



Auto  
Consultants  
Pte Ltd

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

24 APRIL 2018

**HENRY TRADING AND DELIVERY SERVICES  
BLK 705 JURONG EAST STREET 71  
#03-90  
SINGAPORE 640705**

Dear Sir/Madam,

**OUR REF : CC4/ASM18007301/mb3  
YOUR REF : GY 4428J  
ACCIDENT INVOLVING GY 4428J AND SKF 5286Y ALONG PAYA LEBAR RD & SIMS  
AVE (SLIP ROAD) ON 17.04.2018**

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 BH AUTO SERVICES PTE LTD, acting on behalf of the owner of SKF5286Y against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had rear-ended the Third Party vehicle SKF 5286Y. 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 [bevanlim@lkkauto.com](mailto:bevanlim@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 6256 3561 or email us at [bevanlim@lkkauto.com](mailto:bevanlim@lkkauto.com).

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

Yours sincerely,

Bevan Lim  
Case Handler  
DID: 6749 4274  
FAX: 6741 4108  
Email: [bevanlim@lkkauto.com](mailto:bevanlim@lkkauto.com)

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

## AUTHORISATION

Name of owner of m/vehicle: Ajit Singh Chauhan  
Address: SIR 61, Tampines Avenue 1, # 02-03 S(529776)  
NRIC No: S7466512H  
RE: ACCIDENT ON 19/4/18 ALONG Payalebar Rd towards Tanjong Katong  
INVOLVING SPF 52864 & 6144428J

In consideration of **BH AUTO SERVICES PTE LTD** ("the Workshop") repairing my/our vehicle no SPK 52864 at my/our request, I/We the abovenamed owner of motor vehicle no SPK 52864 hereby authorise the Workshop to demand claim, negotiate, settle my/our claim for cost of repairs loss of use and all other expenses and damages arising out of the above accident.


I/We further authorise the Workshop to appoint solicitors to demand, claim, negotiate, settle and/or commence legal proceedings in my/our name for the above purpose and at the sole discretion of the Workshop. All sums recovered therefrom shall belong to the Workshop absolutely and I/We further authorise the Workshop to give absolute discharge on my/our behalf and to sign all discharge vouchers and other documents in relation to the same on my/our behalf. I/We further agree to fully co-operate with the solicitors appointed by the Workshop on my/our behalf and attend all Court hearings that are necessary to prosecute the claims maintained by the Workshop.

I/We agree that in the event that the claim is rejected for whatsoever reason or the Workshop decides not to proceed with legal proceedings or for whatsoever reason the Workshop is unable to recover all of the repair costs or are only able to recover a portion of the same I/we hereby undertake to pay them the full repair costs and or any portion thereof that cannot be recovered and all expenses including legal costs that they may have incurred in pursuing the claim within 7 days from the date of the written notice for payment by them to my/our last known address.

I/We hereby declare that I/we will always remain and be liable to the Workshop for the cost of repair to my/our motor vehicle and expenses incurred on my/our behalf. In the event that Workshop has to issue any notice or commence legal proceedings against me/us to enforce this undertaking against me/us, I/we shall be liable for the Workshop's expenses and legal cost (including solicitor and client cost) on an indemnity basis.

I/We further authorise the Workshop to give to the other party/parties absolute discharge in respect of any liability and any sum, whether agreed or not made the Workshop or to the law firm appointed by the Workshop towards full settlement of my/our claim it shall be regarded as full and final discharge of the claim.

I/We further authorise the Workshop to settle the above mentioned claim in a manner that they deem fit and the Workshop is further authorised to receive payment further to settlement of my claim with payment cheque/s being made in favour of the Workshop.

Signed:  Date this 18 (day) of 4 (month) 18 (year)  
Owner of m/vehicle: SPF 52864

HP: 8201 6990

Witnessed: 



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	GY4428J (Insd veh)	Model: Toyota Corolla Altis 1598cc
	SKF5286Y (TP veh)	
Date of Accident/ Time:	17/04/2018	

Repair Estimate	: \$	10,749.12	
Final Repair Cost	: \$	4,627.41	
Loss of Use	: \$	-	days at \$ per day
Rental (if any)	: \$	800.00	8 days at \$ 100.00 per day
LTA / GIA Search Fee	: \$	31.00	
Others:	: \$	-	
	: \$	-	
Final Settlement Sum	: \$	5,458.41	

Payee Name : BH AUTO SERVICES PTE LTD

Is Third Party Workshop GIA Registered? [ X ] YES [ ] NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <del>No</del> BOLA Scenario No: 27
	BOLA Liability: 100 (%)	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/TORTFEASOR 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: CHAN YUN SHI Date: 26/04/2019	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: Bernard Kee Date: 26/04/2019
 Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: KSC Date:	

# **BH AUTO SERVICES PTE LTD**

**BLK 1 SIN MING INDUSTRIAL ESTATE  
SECTOR C #01-115 SINGAPORE 575636**

**Tel: 6743 3494**

**Fax: 6269 2404**

**CO. REG. NO. 201006106C**

**GST REG NO. 201006106C**

## **TAX INVOICE**

### **Final Repair Bill**

**Our Ref: SKF5286Y**

**Date: 12/12/2018**

**M/s AXA Insurance Pte Ltd  
8 Shenton Way  
#24-01 AXA Tower  
Singapore 068811**

**BY POST ONLY**

Vehicle No : SKF5286Y  
Make/ Model : TOYOTA ALTIS  
Year of Manufacture : 2012  
Chassis No. : ZNE100327121  
Colour : BLACK  
D.O.A : 17/04/2018

QTY	ITEM/PARTICULARS	AMOUNT (\$\$)
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1. Repair Cost for Motor Vehicle No. **SKF5286Y**  
Type of repair: PART BY PART :\$\$ 4324.68

**GST @ 7% : \$\$ 302.73**

**GRAND TOTAL: \$\$ 4627.41**

**Total : Singapore Dollars Four Thousand Six Hundred Twenty-Seven Dollars and  
Forty-One Cents Only.**

Company's Stamp & Signature



# B & O VEHICLE RENTAL

Blk 5033, Ang Mo Kio Industrial Park 2 #01-279 (off Ang Mo Kio Ave. 3)  
Singapore 569536 Tel: 6482 5577 (3 Lines) Fax: 6482 5000  
Reg. No: 53060835M  
TOWING SERVICE: 6858 4067 (After 10.30 pm)

BH

## 车辆出租合同 VEHICLE RENTAL AGREEMENT

Date: 26/4/18  
Owner: B & O VEHICLE RENTAL ("the owner")  
Hirer: ASIT SINGH CHAUHAN  
NRIC / Co. Reg. No: S7466512H  
Tel: — Fax: — H/P: 82016990  
Address: —

Owner and Hirer have agreed to enter into this Vehicle Rental Agreement for the motor vehicle described below and upon the terms and conditions contained on both sides of this document. Hirer acknowledges having read and understood all the terms and conditions and signifies acceptance upon signing.

Vehicle Reg. No: SLC8981 H		Agreement No.: 18071	
Driver's Particulars		Odometer: —	
Name: ASIT SINGH CHAUHAN		Date & Time Out: 26/4/18	
Address: —		Date & Time In: 05/05/2018	
I/C No: S7466512H	Dr/Licence No: —	Hour @\$	—
Date of Issue: 06/04/2013	Occupation: —	9 Days @\$ 120/-	—
Date of Birth: 25/10/2007	Tools: — Spare Tyre: one	Wks @\$	—
		Mths @\$	—

### Third Party Claim

In respect of each third party insurance claim arising from the date of hire to date of return of the vehicle (both dates inclusive). Hirer unconditionally agrees to pay Owner S\$ 3000/- comprising excess payable and compensation to Owner for impact of claim on future motor insurance premiums.

### Own Vehicle Damage

Hirer is responsible for the first \$ 3000/- excess for collision/damage to first party, (i.e.) B & O VEHICLE RENTAL (including windscreen) plus loss of earnings while damaged vehicle is under repair.

### Authorised Driver

Hirer shall pay additional excess of S\$1500 if the Authorised Driver is below the age of 25 or is above 65 years old or has less than 2 years driving experience.

### Driver Not Cover By Insurance

General Exception: Insurance policy does not cover against any driver aged below 22 and/or above 70 years old and/or with driving experience of 1 year and below.

Deposit (Refundable):

Sub-Total:

Balance To Pay:

81084/-

PETROL/DIESEL AT YOUR OWN EXPENSE  
FOR LOCAL USE ONLY

B & O VEHICLE RENTAL

Authorised Signature

Hirer's Signature

**Bik 5033, Ang Mo Kio Industrial Park 2 #01-279 (off Ang Mo Kio Ave. 3)  
Singapore 569536 Tel: 6482 5577 (3 Lines) Fax: 6482 5000  
Reg. No: 53060835M  
TOWING SERVICE: 6858 4067 (After 10.30 pm)**

出租車及修理  
保險及貨運  
代理買賣  
汽車保險  
中心

To M/s Ajith Singh Chauhan

Agreement No. 18071

## Payment Terms

Date 11/5/18

E. & O. E.

TOTAL:

**All cheque payment should made payable to  
B & O VEHICLE RENTAL**

*for* **B & O VEHICLE RENTAL**

VEHICLE RENTAL



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

**TAX INVOICE**

Our Ref No: GR-18-058773

Date of Request: 18/04/2018

Your Ref No:

Online Purchase

BH Auto Services Pte Ltd  
Blk 1 Sin Ming Industrial Estate Sector C  
#01/111/113/115/117  
Singapore 575636

Dear Sir/Madam,

Enquiry Date 18/04/2018  
Enquiry By Jacelyn Loh Cai Ling  
TP Vehicle No. GY4428J  
Accident Date 17/04/2018

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





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**TAX INVOICE**

Our Ref No: GR-18-061770

Date of Request: 24/04/2018

Your Ref No:

Online Purchase

BH Auto Services Pte Ltd  
Blk 1 Sin Ming Industrial Estate Sector C  
#01/111/113/115/117  
Singapore 575636

Dear Sir/Madam,

**Your Search Criteria:**

Date of Accident: 17/04/2018

Place of Accident: PAYA LEBAR TWDS TANJONG KATONG

Client Vehicle No: SKF5286Y

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



**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

## TAX INVOICE

Our Ref No: GR-18-061796  
Date of Request: 24/04/2018

Your Ref No: Online Purchase

BH Auto Services Pte Ltd  
Blk 1 Sin Ming Industrial Estate Sector C  
#01/111/113/115/117  
Singapore 575636

Dear Sir/Madam,

Date of Accident: 17/04/2018  
Vehicle No: SKF5286Y  
Place of Accident: ALONG PAYA LEBAR RD TWDS TANJONG KATONG  
Involving Vehicle No: GY4428J

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
GY4428J	ALONG PAYA LEBAR RD TWDS TANJONG KATONG	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque