

## Asher Sng (LKKAUTO)

---

**From:** Asher Sng (LKKAUTO)  
**Sent:** Monday, 27 May 2019 4:41 PM  
**To:** STEPHEN.WONG@VEOLIA.COM  
**Subject:** ACCIDENT INVOLVING XD 7648E AND SLW 3055J ALONG AYE EXIT 3 TOWARDS LOWER DELTA RD ON 07/05/2018

27 MAY 2019

**VEOLIA ES SINGAPORE PTE LTD**

Dear Sir/ Mdm

**OUR REF : CC4/ASM18008637/Kea3**

**YOUR REF : XD 7648E**

**ACCIDENT INVOLVING XD 7648E AND SLW 3055J ALONG AYE EXIT 3 TOWARDS LOWER DELTA RD ON 07/05/2018**

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 MBM WHEELPOWER PTE LTD acting on behalf of the owner of SLW 3055J against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had rear-ended the Third Party vehicle SLW 3055J. 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 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](mailto: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](mailto: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](mailto:ashersng@lkkauto.com)

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

Date :

11/5/2018

To :

MBM WHEELPOWER PTE LTD

( )

160 Sin Ming Drive #06-02 Sin Ming AutoCity Singapore 575722

FROM : CHEN WAI KUEK (Name of Owner & Policyholder)

CLAIM VEHICLE No : SLW3055J

ACCIDENT DATE : 7/5/2018

LOCATION : ALONG SLIP RD OF LOWER DELTA RD INTO JLN BT MERAH

OTHER VEHICLE : XD7648E

1 I hereby authorise MBM WHEELPOWER PTE LTD to :-

- a. Proceed with the repair (the repair) to the above accident (the accident) damaged vehicle (the vehicle); and

- ( ) Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or resolved **(Claim against own Insurer)**

- 6/✓ Act as sole and principal agent to claim on my behalf for the damaged to the vehicle and / or bodily injury sustained as a result of the accident from third party and / or third party insurer in question until the claim is wholly completed, settled and / or resolved. **(Claim against Third Party)**

- 2 I confirm that MBM's authorisation shall include without limitation paying for all the relevant reports / documents, corresponding and negotiating with the insurer / third party and any other relevant parties, correspondence of any nature with solicitors, appointing solicitors to act in connection with the claim and, any or all such other tasks concerning the settlement, resolution and / or completion of the claim.

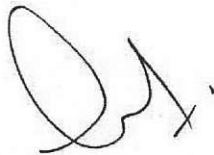
Where authorising party is not vehicle owner and policyholder

EXCEPT :-

- a. Such as matters or task that the insurer / third party and / or the law requires me to personally attend to ; and
  - b. The submission of the claim to the insurer (Where applicable)
- 3 I understand if I submit a claim of whatever nature to my own insurer [ **FOURTEEN DAYS (14 days)** ] after the accident (or such other time stipulated by my own insurer and / or the law), such claim will not or may not be accepted by my own insurer.
- 4 I further confirm and accept that :-
- a. To the extent permitted by laws :-
    - i) I will indemnify and keep MBM indemnify in connection with or arising from the claim ; and
    - ii) That not with outstanding the agreement or otherwise, under no circumstance will I (jointly or severally) in any manner hold MBM liable for losses / damages of whatever nature arising or in connection with the claim.
  - b. MBM does not guarantee and never represent that the insurer / third party will fully indemnify me for the damage and / or the repair's cost and, that I shall be and continue to be liable to MBM for the whole of the repair's cost.
- 5 As the extend to which the insurer / third party will indemnify me or be liable is not conclusive, I agree to place a deposit of \$ \_\_\_\_\_ (excluding Gst) for the repair's cost.
- 6 I agree and accept MBM deposit refund policy, If the final successful percentage of indemnification / contribution / liability from or of the insurer / third party in respect of the repair's cost to me :-
- a. 50% and below - NO REFUND
  - b. 100% - FULL REFUND

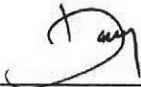
- 7 I shall inform and forward to MBM all correspondence and letters received by me from the insurer / third party, any other insurer, solicitors governmental authorities and / or, any other relevant party.
- 8 I shall fully co-operate with and act expeditiously on any requests by MBM, particularly the signing / endorsement / execution of any "Discharge Voucher", failing which I shall be liable to MBM for the full repair costs and the expenses incurred (directly or indirectly) by MBM in connection with the claim.
- 9 I shall not :-
  - a. respond to correspondence and letter; and
  - b. negotiate agree or accept any other from the insurer / third party or any other relevant party; without consultation of and expressed approval from MBM WHEELPOWER PTE. LTD.
- 10 In consideration hereof (including without limitation MBM's agreeing to repair the vehicle and defer demanding payment of the repair's cost), I wholly assign to MBM WHEELPOWER PTE. LTD. All proceeds of the claim for :-
  - a. the repair's costs and
  - b. damage, compensation, interest, cost (including party-to-party legal costs on a full indemnity basis and expenses in connection with the accident, repair and / or claim; which MBM shall be further entitled to apportion in its absolute discretion with any excess being paid by MBM to me as it deems fit in its absolute discretion.

- 11 I further confirm that payment to MBM or to any person (which shall include a body corporate) authorised by you to receive payment in lieu shall constitute a good effective discharge of the payment obligations by any party of the aforesaid proceeds of my claim and that I shall not be authorised in law to receive payment.



Owner & Policyholder's Signature / Company Stamp (if applicable); or  
Authorising party's Signature / Company Stamp (if applicable)

Name : CHEN WAI KUEK  
NRIC : S7388228A  
Address : \_\_\_\_\_



Witness's Signature

Name : DANNY ONG  
NRIC : \_\_\_\_\_

**WITHOUT PREJUDICE to:**

(a) Insurers' Subrogated Claim and/or

(b) Any Personal Injury Claims

[Note: This Notice supersedes any inconsistencies found in this Discharge Voucher]

**AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	XD 7648E (Insd veh)	Model: Mercedes Benz GLC 250
	SLW 3055J (TP veh)	
Date of Accident/ Time:	07/05/2018	

Repair Estimate	: \$	25,478.31	
Final Repair Cost	: \$		
Loss of Use	: \$		7 days at \$ 120 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum ( GLOBAL SUM)	: \$	12,700.00	
Payee Name : MBM WHEELPOWER 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/TORTEASOR 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: Gary Wong

Date: 03/09/19

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Lwi Siew Theng

Date: 03/09/19

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: 6/9/19



**mbm wheelpower**  
DARE TO BE

To: **AXA Insurance (Singapore) Pte Ltd**  
8 Shenton Way  
#27-01 AXA Tower  
Singapore 068811  
  
TEL: 6338 7288

Attn: Motor Claims Dept

Tax Invoice: **35931**  
Date: **7/7/2018**  
Vehicle No.: **SLW3055J**  
Make / Model: **Mercedes-Benz GLC250**  
Chassis No.: **WDC2539462F308024**  
Engine No.: **27492031158245**  
Year of Make: **2017**  
Accident Date: **7/5/2018**

S/N	DESCRIPTION	Amount S\$
1	COSTS OF REPAIR - LUMP SUM	\$ 11,140.50

Total :	\$	11,140.50
7% GST:	\$	779.84
Amount Due S\$	\$	<u>11,920.34</u>

For & on behalf  
MBM WHEELPOWER PTE LTD



Prepared by: Yin Siew

MBM Wheelpower Pte Ltd  
160 Sin Ming Drive #06-02  
Sin Ming Autocity Singapore 575722  
Customer Service Hotline 6262 8888  
[www.mbmwheelpower.com.sg](http://www.mbmwheelpower.com.sg)  
Company Registration Number: 200204110W  
GST Registration Number: M90368446L





**RICA LEASING**  
**PTE LTD**  
Co Reg No. 200510430K

Registered Address:  
126 Joo Seng Road #05-12 Gold Pine Industrial Building  
Singapore 368355  
Operation Address:  
160 Sin Ming Drive, #08-05 Sin Ming AutoCity  
Singapore 575722 Tel: 6552 8003 Fax: 6453 1409

## INVOICE

**MBM Wheelpower Pte Ltd**  
176 Sin Ming Drive #01-14/15  
Sin Ming Autocare  
Singapore 575721  
Attn: Danny

NO. : 25200  
DATE : 30/05/2018  
STA NO. : 26018  
TERM : 30 days  
VEHICLE NO. : SLB9498K  
MAKE/MODEL : Toyota Altis  
REFERENCE : SLW3055J

DESCRIPTION	QTY	U.PRICE	AMOUNT
Rental for 22/05/2018 to 28/05/2018	7 days	150.00	1,050.00

S'PORE DOLLARS : ONE THOUSAND FIFTY ONLY

Cheques should be crossed "A/C Payee only" and  
make payable to RICA LEASING PTE LTD

**TOTAL S\$ 1,050.00**

**RICA LEASING PTE LTD**

MBM  
Denny

# RICA LEASING PTE LTD


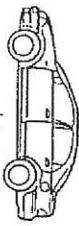
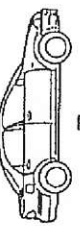

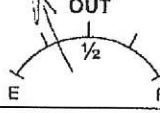
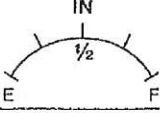
Co Reg No. 200510430K

SLW 3055J

Registered Address:  
126 Joo Seng Road #05-12 Gold Pine Industrial Building  
Singapore 368355  
Operation Address:  
160 Sin Ming Drive, #08-05 Sin Ming AutoCity  
Singapore 575722 Tel: 6266 2307 Fax: 6266 2306

## VEHICLE RENTAL AGREEMENT

STA No. 26018


<b>HIRER'S PARTICULAR</b> Name : (as in I/C) <u>Chen Wai Kuek</u> NRIC / PASSPORT No : <u>S 7388 228 A</u> Address (Res) : <u>3 Rivervale Link #08-28</u> <u>Singapore 345119</u> Name & Address of Employer : _____ Occupation : _____ Driving Exp : _____ D/L No : _____ D/L Type : Local/International Pass Date : <u>22-01-2018</u> Date of Birth : <u>26-06-1973</u> Tel : (O) _____ (R) _____ HP/PG : _____		Veh No : <u>SLB 94481C</u> Replace Veh No : _____ Mileage Out : <u>28303</u> Mileage Out : _____ Make & Model <u>Toyota</u> Make & Model _____ Auto / Manual <u>Auto</u> Auto / Manual _____ OUT : Date <u>28/5/18</u> OUT : Date _____ OUT : Time <u>10am</u> OUT : Time _____	
<b>ADDITIONAL DRIVER'S PARTICULARS</b> Name : (as in I/C) _____ NRIC / PASSPORT No : _____ Pass Date : _____ Date of Birth : _____ Address (Res) : _____ Tel/HP : _____		<b>RENTAL CHARGES</b> Daily <u>7</u> @\$ _____ Weekly @\$ _____ Monthly @\$ _____ Hours @\$ _____ Others @\$ _____ CDW @\$ _____ PAI @\$ _____ Delivery Service _____ <b>SUB-TOTAL \$</b> _____	
Refundable Deposit : _____ Cash/Nets/Cheque/VISA/MC Cards No : _____ (A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>FRONT</p>  </div> <div style="text-align: center;"> <p>LEFT</p>  </div> <div style="text-align: center;"> <p>RIGHT</p>  </div> <div style="text-align: center;"> <p>REAR</p>  </div> </div>		<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>OUT</p>  </div> <div style="text-align: center;"> <p>IN</p>  </div> </div> <b>EXTENSION</b> Collection Service _____ Misc. _____ <b>ESTIMATED TOTAL RENTAL \$</b> _____ Sales Person Code : _____ Hirer is responsible for the first \$1,500.00 excess for collision / damage to first party. (i.e.) RICA LEASING PTE LTD Vehicle (including windscreen) and also first \$1,500.00 excess for collision / damage to third party's vehicle for each and every accident / damage. Hirer's Signature _____ Addition Driver's Signature _____	
<b>ACCESSORIES CHECK</b> <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S / Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD/Cartridges <input type="checkbox"/> S / RIM			

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

### \* IMPORTANT

- ONLY PERSONS ABOVE 25 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY RICA LEASING PTE LTD.
- IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORIZED DRIVER :
  - shall report all accidents involving the said vehicle to the Owner immediately;
  - shall take immediate steps to complete and sign Form MAR 1 (Motor Accident Report Form) and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is report to the Owner);
  - shall report to the police within 24 hours from the occurrence, the following types of accidents :
    - injury case;
    - non-injury case involving a Government vehicle, or damage to Government property;
    - non-injury case involving a foreign vehicle (to obtain their motor insurance policy. Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax information);
    - non-injury case involving a pedestrian or cyclist.

RETURN OF VEHICLE-THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER/DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO RICA LEASING PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	DEPOSIT REFUND	SIGNATURE OF HIRER/DRIVER
28/5/18	5:55	28867				

5/8/2018

Invoice



**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-18-069214

Date of Request: 08/05/2018

Your Ref No:

Online Purchase

MBM Wheelpower Pte Ltd  
160 SIN MING DRIVE #06-02  
SIN MING AUTOCITY  
Singapore 575722

Dear Sir/Madam,

Enquiry Date 08/05/2018

Enquiry By Tan Yong Huat, Joseph

TP Vehicle No. XD7648E

Accident Date 07/05/2018

#### Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
XD7648E	AXA Insurance Pte Ltd	01/01/2018-31/12/2018	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.

☐ This is a computer generated document and requires no signature.

5/8/2018

Invoice



**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-18-069214

Date of Request: 08/05/2018

Your Ref No:

Online Purchase

MBM Wheelpower Pte Ltd  
160 SIN MING DRIVE #06-02  
SIN MING AUTOCITY  
Singapore 575722

Dear Sir/Madam,

Enquiry Date 08/05/2018

Enquiry By Tan Yong Huat, Joseph

Vehicle No. XD7648E

Accident Date 07/05/2018

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