

Auto Zoom Enterprise Pte Ltd
C/O 54 YUNNAN ROAD
SINGAPORE 637917

OUR REF : 3699 AXA
YOUR REF : TBA
DATE : 13/06/2018

ATTN: THE MOTOR CLAIMS DEPT
AXA Insurance Pte Ltd

Dear Sir/ Mdm,

Re: Accident involving vehicle no. SJY 3699P & your Insured SKE3162P & others
On 12/04/2018 along West Coast Road turns West Coast Highway.

I/We wish to inform you that my/our vehicle have been completed repairs to my/our satisfaction by M/S SNG AH TEE MOTOR & PANEL SERVICE PTE LTD. I/We therefore propose to claim from you as followed:-

- | | |
|--|------------|
| 1. COST OF REPAIR / EXCESS (Panel Loss) | SS 7572.00 |
| 2. LOSS OF USE \$ 120.00 /per DAY FOR 14 DAYS | SS 1680.00 |
| 3. SURVEY FEE (Survey by LKK) | SS - |
| 4. POLICE REPORTS/ LTA SEARCH FEE/ GIA REPORTS | SS 2.00 |
| 5. OTHERS () | SS - |

TOTAL:

S\$ 9,254.00

For the payment, kindly make payable directly to my/our repairer M/S SNG AH TEE MOTOR & PANEL SERVICE PTE LTD of
BLK 3 PIONEER ROAD NORTH #01-18 SINGAPORE 628457

Your kind and early co-operation will be greatly appreciated.
Thank You.

Yours Faithfully,



Enclosed documents:-

- | | |
|----------------------------------|--------------------------|
| GIA report/assessment | <input type="checkbox"/> |
| Original/Copy of Surveyor report | <input type="checkbox"/> |
| Original/Copy of Photographs | <input type="checkbox"/> |
| Insurance Cert/ Logcard | <input type="checkbox"/> |
| Copy of IC/ Driving License | <input type="checkbox"/> |
| Witness Statement | <input type="checkbox"/> |
| Final Bill / Tax Invoice | <input type="checkbox"/> |
| Others | <input type="checkbox"/> |

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Thursday, 26 April 2018 12:26 PM
To: 'HOWANYEE@GMAIL.COM'
Subject: ACCIDENT INVOLVING SKE 3162P AND SJY 3699P ALONG WEST COAST RD TWDS WEST COAST HIGHWAY LP 163 ON 12/04/2018

26 APRIL 2018

HO KWAN YEE

Dear Sir/ Mdm

OUR REF : CC4/ASM18007545/eb3

YOUR REF : SKE 3162P

ACCIDENT INVOLVING SKE 3162P AND SJY 3699P ALONG WEST COAST RD TWDS WEST COAST HIGHWAY LP 163 ON 12/04/2018

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 SNG AH TEE MOTOR & PANEL SERVICE PTE LTD acting on behalf of the owner of SJY 3699P against your motor insurance policy.

Basing on the circumstances of the accident reported by both parties, where your vehicle was involved in a FOUR (4) vehicle chain collision and was the 3rd vehicle that rear-ended the Third Party Vehicle SJY 3699P we are of the opinion that we cannot be absolved from liability.

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 ashersng@lkkauto.com within 7 days from the date of this letter **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 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 ashersng@lkkauto.com.

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

Yours sincerely

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

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

YOUR REF _____

ATTN: MOTOR CLAIMS DEPT

AXA Insurance Pte Ltd

RE: THIRD PARTY CLAIM FOR ACCIDENT INVOLVED *SJY3699P* AND *SKE3162P*
ON *17/4/2018* ALONG *West Coast Road towards West Coast Highway*

LETTER OF AUTHORITY

Dear Sir / Madam,

I, *Auto Zoom Enterprise Pte Ltd* hereby authorize and appoint **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD** of **BLK 3 PIONEER ROAD NORTH #01-18 SPORE 628457** to claim on my behalf of the above mentioned matter against *SKE3162P*.

I further authorize **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD** to release my personal information to the third party such as the third party's insurance to direct the payer to make the cheque in favour of M/s **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD**. In case of unsuccessful claim of the third party, **Sng Ah Tee Motor & Panel Service Pte Ltd** has the right to bill me the necessary cost and disbursements. I/we also acknowledge that the repair of my vehicle will be done in lumpsum as per what the insurer's surveyor has recommended. I hereby authorize my driver *Ngiam Heng Yong (IC S1598893)* to do necessary paperwork for the claim.

I further acknowledge that any settlement that 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.

Yours Faithfully,



Signature of Owner



redefining / insurance

LKK

CLAIM REF : 58M0004W
INSURED : HO KIAN YEE

DISCHARGE VOUCHER

We/I Auto Zoom Enterprise Pte Ltd, NRIC NO. 200805515H hereby agree to accept the sum of dollars Eight thousand Nine hundred Seventy four only - (S\$ 8974.00) 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. SE316XP as a result of an accident along West Coast Road towards West Coast Highway on 17/4/2018 of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. STY3699P.

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. SE316XP 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. SE316XP.

Dated this 14th day of August 2017 2018

Claimant's Signature

NRIC no./ Company Stamp



Occupation/ Business

Address

lot 15/16 West Coast Car Mart 13 West Coast Highway

Telephone No.

63421000

Witness's Name

SHARON SNG

Witness's Signature

Witness's NRIC No.

581080794





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-18-059137

Date of Request: 19/04/2018

Your Ref No:

Online Purchase

Sng Ah Tee Motor & Panel Service Pte Ltd
Blk 3 Pioneer Road North
#01-18
Singapore 628457

Dear Sir/Madam,

Enquiry Date 19/04/2018
Enquiry By Sharon Sng May Yuen
TP Vehicle No. SKE3162P
Accident Date 12/04/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKE3162P	AXA Insurance Pte Ltd	22/12/2017-21/12/2018	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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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-18-059137

Date of Request: 19/04/2018

Your Ref No: Online Purchase

Sng Ah Tee Motor & Panel Service Pte Ltd
Blk 3 Pioneer Road North
#01-18
Singapore 628457

Dear Sir/Madam,

Enquiry Date 19/04/2018
Enquiry By Sharon Sng May Yuen
TP Vehicle No. SKE3162P
Accident Date 12/04/2018

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