

AXA Insurance Singapore
Pte Ltd
Attn: Motor Claims Dept

Dear Sir/ Madam

**ACCIDENT INVOLVING VEHICLE NO SKP 325Z & SJK 1195M ALONG SIMEI
AVE ON 12/03/2018**

1.	Cost of Repairs (Nett-value)	S\$ 3,500.00
2.	Loss of Use/Rental(S\$80 x 14 days)	S\$ 1,120.00
	TOTAL	S\$ 4,620.00

Please let us have your reply soonest possible.

Thank you.

Yours faithfully

AUTOLUTION INDUSTRIAL PTE LTD
19 UBI ROAD 4
SINGAPORE 408623
TEL: 6490 9666 FAX: 6846 7483



Auto
Consultants
Pte Ltd

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

24 MAY 2018

THE LENTOR RESIDENCE PTE LTD
51 LENTOR AVE
SINGAPORE 786876

Dear Sir/Madam,

OUR REF : CC4/ASM18008233/ua3
YOUR REF : SKP 325Z

**ACCIDENT INVOLVING SKP 325Z AND SJK 1195M ALONG SIMEI AVE ON
12/03/2018**

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 M/s **AUTOLUTION INDUSTRIAL PTE LTD** acting on behalf of the owner of **SJK 1195M** against your motor insurance policy.

As spoken, basing on the circumstances of the accident reported by both parties (front-to-rear collision) where you had hit third-party vehicle from the rear, 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 thinthin@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



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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 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 6841 2360 or email us at thinthin@lkkauto.com

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

Yours sincerely

THIN THIN HLAING
LKK Auto Consultants Pte Ltd
DID: 6841 2360
FAX: 6741 4108
Email: thinthin@lkkauto.com

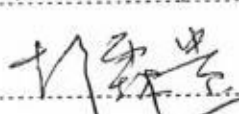
Cc AXA Insurance Pte Ltd
(Motor Claims Dept)

**Third Party Direct Settlement
Letter of Authority**

1. Accident involving vehicle number SK1195M & SKP325Z at Along Simoi Avenue on 12/03/2018.
2. I, Pang Lim Kwee NRIC 21834593E, owner of motor vehicle no. SK1195M hereby authorize my repair workshop, namely Autolution Industrial Pte Ltd to act for me with respect to the following:
- a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - b) To resolving my claim as they deem fit, including settling the matter on basis of my contributing negligence if any.
 - c) To receive payment for settlement of my claim and all payment be made payable to the workshop for cost of repairs and other uninsured losses.
 - d) To sign discharge voucher on my behalf.
3. I understand that the claim for loss of use of my vehicle will be based on the number of days estimated by the surveyor in his report to be required for repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for the extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
4. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insures of the other vehicle is concerned.
5. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment:
- a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
 - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Dated this 13th (Day) of march (Month) 2018 (Year)

Claimant Particulars

Name: Pang Lim Kwee
Address: _____
Tel No.: 9093 4751 / 9369 7270
Signature: 

Authorized Workshop

Workshop: Autolution Industrial Pte Ltd
Claim Officer: Muhammad Ihsani

Signature & Co. Stamp:

AUTOLUTION INDUSTRIAL PTE LTD
19 UBI ROAD 4
SINGAPORE 408623
TEL: 6490 9666 FAX: 6846 7483



redefining / insurance

CLAIM REF : S8M00B29
INSURED : THE LENTOR RESIDENCE PTE LTD

DISCHARGE VOUCHER

We/I (PANG LIM KWEE. S1834593E) hereby agree to accept the sum of dollars [Two Thousand Only] (S\$2,000.00) 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. SKP 325Z as a result of an accident along SIMEI AVE on 12/03/2018 of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. SJK 1195M.

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. SKP 325Z 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. SKP 325Z.

Dated this 30 day of August 2018

Claimant's Signature :

[Signature]

NRIC no./ Company Stamp :

S1834593E

Occupation/ Business :

RETIRED

Address :

604, BEPOK RESERVOIR ROAD, #05-59D, S470604

Telephone No. :

93697270 / 90934751

Witness's Name :

Hamzah Saad

Witness's Signature :

[Signature]

Witness's NRIC No. :

S0162434B

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
8 Shenton Way, #24-01 AXA Tower, Singapore 068811
Customer Centre #B1-01
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg