MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #02-03 Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 201427944N)

Date

: 24/05/2019

Your Ref

: SKU5727M

To

: AXA INSURANCE SINGAPORE PTE LTD

Attn

: Motor Claims Department

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE SJS8480B & SKU5727M ON 13/05/2018 AT ALONG DRIVEWAY FROM GRAND HYATT DROP OFF POINT TOWARDS SCOTTS ROAD.

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No.198166 @ S\$2,889.00 (Inclusive Of 7% GST)
- 2) Loss of Use @ S\$1,200.00 (6 Days x S\$200)
- 3) LTA Search @ S\$29.00
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

Thank You.

Yours faithfully,



Sharon Chia

HP: 9188 6931

E-mail: mg3solution@gmail.com

LETTER OF AUTHORITY

Name	: NO KOK YOUG , ger	raid_		
Address	: BLK 101 GANGSA	RIAD		
	#10-11 SINGAPORE	670101		
Contact No	:			
то:	AXA INJURANCE	SINGAPERE	PTE L7D	
Dear Sirs,				
ACCIDENT	CIOGYB SLE DNIVLOVNI	AND_SKU	5727M ON 1	3 05 18
I/We, motor ca Please r	Ng Eok Yong Geard Ng Eok Yong Gearno. SJS 8480 B	rald	, am/are the register	red owner of
accider	nereby authorize you to release all control M/S MG SOLUTION PTE LTD an D whom I had authorized to collect	d forward your sett	lement cheque to M/S M	
Thank	you			
	10		0	
×	The same of the sa		1	
Signat	ture of Claimant	W	itness By	



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-18-073604

Date of Request:

15/05/2018

Your Ref No:

WALK IN HONG

MG SOLUTION PTE LTD

23 KAKI BUKIT AVENUE 4 #02-03B, VICOM INSPECTION CENTRE

SINGAPORE 415933

Dear Sir/Madam.

Date of Accident:

13/05/2018

Vehicle No:

SJS8480B

SKU5727M

Place of Accident:

DRIVEWAY FROM GRAND HYATT TOWARDS SCOTTS RD

Involving Vehicle No:

With reference to your application for the accident report, we have attached the following

DOCUMENTS	ACCIDENT LOCATION			
01011	III STANDARD CONTRACTOR CONTRACTO	PER DOC (S\$)	IQTY	AMOUNT (S\$)
GST Amount DRIVEWAY FROM GRAND HYATT TOWARDS SCOTTS RD 14.00 1				13.08
	ue (GST Inclusive)			0.92
Total Amount D	de (GST inclusive)			14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque



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TAX INVOICE

Our Ref No:

GR-18-073603

Date of Request:

15/05/2018

Your Ref No:

WALK IN HONG

MG SOLUTION PTE LTD

23 KAKI BUKIT AVENUE 4 #02-03B, VICOM INSPECTION CENTRE

SINGAPORE 415933

Dear Sir/Madam,

Your Vehicle No:

SJS8480B

Date of Accident:

13/05/2018

Place of Accident:

GRAND HYATT TWDS SCOTTS RD

Involving Vehicle No: SKU5727M

DESCRIPTION	AMOUNT (S\$)		
E-File Search Fee (Public)	14.02		
GST Amount	0.98		
Total Amount Due (GST Inclusive)	15.00		

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKU 5727M (Insd veh)	
	SJS 8480B (TP veh)	Model: Honda Freed (1496cc)
Date of Accident/ Time:	13/05/2018	

Repair Estimate	:\$	11,072.19				
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 (Glob	oal Sum) :\$	1,500.00				
Payee Name : MG Solution						***************************************
Is Third Party Workshop GIA	Registered?	[] YES [X]	NO (Kindly i	ndicate below)	
A) For Non GIA	Registered Work	shop:	Agreed Liability	50 (%)	
) For GIA Registered Workshop:		BOLA Applicable: Yes/ No BOLA Scenario No:				
BOLA Liabilit	y:(%)		Assessed Liability	(*):	(%)	
* Assessed Li	ability to be filled	only for chain collisio	ns and for cases v	vhere BOLA do	oes not apply.	
						1

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/TORTFEASOR 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/torsfeasor) for any and all losses (past/present/future) arising from this acombent.

We confirmed that we have the suthority of our client to act for and on their behalf in this accident.

LKK

Signature of workshop representative / Workshop stamp
Name of Representative:

Date:

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date

XAQ

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

Date:

MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #02-03 Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 20-1427944-N)

TAX INVOICE

Bill To:

AXA INSURANCE PTE LTD

8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811 INVOICE No: TI 209133

PB No: 198166

Date: 30-April-2020

ATTN: MOTOR CLAIMS DEPARTMENT

Vehicle Number: SJS 8480B

QTY	DESCRIPTION	AMOUNT
QTY 1	To carried out accident repair as per surveyor's recommendation (Lump Sum)	\$ 1,350.00
	BEFORE GS 7% GS TOTAL	190

Cheque should be made payable to MG Solution Pte Ltd

Co's stamp & Authorised Signature



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

09 May 2019

Krishna Sadashiv 4 Rifle Road #04-03 Singapore 588374

Dear Sir/ Mdm

OUR REF : CC4/ASM18009297/Gwb3

YOUR REF

: SKU 5727M

ACCIDENT INVOLVING SKU 5727M & S.IS 8480B ALONG SCOTTS RD ON 13/05/2018

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 Mg Solution Pte Ltd acting on behalf of the owner of SJS 8480B against your motor insurance policy.

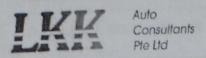
Based on the accident report and accident scenario, we are of the opinion that this is a case of conflicting version kindly forward to us with any evidence/information to proof.

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. You 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 Vivianlau@lkkauto.com within 7 days 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



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

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.

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 6841 8625 or email us at Vivianlau@lkkauto.com

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

Yours sincerely,

Vivian Lau
Case Handler
DID: 6841 862

DID: 6841 8625 FAX: 6741 4108

EMAIL: Vivianlau@lkkauto.com

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