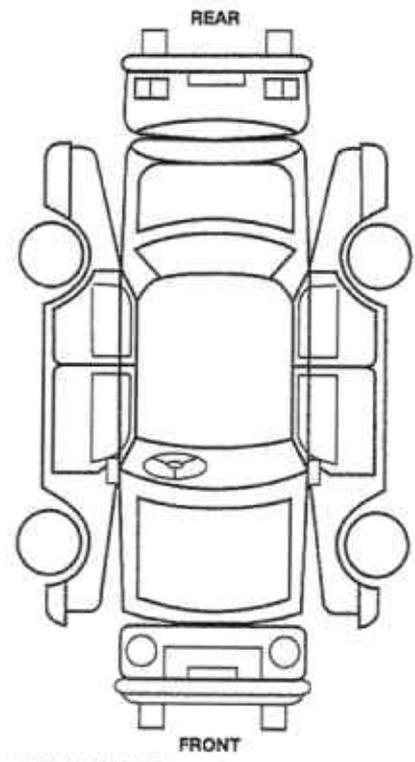
REPLACEMENT VEH GIVEN YES / NO
 VEH NO. SHB 88385
 JOB NO. _____

CHECK IN / OUT VOUCHER



DRIVER'S NAME <u>PERAKASAM R.S.</u>			
NRIC <u>S 12749936</u>	HANDPHONE <u>81682547</u>		
TAXI REGN NO. <u>S H 88385</u>	MAKE / MODEL <u>PC2</u>		
DATE IN <u>020418</u>	TIME IN <u>11:00</u>	DATE OUT <u>060418</u>	TIME OUT <u>10:00</u>
KILOMETRES IN	FUEL IN	KILOMETRES OUT	FUEL OUT
	E 1/4 1/2 3/4 F		E 1/4 1/2 3/4 F

INDICATE AREA OF DAMAGE HERE:



- BODY MARKINGS**
- | | |
|---------------------|-------------|
| 1 - Light Dent | 5 - Damaged |
| 2 - Serious Dent | 6 - Chip |
| 3 - Light Scratch | 7 - Crack |
| 4 - Serious Scratch | 8 - Peeling |

TAXI METER DOWNLOADED

YES NO

DATE / TIME TOWED IN TO WORKSHOP
 D D M M Y Y H H M M

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION
 D D M M Y Y H H M M

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN	CHECK OUT
<u>PERAKASAM R.S.</u>	<u>PERAKASAM R.S.</u>
DRIVER'S NAME	DRIVER'S NAME
<u>H. 02/04/18</u>	<u>RS.</u>
DRIVER'S SIGNATURE / DATE / TIME	DRIVER'S SIGNATURE / DATE / TIME
<u>[Signature]</u>	<u>[Signature]</u>
CHECKED IN BY (PREMIER'S AUTHORISED WORKSHOP)	CHECKED OUT BY (PREMIER'S AUTHORISED WORKSHOP)

<p>SERVICE / REPAIRS DONE</p> <p><input type="checkbox"/> SERVICING <input type="checkbox"/> OTHERS:</p> <p><input type="checkbox"/> T / BELT</p> <p><input type="checkbox"/> AIRCON SYSTEM</p> <p><input type="checkbox"/> TURBO</p> <p><input type="checkbox"/> BRAKE SYSTEM</p> <p><input type="checkbox"/> CLUTCH SYSTEM</p> <p><input type="checkbox"/> BULB</p> <p><input type="checkbox"/> UNDER CARRIAGE</p> <p><input type="checkbox"/> CPF</p> <p><input type="checkbox"/> BATTERY</p>	<p>DRIVER'S REMARKS</p> <p><u>ACCIDENT: DATE / TIME of ACCIDENT:</u> <u>310308 1340</u></p> <p><u>TP/W</u></p>
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**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-18-048590
Date of Request: 02/04/2018

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date: 02/04/2018
Enquiry By: GOH WEE DEK
Vehicle No.: SGW4107X
Accident Date: 31/03/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGW4107X	AXA Insurance Pte Ltd	17/07/2017-16/07/2018	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.

This is a computer generated document and requires no signature.





**GENERAL
INSURANCE
ASSOCIATION**

RECORDS MANAGEMENT CENTRE

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TAX INVOICE

Our Ref No: GR-18-048590
Date of Request: 02/04/2018

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date 02/04/2018
Enquiry By GOH WEE DEK
 Vehicle No. SGW4107X
 Incident Date 31/03/2018

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



