



Auto
Consultants
Pte Ltd

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

12 OCTOBER 2018

TENG KERWIN
BLOCK 90 TANGLIN HALT ROAD
#31-328
SINGAPORE 141090

By Post & By Email

Dear Sir/Madam,

OUR REF : CC4/ASM18010406/Ghb3

YOUR REF : SLW 1328K

ACCIDENT INVOLVING SLW 1328K AND SJE 9545R ALONG RAFFLES AVENUE ON
03.06.2018

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 CITY AUTO PTE LTD, acting on behalf of the owner of SJE 9545R against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third-Party vehicle SJE 9545R while making a turn. As such, liability may not be on your favour.

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 vicalpeh@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)



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- 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 vicalpeh@lkkauto.com.

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

Yours sincerely,



Vic Alpeh
Case Handler
DID: 6841 2096
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

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

tengkerwin@hotmail.com
(Email)

Vic (LKKAUTO)

From: Vic (LKKAUTO)
Sent: Friday, 12 October, 2018 4:25 PM
To: tengkerwin@hotmail.com
Cc: Admin A; Vic (LKKAUTO)
Subject: YOUR REF: SLW 1328K_ACCIDENT INVOLVING SLW 1328K AND SJE 9545R ALONG RAFFLES AVENUE ON 03.06.2018



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- 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.

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If you need any clarification, please do not hesitate to contact us at 6256 3561 or email us at vicalpeh@lkkauto.com.

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

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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CITY AUTO PTE LTD

BLK 8, SIN MING IND, ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643.
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel: 9823 9898
Co. Reg. No.: 198503435C GST Reg. No.: M2-8920979-4

RE: LETTER OF AUTHORIZATION

Name of owner: SOH KEE HOCK NRIC: S1482218F

Address: APT BLK 580 PASIR RIS STREET 53 # 10-03 SINGAPORE 510520

Name of Driver: SOH KEE HOCK NRIC: C1482218F

Address: APT BLK 580 PASIR RIS STREET 53 # 10-03 SINGAPORE 510520

Accident on 03/06/2018 Involving SLV1328K AND STE 4545R

At/along ROAD 1 ESPLANADE DRIVE

In consideration of City Auto Pte Ltd, repair my/our Motor Vehicle HONDA VEZEL at my/our request I/We the above owner of Motor Vehicle No: STE 4545R do authorize them to demand claims, settle and received whatever amount payable by the Insurance Co or Third Party or to commence legal proceeding if necessary in my/our name for the cost or repair and the loss of use/rental, etc and to any of there appointed solicitors to act for me/us in respect of the said accident/claim and all amounts claimed or settled shall be belong to them absolutely. I/We further authorize them to give an absolute discharge on my/our behalf.


I/We hereby authorize City Auto Pte Ltd, my/our repairer to give further instruction on my/our behalf concerning the said claim and such, all future correspondence should be addressed to the said firm/co.

My/Our repairer authorize to receive on my/our behalf monies claims, correspondence and give a valid discharge voucher or any other documents in connection with this on my/our behalf and for me/us.

I/We further agree to fully co-operate and attend all court hearing that are necessary and subject to prosecution and claim maintained by City Auto Pte Ltd.

I/We further agree to undertake to indemnify them against my/our claim for the cost which arises therewith.

In the event that my/our unsuccessful claim, I/We undertake to pay the repairer for the cost of repairs to my motor vehicle.

Owner Signature: 

Name: SOH KEE HOCK

Date: 07/06/2018

Witness Signature: CITY AUTO PTE LTD

Blk 8 Sin Ming Road

#01-58/60/62 Sin Ming Ind Est

Singapore 575643

Tel: 6453 1235 Fax: 6453 7944

(Claims Section)

Date: 26/6/18



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLW 1328K (Insd veh)	Model: Honda Vezel (1496cc)
	SJE 9545R (TP veh)	
Date of Accident/ Time:	03/06/2018	

Repair Estimate	: \$	28,968.71	
Final Repair Cost (w/GST)	: \$	20,330.00	
Loss of Use	: \$	-	days at \$ per day
Rental (if any) (w/GST)	: \$	1,498.00	14 days at \$100.00 per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$	-	
Final Settlement Sum	: \$	21,830.00	

Payee Name : City Auto Pte Ltd	
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)	
A) For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B) For GIA Registered Workshop:	BOLA Applicable: Yes / No BOLA Scenario No: <u>NIL</u>
BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.	
Remarks:	

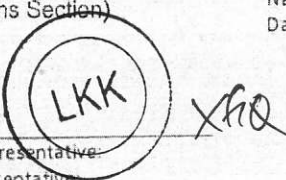
NOTE:

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/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/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.

CITY AUTO PTE LTD Blk 8 Sin Ming Road #01-58/60/62 Sin Ming Ind Est Singapore 575643 Tel: 6453 1235 Fax: 6453 7944	CITY AUTO PTE LTD Blk 8 Sin Ming Road #01-58/60/62 Sin Ming Ind Est Tel: 6453 1235 Fax: 6453 7944
Signature of workshop representative / Workshop stamp Name of Representative: (Claims Section) Date: 28/1/2020	Signature of Witness / Workshop Stamp (if applicable) Name of Witness: (Claims Section) Date: 28/1/2020
	
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: 28/04/2020	

CLASSIC AUTO RENTAL PTE LTD
 17 SIN MING ROAD #01-08 ANNEXE BLOCK
 AMTECH BUILDING, SINGAPORE 575624
 TEL: (65) 6553 3511 FAX: (65) 6553 3711
 EMAIL: reservation@classicauto.com.sg

RENTAL AGREEMENT NO 17738

COMPANY NO.: 199501324K

GST REGISTRATION NO: M2-8920243-9

TO BE PAID BY HIRER AND, WHERE APPLICABLE IN CLAUSE 1.2:		IN 121485 KM		DATE 21/06/18	
		OUT 119934 KM		TIME 1305HRS.	
		DRIVEN KM		DATE 03/6/18 @ 1013hrs.	
		TOTAL 18 DAYS		HRS	
HIRER		VEHICLE MAKE / MODEL TOYOTA ALTIS		VEHICLE REGISTRATION NO 933 4080X	
METHOD OF PAYMENT		DAILY RATE (MIN 24 HRS) 0\$ 1201-2160 W			
CREDIT APPROVAL / DATE / AMOUNT		WEEKLY RATE 0\$			
AUTHORISED OPERATOR MR. SM KEE HOOK		MONTHLY RATE 0\$			
HOME ADDRESS 171 BLK 580 PASIR KIL STREET 53.		ADDITIONAL DAY RATE 0\$			
# 10-03 SINGAPORE 510580		PACKAGE RATE 0\$			
COMPANY		MALAYSIA USE <input type="checkbox"/> NO <input type="checkbox"/> YES			
COMPANY ADDRESS		MINIMUM RENTAL PERIOD 24 HRS		SUB TOTAL 2160 W	
LOCAL CONTACT HP :		RATES DO NOT INCLUDE PETROL BY TANK <input type="checkbox"/> BY KILOMETRES <input type="checkbox"/>		SUB TOTAL 2160 W	
NRIC / PASSPORT NO S1482218F		COUNTRY OF ISSUE SG		DATE OF ISSUE 13/08/1999	
DRIVING LICENCE NO S1482218F		ISSUED BY LTH		EXPIRY DATE LIFE	
PLACE OF BIRTH SINGAPORE		DATE OF BIRTH 16/05/1961		DUE DATE	
ADDITIONAL AUTHORISED OPERATORS ABOVE 25 YEARS OLD & BELOW 60 YEARS OLD <input type="checkbox"/>		LOSS DAMAGE WAIVER (LDW) BY INITIALS, Hirer declines or accepts LDW. If the Hirer declines LDW at the rate shown, he shall be liable to the Owner the deductible/excess at the amount mentioned in the event of loss or damage to the Vehicle. If the Hirer accepts LDW, the Non Waivable Damage Excess (NWDE) referred in Clause 8.3 shall be at the amount mentioned. For driving in West Malaysia (excluding Thailand) both the amounts for deductible/excess and NWDE shall be two times (double/twice) the amount.		DEDUCTIBLE/EXCESS SINGAPORE USE \$ NWDE SINGAPORE USE \$1575 - 41	
INDICATE: D - DENTS S - SCRATCHES A - ACCIDENT		FRONT LEFT TOP REAR RIGHT		DECLINES LDW <input checked="" type="checkbox"/> ACCEPTS LDW <input checked="" type="checkbox"/>	
		DECLINES PAI <input checked="" type="checkbox"/> ACCEPTS PAI <input checked="" type="checkbox"/>		LDW (PER DAY) \$ PAI (PER DAY) \$	
		PERSONAL ACCIDENT INSURANCE (PAI) BY INITIALS, Hirer declines or accepts PAI. If "Accepts", Hirer accepts coverage at rate shown and acknowledges to have read the SYNOPSIS of coverage limits furnished by owner at rental.		MISCELLANEOUS OIL REPAIRS	
		BUSINESS / OPERATING HOURS Vehicles can only be returned to the Owner's renting location during the operating hours: Mon - Friday 0830 - 1730 hrs Sat & eve of public holidays 0830 - 1230 hrs Sun & public holidays Closed		SUB TOTAL 2160 W	
		CASH CARD VALUE		GST 7% 151 20	
				AMOUNT DUE 2311 20	
		DEPOSIT \$		LESS DEPOSIT (IF ANY)	
		PREPARED BY COMPUTED BY 7060716		NET DUE 2311 20	
		REFUND COLLECTED BY		AMOUNT REFUND	

RENTAL AGREEMENT NO 17738



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-18-085184
Date of Request: 05/06/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date 05/06/2018
Enquiry By Jason Quak Leng Hui
TP Vehicle No. SLW1328K
Accident Date 03/06/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLW1328K	AXA Insurance Pte Ltd	13/12/2017-12/12/2019	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-18-085184
Date of Request: 05/06/2018

Your Ref No: Online Purchase

City Auto Pte Ltd
160 Sin Ming Drive #05-01,
Sin Ming AutoCity,
Singapore 575722

Dear Sir/Madam,

Enquiry Date 05/06/2018
Enquiry By Jason Quak Leng Hui
TP Vehicle No. SLW1328K
Accident Date 03/06/2018

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