

INS. CASE OWNER:

IDAC:

Surveyor:

DOI:

Date / Time:

Registered in Meriton:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :\$S

D.O.A.:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup):

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: \$S 1,400

(3 days) Reduction: 64 %

Email ☒ Call ☐

FINAL SETTLEMENT

Date/Time: 1-8-18

Confirm with: GARY

Email ☒ Call ☐

Final Liability: % 100

(Agreed / Assessed) BOLA S/N No.: 31

If NO or B 28, Ass. Lia:

Repair Cost: \$S 1,440.00

DID REAR END TP

Loss of Rental (LOR): \$S 391.20

(4 days) x \$99.30

Loss of Use (LOU): \$S -

(\$ x days)

Loss of Income (LOI): \$S -

(\$ x days)

LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search \$S 2.00

Medical: \$S -

Disbursement: \$S -

(e.g. Tow / Independent)

Legal Cost \$S -

Total: \$S 1,891.20

Global Sum \$S:

FINAL PAYMENT

Date/Time: 1-8-18

Confirm with: GARY

Email ☒ Call ☐

Payee 1: \$S 1,891.20

Name 1: PREMIER AUTOMOTIVE SERVICES PTE LTD

Payee 2: (Strike if N.A.) \$S

Name 2:

Payee 3: (Strike if N.A.) \$S

Name 3:

COPY SENT

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: \$350

RECEIVED 10 AUG 2018

Kahin

REF: ASM(MXA)

9327/Kle

ASSIGNMENT

21 Jan 2016

From: Date: 32052018

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: SHD 1012T

at Workshop No:

Premier

Insured:

Policy No:

Claims No:

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR. Seen: Consistent? : Yes or No

Est. Repairs: 2 days Res: Yes or No

Lum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle IN / OUT

Veh Type:

SHD 1012T

Veh Regn:

Type: M/Car / M/Cycle / Bus / Van / Lorry / T/O / Prime Mover /

Truck / Trailer or:

Make:

K/A optima

cc: 1685

Colour:

Silver

ACC:

Insured:

Std / NI / NA

Sp Reading:

258953

T.Radio:

Insured:

Std / NI / NA

Eng No:

Ch No:

KNA6M414MF5658689

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inoper / Jammed / Leaked / Burnt or

Brake: Inoper / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / Rim or

Tyre Size: F:

205/65R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Maxxors

Front:

Rear:

R/Bal:

7

mm

R/Bal:

7

mm

L/Bal:

7

mm

L/Bal:

7

mm

D.O.A:

20/5/18

D.O.A:

22/5/18

Survey held at:

Premier

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear

The U/C / Chassis frame / Body Structure affected (due to collision)

Date / Time: Action / Instruction

24/5/18

Cashed 4581400/24/5/18

PIP

(RED: 3,471.80 64%)

EveTime, File Path to:



Prel. Report

11



Final Report

OdeTime, File Path to:

12

Add Fee:



Site Insp: 15



Inter-view: 15



Tech. Serv: 15



Welding: 15

Report Format:

Lump Sum / TB P/O

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transport:

1 - F: 1

1 - H:

1 - M:

1 - S:

1 - T:





LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD			Ref : CC4/ASM18009327/K1ea3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811			Date : 22-05-2018	
			Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SJL 4408A	Veh. Inspected	SHD 1012T
	Policy No.		Coverage (\$)	0.00
	Claim No.	S8M00HUV	Excess (\$)	0.00
	Assign From		Assign Date	22/05/2018
2. Vehicle Particulars & Condition				
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	-	Steering	
	Brakes		Modification	
	General			
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre			mm
	L/H Front Tyre			mm
	R/H Rear Tyre			mm
	L/H Rear Tyre			mm
4. Description of Damages				
5. General Information				
	Accident Date	20/05/2018	Inspection Date	22/05/2018
	Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

21-May-18

ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHD 1012 T

1 pc	CRDI emblem <i>new</i>	\$ 27.00
1 pc	Kia emblem <i>X</i>	\$ 29.00
1 pc	Rear bumper <i>Rebrand</i>	\$ 696.00
1 pc	Rear bumper lower cover <i>X</i>	\$ 206.00
2 pcs	Rear bumper side bracket o/s & n/s @ \$29.00 <i>X</i>	\$ 58.00
1 pc	Rear bumper inner sponge <i>X</i>	\$ 114.00
1 pc	Rear bumper reinforcement <i>X</i>	\$ 607.00
2 pcs	Rear bumper stay o/s & n/s @ \$53.00 <i>X</i>	\$ 106.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00 <i>X</i>	\$ 36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00 <i>X</i>	\$ 36.00
		<hr/>
		\$ 1,915.00
Less 10%		\$ 191.50
		<hr/>
		\$ 1,723.50

S/NETT

1 set	Rear bumper clips <i>new</i>	\$ 48.00
1 set	Reverse sensor <i>still</i>	\$ 280.00
<i>Rear Bootlid has scratch sticker - new \$100</i>		200
Towing Fee		\$ 50.00 <i>✓</i>
Sundry <i>new</i>		\$ 50.00 <i>20</i>
To dismantle / replace/test reverse sensor to new bumper and reset to the same		\$ 120.00 <i>20</i>
To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.		\$ 180.00 <i>X 17</i>
To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the end panel		\$ 700.00 <i>300</i>
To putty and spray painting on rear bumper, end panel, Bootlid lower garnish <i>X</i>		\$ 600.00 <i>360</i>
To apply rustproofing on the repaired and replaced panels.		\$ 120.00 <i>X 17</i>
		<hr/>
		\$ 3,871.50

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

Kalvin (Clerk)
22/5/18 1030h
2 Phys
PIP
Before Pire p the

24/5/18
online 4/5 \$1400/2675

LKK Auto Care Centre
the Repairer's notice of the following:

- To remedy before after spray painting
- To display damaged parts for 14 days
- Parts prices are subject to confirmation
- Threatening to sue on a "Without Prejudice" basis
- Not to be used as a reference for any other company

A: *24/5/18*
S: *24/5/18*
D: *24/5/18*



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 24/5/2018

Survey Details:

Date of loss	20-May-18
Date of appointment	21-May-18
Date of survey	22-May-18
Location of survey	Premier Automotive Services Pte Ltd

Vehicle Details:

Claim Type:	Third party
Vehicle number	SHD 1012T
Make and Model	KIA OPTIMA-1.7 D (A)
Date of registration	21-Jan-16
Excess	
Market Value	\$ -
Part Rebate	\$ -
Nett Loss	\$ -

Repair details:

Initial Estimate	\$ 3,971.50
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 998.70
Check items (estimate)	\$ -
Labour	\$ 750.00
Total	\$ 1,748.70
Lump Sum(if applicable)	\$ 1,400.00

Number of days for repair	<u>2 days</u>
---------------------------	---------------



Re:MANDATE REQUEST FOR S8M00HUV

Type

 Question

Message

LIAB CLEAR, PLEASE PROCEED FOR DS QUANTUM AS PROPOSED.

Reply



MANDATE REQUEST FOR S8M00HUV

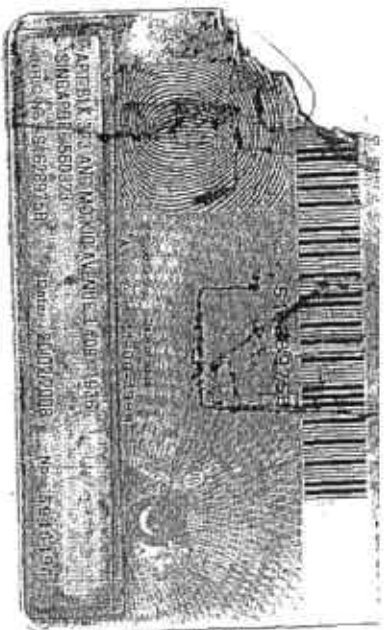
Type

🔗 Question

Message

Liability: Insured rear ended third party vehicle. Spoken to insured and he aware that his NCD is affected and AXA to settle at best. Settlement: Repair Cost : \$1,498.00 (w/GST) Loss of Rental: \$397.20 (4days x \$99.30) GIA Search: \$2.00 Total: \$1,897.20 Revised Immediate Advice with Mandate and marked estimate uploaded for your easy reference. Please kindly let us have your approval / instruction if any. Thank you - Asher Sng (18/07/2018)

Reply



Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	21 Jan 2016 / 08:45:11	Receipt No.:	AACCK001-AX239-160121-000007
Asset Type:	Vehicle	Transaction Amount:	\$68,642.00
Asset ID:	SHD1012T	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20160121084511408533		

Vehicle No.:	SHD1012T
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	21 Jan 2016
Original Registration Date:	21 Jan 2016
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414MF5658689
Engine No.:	D4DFH314468
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2015
Open Market Value:	\$22,282.00
Minimum PARF Benefit:	\$13,917.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	21 Jan 2016 08:45:11
COE No.:	2016012101003555R
COE Expiry Date:	20 Jan 2024
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$45,307.00
Lifespan Expiry Date:	20 Jan 2024

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5095103893

Cover : Third Party

1. Index mark and Registration Number of Vehicle

: **SHD1012T**

Chassis Number

: KNAGM414MF5658689

2. Name of Policyholder

: PREMIER TAXIS PTE. LTD.

3. Effective Date of Insurance

: 20 Oct 2017

4. Expiry Date of Insurance

: 19 Oct 2018

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any licensed taxi driver driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use*

(a) Use as a Taxi.

(b) Use for social domestic and pleasure purposes.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION I) : N/A

EXCESS (SECTION II) : S\$3,500

INSURE WITH COE : N/A

HIRE PURCHASE COMPANY : UNITED OVERSEAS BANK LIMITED

SUM INSURED : N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)

Date of Issue : 16 Oct 2017 17:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive

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: SHD1012T/GS

WITHOUT PREJUDICE

27th June 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 SHD1012T & SJL4408A ALONG MARINA GARDEN DRIVE ON 20.05.18

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHD1012T, 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: SJL4408A at the material time of the accident with the driver of our client's vehicle, Mr Ng Poh Seng

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SJL4408A, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	1498.00 (Incl. GST)
(2) Loss of Rental - 5Days @\$99.30per day	\$	496.50
(3) GIA Search Fee	\$	2.00
	\$	<u>1996.50</u>

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

- (1) Final Repair Bill, GIA report & sketch plan of SHD1012T
- (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: SHD1012T/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

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Thursday, 7 June 2018 5:45 PM
To: 'ANDREWLEE_05@OUTLOOK.COM'
Subject: ACCIDENT INVOLVING SJL 4408A AND SHD 1012T ALONG CENTRAL BOULEVARD ON 20/05/2018

207 JUNE 2018

LEE KOK LI / LEE MING YANG

Dear Sir/ Mdm

OUR REF : CC4/ASM18009327/K1ea3
YOUR REF : SJL 4408A
ACCIDENT INVOLVING SJL 4408A AND SHD 1012T ALONG CENTRAL BOULEVARD ON 20/05/2018

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 SHD 1012T 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 SHD 1012T. 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 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.

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

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

WITHOUT PREJUDICE

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

Attn: **The Motor Claims Department**

Dear Sir/Madam,

ACCIDENT INVOLVING SHD1012T & SJL4408A ON 20.05.18

We, Premier Taxis Pte Ltd, the registered owner of vehicle No: **SHD1012T**. 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.

A handwritten signature in blue ink is written over a circular blue ink stamp. The stamp contains the text "Premier Taxis Pte Ltd" around the perimeter and "SINGAPORE" at the bottom.

Premier Taxis Pte Ltd
Authorized Signatory

Date

7/8/18



redefining / insurance

This Settlement excludes any bodily injuries arising out of the above said accident and pertaining to property damages only.

CLAIM REF : S8M00HUV
INSURED : LEE KOK LI

DISCHARGE VOUCHER

We, PREMIER AUTOMOTIVE SERVICES PTE LTD confirm that by letter of authorisation dated 1.8.18, we are authorised to and do hereby give this discharge for ourselves and on behalf of PREMIER TAXIS PTE LTD and the Hirer, NG POH SENG of vehicle no. SHD 1012T

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 ONE THOUSAND EIGHT HUNDRED NINETY SEVEN AND CENTS TWENTY ONLY. (S\$1,897.20) 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. SJL 4408A arising out of an accident with SHD 1012T on 20/05/2018.
- 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. SJL 4408A 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 SJL 4408A.

Dated this 7 day of August 2018.

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp _____

Witness : _____
Name : SHAFAWATI MO RABU
I/C No : S8309324B
Address : 23 CHANGI SOUTH AVENUE 2
#01-02 S(486443)



PREMIER AUTOMOTIVE SERVICES PTE LTD
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)
TEL: 65438875 / 65436689 FAX: 62141511
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

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

TAX INVOICE

DATE 27-Jun-2018
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHD 1012 T			\$ 1,400.00
TOTAL LUMP SUM REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 1,400.00
GST @ 7%				\$ 98.00
GRAND TOTAL				\$ 1,498.00


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 Ng Poh Seng of NRIC Number S1628975B is a registered driver of SHD1012T. Ng Poh Seng is paying daily rental rate of \$99.3 (Inclusive of GST).

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

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to read "Chin Bee Lian".

Chin Bee Lian (Ms)
Assistant Vice President
Taxis Administration

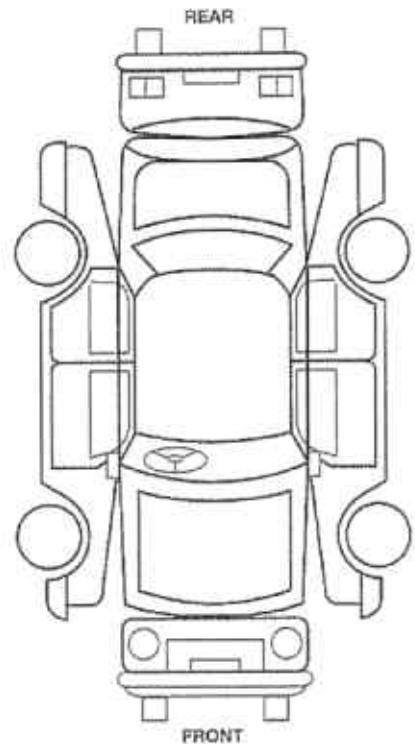
Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 200304975H

CHECK IN / OUT VOUCHER

DRIVER'S NAME <u>Ng Poh Seng</u> <u>S16289758</u>	
NRIC <u>S 16289750</u>	HANDPHONE <u>93475650</u>
TAXI REGN NO. <u>S HD 10124</u>	MAKE / MODEL <u>KO2</u>
DATE IN <u>200518</u> TIME IN <u>2434</u>	DATE OUT <u>240518</u> TIME OUT <u>1150</u>
KILOMETRES IN _____ FUEL IN _____	KILOMETRES OUT _____ FUEL OUT _____
<input type="checkbox"/> E <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> F

INDICATE AREA OF DAMAGE HERE:



BODY MARKINGS

- | | |
|---------------------|-------------|
| 1 - Light Dent | 5 - Damaged |
| 2 - Serious Dent | 6 - Chip |
| 3 - Light Scratch | 7 - Crack |
| 4 - Serious Scratch | 8 - Peeling |

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED INTO WORKSHOP

D D M M Y Y H H M M

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION

D D M M Y Y H H M M

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN
CHECK OUT
Ng Poh Seng
DRIVER'S NAME

Ng Poh Seng
DRIVER'S NAME

[Signature]
DRIVER'S SIGNATURE / DATE / TIME

[Signature]
DRIVER'S SIGNATURE / DATE / TIME

CHECKED IN BY
(PREMIER'S AUTHORISED WORKSHOP)

CHECKED OUT BY
(PREMIER'S AUTHORISED WORKSHOP)

SERVICE / REPAIRS DONE	DRIVER'S REMARKS
<input type="checkbox"/> SERVICING <input type="checkbox"/> OTHERS: <input type="checkbox"/> T / BELT <input type="checkbox"/> AIRCON SYSTEM <input type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT: <input type="checkbox"/> TURBO D D M M Y Y H H M M <input type="checkbox"/> BRAKE SYSTEM <input type="checkbox"/> CLUTCH SYSTEM <input type="checkbox"/> BULB <input type="checkbox"/> UNDER CARRIAGE <input type="checkbox"/> CPF <input type="checkbox"/> BATTERY	<u>TP1W</u>



RECORDS MANAGEMENT CENTRE

**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-18-077049

Date of Request: 21/05/2018

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 21/05/2018

Enquiry By GOH WEE DEK

Vehicle No. SJL4408A

Accident Date 20/05/2018

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



RECORDS MANAGEMENT CENTRE

**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-18-077049

Date of Request: 21/05/2018

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date: 21/05/2018
Enquiry By: GOH WEE DEK
Vehicle No.: SJL4408A
Accident Date: 20/05/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJL4408A	AXA Insurance Pte Ltd	14/06/2017-13/06/2018	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.

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SJL 4408A (Insd veh)	Model:	TPVD KIA OPTIMA-1.7 D
	SHD 1012T (TP veh)		(A)
Date of Accident:	20/05/2018		

Global Sum Settlement	: [] Yes	[X] No	
Repair Estimate	: \$	4,249.51	
Final Repair Cost	: \$	1,498.00	
Loss of Token Sum	: \$		days at \$0.00 per day
Rental (if any)	: \$	397.20	4 days
LTA / GIA Search Fee	: \$	2.00	

Others:	: \$	0.00
---------	------	------

	: \$	
Final Settlement Sum	: \$	1,897.20

Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)	
A) For Non GIA Registered Workshop:	Agreed Liability _____ 100 _____ (%)
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 _____	

Payment Instruction: Payee's Breakdown		
1)	PREMIER AUTOMOTIVE SERVICES PTE LTD	: \$ 1,897.20

JOANNE LEE KHANG MIN
LKK Auto Consultants Pte Ltd

30/08/2018
Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

Service Request Details

ClaimSBM00HUV

ReferenceCC4/ASM18009327/K3ea3a2

Loss Date20 May 2018

Request Date21 May 2018

Due Date

Vendor NameLKX AUTO CONSULTANTS PTE LTD (TP)

Type of LossThird Party Vehicle Damage

ServicesPending verification - Direct Settlement

Actions

Next StepWait for Approve Invoice

Add Invoice

Vehicle Information

Incident Vehicle Registration #SHD3D1ZT

MakeTPVD KIA

ModelOPTIMA-1.7 D (A)

Service Address

...

Primary Contact/Insured

LEE KOK LI
BLK 104 TOWNER ROAD, #02-316 TOWNERVILLE,
322104, Singapore
96724756

Claim Handler

CHAN Kian Chuan
6568804269
klanchuan.chan@axa.com.sg

Additional Instructions

Document TypeDocument SubType

+ Upload Documents

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
LKX Invoice1 (5).pdf	Invoice	Surveyor/ Assessor expense	LKX AUTO CONSULTANTS PTE LTD (TP)	30 August 2018

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
payment breakdown-3HID 10121.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
LOD.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
DISCHARGE VOUCHER.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
AUTHORISATION TO ACT F0494.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
LETTER TO OI.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
WORKSHOP INVOICE.pdf	Invoice	Repairer	LKK AUTO CONSULTANTS PTE LTD (TP)	30 August 2018
RENTAL.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	18 July 2018
GIA SEARCH.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	18 July 2018
LKK Survey Photo.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	18 July 2018
Immediate Advice with Mandate.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	18 July 2018
LKK Resurvey Photo.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	18 July 2018
TP ESTIMATE - MARKED.pdf	Reports & Statement	Estimate / Quotation	LKK AUTO CONSULTANTS PTE LTD (TP)	24 May 2018
Immediate Advice.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	24 May 2018
SJL4408A INSD GIA REPORT.PDF	Reports & Statement	GIA Report	DHAKAL Paghav	21 May 2018











NAME	TYPE	SUBTYPE	AUTHOR	DATE UPLOADED
 TP #81 RECEIVED FROM WORKSHOP WITH GIA REPORT .pdf	Letters and Correspondence	Workshop	DHAKAL Rajhwa	21 May 2018

Assessment Details

General & Workshop Details				Vehicle Condition			Taxes & Ratio		Parts & Labour		Miscellaneous		Summary		Parts			
	EDIT	SR NO	QUAN TITY	MATERIAL	SIDE	PART NAME	PART NUMBER	REPAIR/REPLACE (PARTS)	CONDITION	LIST PRICE	DEPLJ BTR%	DISC QUNT%	SALV AGE%	PART PRICE(NET)	ACTION (PARTS)	REMOVE		
		1	1			CRODI EMBLEM			Necessary	27		10		24.3	Approve			
		2	1			KIA EMBLEM			Serviceable	0	0	0	0	0	Deny			
		3	1			REAR BUMPER			Deformed	696		10		626.4	Approve			
		4	1			REAR BUMPER LOWER COVER			Serviceable	0	0	0	0	0	Deny			
		5	2			REAR BUMPER SIDE BRACKET O/S & N/S			Serviceable	0	0	0	0	0	Deny			
		6	1			REAR BUMPER INNER SPONGE			Serviceable	0	0	0	0	0	Deny			
		7	1			REAR BUMPER REINFORCEMENT			Serviceable	0	0	0	0	0	Deny			
		8	2			REAR BUMPER STAY O/S & N/S			Serviceable	0	0	0	0	0	Deny			
		9	2			REAR BUMPER REINFORCEMENT LOWER BRACKET			Serviceable	0	0	0	0	0	Deny			
		10	2			REAR BUMPER REINFORCEMENT UPPER BRACKET			Serviceable	0	0	0	0	0	Deny			
Labour																		

EDIT	SIR NO	REPAIR/REPLACE (LABOUR)	PART NAME	LABOUR R&R	LABOUR REPAIR	PAINT	ACTION (LABOUR)	COMMENT	REMOVE
	3		TO DISMANTLE /REFIT THE INNER GARNISHES ,INNER LININGS ,INNER TRIMS ,CUSHION SEAT ,CARPET ,ETC TO FACILITATE REPAIRS	0	0	0	Deny		
	4		TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS INCLUDING KNOCK -OUT ,STRAIGHTEN ,REPAIR,RESHAPE AND ADJUST OF THE END PANEL	300	0	0	Approve		
	5		TO PUTTY AND SPRAY PAINTING ON REAR BUMPER,END PANEL,BOOTLID LOWER GARNISH	360	0	0	Approve		
	6		TO APPLY RUST PROOFING ON THE REPAIRED AND REPLACED PANELS	0	0	0	Deny		

Assessment Details

General & Workshop Details		Vehicle & Driver Details		Vehicle Condition		Taxes & Rates		Parts & Labour		Miscellaneous		Summary	
EDIT	SR NO	NAME	ACTION	AMOUNT	COMMENT								
	1	DAYS OF REPAIR,2 DAYS	Approve										
	2	SET REAR BUMPER CLIPS	Approve	48	NECESSARY								
	3	SET REVERSE SENSOR	Approve	200	SHORTED								
	4	REAR BOOTLID LOWER GARNISH STICKER	Approve	100	NECESSARY								
	5	SUNDRY	Approve	20	NECESSARY								

Assessment Details

General & Workshop Details		Vehicle & Driver Details		Vehicle Condition	Taxes & Ratio	Parts & Labour	Miscellaneous	Summary	Claim Amount
Claim Amount		\$1,748.70							\$1,748.70
CATEGORY		ESTIMATE	REVISED AMOUNT						
Labour		\$730.00	\$730.00						
Miscellaneous		\$368.00	\$368.00						
Spare Parts		\$650.70	\$650.70						

Assessment Details

General & Workshop Details		Vehicle & Driver Details	Vehicle Condition	Taxes & Ratio	Parts & Labour	Miscellaneous	Summary	Claim Amount
Claim Amount		\$1,400.00						\$1,400.00
CATEGORY		ESTIMATE	REVISED AMOUNT					
Miscellaneous		\$1,400.00	\$1,400.00					