



Auto
Consultants
Pte Ltd

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

18th June 2019

**LEE SEAH WENG
27 MIMOSA WALK
SINGAPORE 807874**

Dear Sir/Madam,

**OUR REF : CC4/ASM18009148/R1fb3
YOUR REF : SJJ 2788B
ACCIDENT INVOLVING SJJ 2788B AND SJG 7116Z ALONG CTE TOWARDS ANG MO
KIO AVE 1 ON 16/05/2018**

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 SK AUTOMOBILE PTE LTD, acting on behalf of the owner of SJG 7116Z against your motor insurance policy.

Both parties involved have given conflict of version. Based on the circumstances of accident and both parties damage profile, there is no conclusive evidence to substantiate either's parties version. Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

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 pohkin@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)
- 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 6841 2132 or email us at pohkin@lkkauto.com.

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

Yours sincerely,

Chong Poh Kin
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: pohkin@lkkauto.com

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



AUTHORISATION TO ACT

I/We, H2 Air Conditioning (the third party claimant) of 227 Choa Chu Kang
Central #05-195 S (Geo) (address), owner of SG 71162 (vehicle no.) hereby
authorize SK Automobile Pte Ltd ("the workshop") to act for me with respect
to my claim for repair costs and/or rental loss of use ("claim") for my vehicle no.
SG 71162 that was damaged pursuant to the accident which occurred on 16/05/18 (date)
along CTE Slip Road > Ang Mo Kio Ave 1 (location) involving
vehicle no/s SJT 2788 B ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they
deem fit and the workshop is further authorized to received payment further to settlement of my
claim with payment cheque/s being made in favour of the workshop.



I further acknowledge that any settlement 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.

Dated this 17 (day) of May (month) 20 18 (year)

Signed by "the third party claimant"

(with company stamp if applicable)

Signed by "the workshop"

(with company stamp)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJJ 2788B (Insd veh)	Model: Toyota Vios (1497cc)
	SJG 7116Z (TP veh)	
Date of Accident/ Time:	16/05/2018	

Repair Estimate	: \$	12,173.04	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum (Global Sum)	: \$	1,050.00	
Payee Name : SK AUTOMOBILE PTE LTD			
Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below)			
A) For Non GIA Registered Workshop:		Agreed Liability 50 (%)	
B) For GIA Registered Workshop:		BOLA Applicable: Yes/ No BOLA Scenario No: _____	
BOLA Liability: _____ (%)		Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 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.
- 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: *Nguyen Van*
Date: 11/06/2020

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: *Huey Lee*
Date: 11/06/2020

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date:

CARS FOR RENT (2016) PTE LTD

5 TANAH MERAH KECHIL ROAD

#17-05 SINGAPORE 466665

TEL: 6789 5155 FAX: 6783 5155

INVOICE**Invoice To:****TEH JI JIE, JACK**

BLK 541 CHOA CHU KANG ST 52

#12-40 SINGAPORE 680541

DATE	INVOICE #
25/05/2018	VII51056

VEH REG NO	TERMS
SJG7116Z	DUE ON RECPT

	DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
	CAR RENTAL FROM 17/05/18 TO 24/05/18	7	\$200.00	\$1,400.00
			TOTAL	\$1,400.00



CARS FOR RENT (2016) PTE LTD

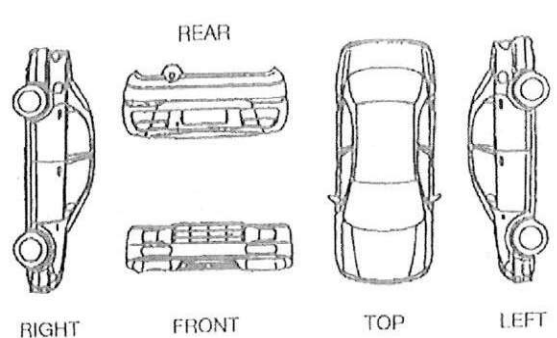
5 Tanah Merah Kochil Road #17-05 S 46665
Tel: 6789 5155 Fax: 67835155

No: 2630

ROC No: 201609732N

VEHICLE RENTAL AGREEMENT

53971162 SK Auto

HIRER'S PARTICULAR Name: (as in I/C) <u>Teh Zi Jie, Jack (Dai Zi Jie)</u> NRIC/PASSPORT No: <u>S91090522</u> Address (Res): <u>541 Choa Chu Kang St 52</u> <u>#12-40 S(680541)</u> Name & Address of Employer: _____ Occupation: _____ Driving Exp: <u>3yr 9mks</u> Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: <u>27-12-1991</u> Tel: (O) _____ (R) _____ HP/PG <u>91591907</u>		Vehicle No: <u>SJH 9027D</u> Replace Veh No: _____ Mileage Out: _____ Mileage In: _____ Make & Model: <u>HONDA STREAM</u> Auto / Manual Group: _____ OUT : Date <u>17-05-2016</u> Time: <u>11:30hrs.</u> HIRE/PERIOD EXPIRY: _____ COLLISION DAMAGE WAIVER Excess <u>3000</u> YES / NO PERSONAL ACCIDENT INSURANCE YES / NO																																														
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) _____ NRIC/PASSPORT No: _____ Address (Res): _____ Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: _____ Occupation: _____ Driving Exp: _____		CHARGES <table border="1"> <tr> <td>Daily</td> <td>7 @ \$ 200.00</td> <td>per day</td> <td>1400</td> <td>00</td> </tr> <tr> <td>Weekly</td> <td>@ \$</td> <td>per week</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td>@ \$</td> <td>per month</td> <td></td> <td></td> </tr> <tr> <td>Hours</td> <td>@ \$</td> <td>per hour</td> <td></td> <td></td> </tr> <tr> <td>Others</td> <td>@ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CDW</td> <td>@ \$</td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td>PAI</td> <td>@ \$</td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td>Delivery Service</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">SUB-TOTAL \$</td> <td>1400</td> <td>00</td> </tr> </table>		Daily	7 @ \$ 200.00	per day	1400	00	Weekly	@ \$	per week			Monthly	@ \$	per month			Hours	@ \$	per hour			Others	@ \$				CDW	@ \$	per day/month			PAI	@ \$	per day/month			Delivery Service					SUB-TOTAL \$			1400	00
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VEHICLE CHECK LIST D - DENTS S - SCRATCHES A - ACCIDENTS RIGHT FRONT TOP LEFT 		PETROL LEVEL <table border="1"> <tr> <td>Out</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> </table>		Out	E	1/4	1/2	3/4	F	In	E	1/4	1/2	3/4	F																																	
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ACCESSORIES CHECK <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 <input type="checkbox"/> Cartridges		EXTENSION Collection Service _____ Misc. _____ TOTAL CHARGES \$ _____ Rented out by: _____ Hirer's Signature <u>[Signature]</u> Addition Driver's Signature _____																																														

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/ credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

* IMPORTANT

- ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD

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 DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARS FOR RENT (2016) 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	SIGNATURE OF HIRER/DRIVER
<u>24/5/16</u>	<u>4:30pm</u>				<u>[Signature]</u>

**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-18-075156
Date of Request: 17/05/2018

Your Ref No: Online Purchase

SK Automobile Pte Ltd
23 Kaki Bukit Avenue 4
#03-01 Vicom Inspection Centre
Singapore 415933

Dear Sir/Madam,

Enquiry Date: 17/05/2018
Enquiry By: Juliana Binte Johari
TP Vehicle No: SJJ2788B
Accident Date: 16/05/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJJ2788B	AXA Insurance Pte Ltd	29/09/2017-28/09/2018	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.

5/17/2018

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
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TAX INVOICE

Our Ref No: GR-18-075156
Date of Request: 17/05/2018

Your Ref No: Online Purchase

SK Automobile Pte Ltd
23 Kaki Bukit Avenue 4
#03-01 Vicom Inspection Centre
Singapore 415933

Dear Sir/Madam,

Enquiry Date: 17/05/2018
Enquiry By: Juliana Binte Johari
IP Vehicle No: SJJ2788B
Accident Date: 16/05/2018

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