### 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: SHC6695U/GS

WITHOUT PREJUDICE

4th July 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 SHC6695U & SKS3789H ALONG ECP - CITY ON 17.05.18

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHC6695U, 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: SKS3789H at the material time of the accident with the driver of our client's vehicle, Mr Tey Chee Wee

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SKS3789H, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	406.60 (Incl. GST)
(2) Loss of Rental - 2Days @\$95.02per day	\$	190.04
(3) Loss of Income - 2Days @\$100.00per day	\$	200.00
(4) GIA Search Fee	\$	2.00
	S	798.64

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

(1) Final Repair Bill, GIA report & sketch plan of SHC6695U

(2) Driver's I/C and Driving Licence

(3) Vehicle Registration card, Certificate of Insurance

(4) Check In/Out Voucher, GIA search

## 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: SHC6695U/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



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

15 MAR 2019

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

111 SOMERSET ROAD

#14-05-15 TRIPLEONE SOMERSET
SINGAPORE 238164

Dear Sir/ Mdm

OUR REF

: CC4/ASM18009074/K1ea3

YOUR REF : SKS 3789H

ACCIDENT INVOLVING SKS 3789H AND SHC 6695U ALONG ECP BEFORE FORT

**RD EXIT ON 17/05/2018** 

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 PREMIER AUTOMOTIVE SERVICES PTE LTD acting on behalf of the owner of SHC 6695U against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy. We also wish to advise that there is an excess of <a href="S\$\frac{S\$2,000.00}{2}\$ attached with Third Party Claims.">S\$2,000.00</a>

AXA shall keep you informed of when to make the excess payment, which cheque is to be made in favor of "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

As Insurers, AXA 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 AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to <a href="mailto:cst@axa.com.sg">cst@axa.com.sg</a> 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)



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

· 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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to <a href="mailto:cst@axa.com.sq">cst@axa.com.sq</a> or deliver it by hand to AXA's Customer Care Centre.

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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or <a href="mailto:cst@axa.com.sg">cst@axa.com.sg</a>. Please quote our 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)

#### WITHOUT PREJUDICE

AXA Insurance Singapore Pte Ltd No. 8 Shenton Way #27-01 Singapore 068811

Attn: The Motor Claims Department

Dear Sir/Madam,

ACCIDENT INVOLVING SHC6695U AND SKS3789H ALONG ECP - CITY ON 17.05.2018

We, Premier Taxis Pte Ltd, the registered owner of vehicle No SHC6695U. We hereby authorize you to release all compensation monies pertaining to the above-mentioned accident directly to our workshop, M/s Premier Automotive Services Pte Ltd. We, hereby authorize the said workshop, M/s Premier Automotive Services Pte Ltd to collect all compensation monies due to us from you or any other party, regarding the said accident.

Thank You.

Premier Taxis Pte Ltd Authorized Signatory 3014/19

# LETTER OF AUTHORITY

Premier Taxis Pte Ltd

Singapore 486443

23 Changi South Avenue 2 #03-02

To:

	And	
	Premier Automotive Services Pte 23 Changi South Avenue 2 #01-02	Ltd
	#01-02 Singapore 486443	ASSI
ACC	DENT INVOLVING SHC60	6954 & SKS 3789H
ON	17518 ATIALONG	FCP- City
J., _	*	
1.	I, TEY CHEE WEE	,NRIC No. 87 03 826 3
am tl time	he registered Hirery Relief Driver of the above accident.	of motor taxi No. SHC66954 at the
2.	Hereby you have my authority to:	a a
	(a) send a letter of demand on	
	(b) negotiate a settlement on r	[CONT.] CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC
		ept any offer on my behalf; ner (if necessary) on my behalf;
	<ul><li>(e) receive payment of the se</li></ul>	ettlement sum / compensation monies on my
	made payable to you.	st that the cheque for the settlement sum be
	200 JW W	
7	2 · S7028263/Z	30/4/19
Sion	ature with NRIC No.	Date
		Date
Nam	e: Jug cha lilee	
4	lalg Rel BTK 1 # 03-8	45
Cont	tact No.: 97699671	Email:
	2	



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

CLAIM REF

: S8M00HKC

: HITACHI CAPITAL ASIA PACIFIC PTE LTD

#### DISCHARGE VOUCHER

We, PREMIER AUTOMOTIVE SERVICES PTE LTD confirm that by letter of authorisation dated 30.04.19, we are authorised to and do hereby give this discharge for ourselves and on behalf of PREMIER TAXIS PTE LTD and the Hirer, TEY CHEE WEE of vehicle no. SHC 6695U

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 SIX HUNDRED SEVENTY EIGHT AND CENTS SIXTY FOUR ONLY. (S\$678.64) 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. SKS 3789H arising out of an accident with SHC 6695U on 17/05/2018.
- 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. SKS 3789H 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 SKS 3789H.

Dated this	
Signed by	(AUTHORISED SIGNATORY)
Company	Stamp Stamp
Witness	- Jye
Name	FOOLS SHILLY JYE
I/C No	930719-08-669
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

#### TAX INVOICE

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

29-Jun-2018

PAGE

1 OF 1

ITEM	Description Q1	ΓY	U.PRICE	AMOUNT	
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6695 U			\$	380.00
	TOTAL REPAIR COSTS AS RECOMMENDED BY		/EYOR GST @ 7% GRAND TOTAL		380.00 26.60 406.60

for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)



24 May 2018

To Whom It May Concern

Dear Sir/Madam

#### CERTIFICATION LETTER

This letter serves to inform that Tey Chee Wee of NRIC Number \$7038263F is a registered driver of SHC6695U. Tey Chee Wee is paying daily rental rate of \$95.02 (Inclusive of GST).

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

Thank you.

Yours sincerely

Chin Bee Lian (Ms)

Assistant Vice President

Taxis Administration

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Slugapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 20030497514



LACEMENT VEH GIVEN	IE3/NO
VEH NO	
9000 111000 100	JOB NO.

### CHECK IN / OUT VOUCHER

DRIVER'S NAME T	y Choe Wee	-		INDICATE AREA OF	DAMAGE HERE:
NRIC 8 70 38	263F	HANDPHONE 97	699671	REA	R $\square$
TAXI REGN NO. S	C 6 6954	MAKE / MODEL	10 th		一
DATE IN 2 05 8	TIME IN	22:05 (8	TIME OUT	mE	$\exists$
KILOMETRES IN	FUEL IN E 1/4 1/2 3/4 F	KILOMETRES OUT	FUEL OUT  E 1/4 1/2 3/4 F	4/1	
YES	NO	DATE / TIME TOWED II D D M M Y Y  DATE / TIME CALL TO DATE	H H M M		
THAT THE SAME IS I	N GOOD CONDITION A	ND TO MY SATISFACTI EMS LIST ABOVE, THIS	OVE SAID VEHICLE AND ION IN EVERY RESPECT S VOUCHER IS USED IN		
17.15°	ECKIN - Wee		where		
1	· ·	7	URE/DATE/TIME		
DRIVER'S SIGNATUR	RE/DATE/TIME	DRIVER'S SIGNAL	ORE / TIME	BODY MARKINGS 1 - Light Dent	5 – Damaged
CHECKED IN BY (PREMIER'S AUTHO	RISED WORKSHOP)	ORECKED OUT BY (PREMIER'S AUT)	IORISED WORKSHOP)	2 - Serious Dent 3 - Light Scratch 4 - Serious Scratch	6 – Chip 7 – Crack 8 – Peeling
SERVICE / REPAIRS	S DONE		DRIVER'S REMARKS		
□ SERVICING □ T / BELT □ AIRCON SYSTEM □ TURBO □ BRAKE SYSTEM □ CLUTCH SYSTE □ BULB □ UNDER CARRIA □ CPF □ BATTERY	M TP/G	TIME of ACCIDENT:			



# 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-18-075364

Date of Request:

17/05/2018

Your Ref No:

Online Purchase

Premier Automotive Services Pte Ltd 23 Changi South Ave 2

#01-02

Singapore 486443

Dear Sir/Madam,

**Enquiry Date** 

17/05/2018

Enquiry By

GARY SHI GUO RONG

TP Vehicle No.

SKS3789H

Accident Date

17/05/2018

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKS3789H	AXA Insurance Pte Ltd	20/05/2017-19/05/2018	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 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-18-075364

Date of Request:

17/05/2018

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

**Enquiry Date** 

17/05/2018

Enquiry By

GARY SHI GUO RONG

TP Vehicle No.

SKS3789H

Accident Date

17/05/2018

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:

[X] GIRO [] Cash [] Cheque