# KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

Date:

20.08.2018

AXA Insurance Pte Ltd 8 Shenton Way #27-01 AXA Tower Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

### ACCIDENT INVOLVING VEHICLES: SGM 6835S / SGV 5341J ON 05.07.2018

We are the authorized repair workshop for the owner of motor vehicle no:  $SGM\ 6835S$ , which was involved in the captioned accident with your insured vehicle no:  $SGV\ 5341J$ . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

		\$	1,359.00
3)	GIA Search Fee	_\$	2.00
2)	Loss of Use (3 days X S\$60)	\$	180.00
1)	Cost of Repair (inclusive of GST)	\$	1,177.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) GIA Search Result

c) Letter of Authorisation, etc...

d) GIA Report

e) I/C & Driving Licence

f) Insurance Certificate

g) Vehicle Registration Log Card

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fastechauto.com.sg) For KIM CHWEE AUTO PTE LTD



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

18 OCTOBER 2018

ISMAIL BIN ELLIAS BLOCK 561 CHOA CHU KANG NORTH 6 #04-96 SINGAPORE 680561

Dear Sir/Madam,

OUR REF

: CC4/ASM18012446/Uhb3

YOUR REF

: SGV 5341J

ACCIDENT INVOLVING SGV 5341J AND SGM 6835S ALONG BLOCK 821 TAMPINES STREET 81 CAR PARK ON 05.07.18

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 KIM CHWEE AUTO PTE LTD, acting on behalf of the owner of SGM 6835S 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 SGM 6835S while reversing out from parking lot. 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 <a href="mailto:vicalpeh@lkkauto.com">vicalpeh@lkkauto.com</a> 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)



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

 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 <a href="mailto:vicalpeh@lkkauto.com">vicalpeh@lkkauto.com</a>.

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)

DATE : 15-08-2018						
TO: Axa Insurance Ite Ltd						
RE: ACCIDENT INVOLVING VEHICLE NO. SGM 68355 / SGN 5341J						
ALONG BIK 821 Tampines St 81 (arpart.						
I/We, Eutatius						
of (NRIC No./ROC No.) 533 25046 C						
of 364 Tampines Street - 34 #09-135 Singapore 520364  owner of vehicle no. 5835 S in consideration of M/s KIM CHWEE AUTO						
PTE LTD repairing my/our vehicle						
authorise M/s KIM CHWEE AUTO PTE LTD to demand claim settlement whatever						
amount settled/payable by the Insurance Company and/or third party or to commence legal						
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,						
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and						
all claimed and/or settled shall belong to them absolutely.						
I/We further agree and undertake to indemnify them against the above-mentioned claim cost						
which may arisen therewith.						
Signature of Owner:						
Name of Owner:						





**CLAIM REF** 

: S8M00NOT

**INSURED** 

: ISMAIL BIN ELLIAS

**DISCHARGE VOUCHER** 

\*\* This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an evidence to prejudice to the claimant's personal injuries down and/or other uninsured losses claim arising as also subject matter in this action.

We/I, <u>EUTATIUS</u>, CO. REG. NO.<u>53325046C</u> hereby agree to accept the sum of dollars <u>ONE THOUSAND THREE HUNDRED FIFTY NINE ONLY</u> (S\$<u>1,359.00</u>) paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. <u>SGV 5341J</u> as a result of an accident along <u>CAR PARK AT BLOCK 821 TAMPINES STREET 81</u> on <u>05.07.2018</u> of which we/I were/was the driver/ owner/ hirer/passenger/rider/pillion/ insurer of motor vehicle no. <u>SGM 6835S</u>.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. **SGV 5341J** in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am 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 without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. **SGV 5341J**.

Dated this	$\frac{30}{2019}$ day of $\frac{34n}{2019}$ 2019
Claimant's Signature	Reg.No.
NRIC no./ Company Stamp	* 53325940C 69
Occupation/ Business	: Private Hire Driver/Chanffer
Address	: 3227 Sumang, Walk #03-855 S(824322
Telephone No.	: 97347232
Witness's Name	1 Kaki Bukit Avenue 6, #01-46/48/50  AutoBay, Singapore 417883
Witness's Signature	Tel: 6746 5405 / 6745 2063 Fax: 6745 8520 Email: general@fastechauto.com.sg
Witness's NRIC No.	TANG JUN ZHONG S8704986H

## **TAX INVOICE**

### KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

Tax Invoice: 20479 AXA Insurance Pte Ltd

8 Shenton Way #27-01 AXA Tower

Singapore 068811

Chassis/Eng#

Attn: Motor Claim Department Accident Date : 05.07.2018

Claim No

Reference :0818 -20479

Make/Model : MAZDA 3

:20.08.2018

:SGM 6835S

Policy No

Date

Vehicle No

Amount

1100.00

To proceed on lump sum repair S\$

> E. & O. E. 1100.00 Total: S\$ GST @ 7% : S\$ 77.00

> > Amount Due: \$\$ 1177.00

for KIM CHWEE AUTO PTE LTD

All Invoices are subjected to GST



# 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-18-103316

Date of Request:

06/07/2018

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

**Enquiry Date** 

06/07/2018

Enquiry By

Jason Tang Jun Zhong

TP Vehicle No.

SGV5341J

Accident Date

05/07/2018

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGV5341J	AXA Insurance Pte Ltd	19/06/2018-18/06/2019	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-18-103316

Date of Request:

06/07/2018

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

**Enquiry Date** 

06/07/2018

**Enquiry By** 

Jason Tang Jun Zhong

TP Vehicle No.

SGV5341J

Accident Date

05/07/2018

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