



Auto
Consultants
Pte Ltd

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

28 MARCH 2019

**LONG CHING WEI (CHEERLY)
3D LORONG SALLEH
#01-03
SINGAPORE 416751**

By Post & By Email

Dear Sir/Madam,

**OUR REF : CC4/ASM18013054/Khb3
YOUR REF : SLV 3855Y
ACCIDENT INVOLVING SLV 3855Y AND SHD 9737H ALONG JALAN EUNOS ON
14.07.2018**

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 TRANS-CAB AUTO SERVICES PTE LTD acting on behalf of the owner of SHD 9737H against your motor insurance policy.

Based on the accident report and accident, it was reported that your vehicle had collided to the Third Party vehicle SHD 9737H. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD – if applicable) 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)
- Authorization Letter for the Driver to drive the vehicle
- 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)

cheerlylong@gmail.com / Samuel_nq@hotmail.com
(Email)

Vic (LKKAUTO)

From: Vic (LKKAUTO)
Sent: Thursday, 28 March, 2019 10:37 AM
To: cheerlylong@gmail.com
Cc: Samuel_ng@hotmail.com; Admin A; Vic (LKKAUTO)
Subject: YOUR REF: SLV 3855Y_ACCIDENT INVOLVING SLV 3855Y AND SHD 9737H ALONG JALAN EUNOS ON 14.07.2018



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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

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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.

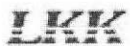
Best Regards,

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.

This e-mail contain confidential and privileged material, and are for the sole use of the intended recipient. Use or distribution by an unintended recipient is prohibited, and may be a violation of law. If you believe that you received this e-mail in error, please do not read this e-mail or any attached items. Please delete the e-mail and all attachments, including any copies thereof, and inform the sender that you have deleted the e-mail, all attachments and any copies thereof. Thank you.

TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

I, Sim Seng Tze Alvin (Hirer), S 7924 691C (NRIC no.)

hereby authorize Trans-cab Services Pte Ltd to act on my behalf to claim

for my loss of earnings for the accident involving SHD 9737H and

SLV 3855Y along Jalan Eunus

on 14-7-18 at 9:25 hrs.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 16 day of July 2018



(Hirer's signature)

Name:- Sim Seng Tze Alvin

NRIC Number:- S 7924 691C

Address: Blk Jurong West 37 74

#19-38 S (640754)

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHD9737H and SLV3855Y along JALAN EUNOS on 14/07/18 09:25 AM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 11 (day) of October 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager



redefining / insurance

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLV 3855Y (Insd veh)	Model:	RENAULT LATITUDE 2.0L DCI AUTO D/AB 4DR
	SHD 9737H (TP veh)		
Date of Accident/ Time:	14/07/2018 - 09:25HRS		

Repair Estimate	: \$	4,7302.88	
Final Repair Cost	: \$	4,173.00	
Loss of Use	: \$	200.00	4 days at \$ 50.00 per day
Rental (if any)	: \$	333.84	4 days at \$ 83.46 per day
LTA / GIA Search Fee	: \$	7.49	
Others:	: \$	-	
Final Settlement Sum	: \$	4,714.33	
Payee Name: TRANS-CAB AUTO SERVICES 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>9</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:

- 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 RESERVE THEIR RIGHTS OF RECOVERY IN THE EVENT OF FRAUD / MIS REPRESENTATION / MISTAKE / MATERIAL NON DISCLOSURE. AXA ALSO RESERVES THEIR RIGHTS TO WITHDRAW THEIR ACCEPTANCE IN THE EVENT OF ANY INCONSISTENCIES/FRAUD/SUSPECTED FRAUD/MIS REPRESENTATION AND/OR MATERIAL NON DISCLOSURE OF FACTS/MISTAKE(S).

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 **final 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:
Date: 29 APR 2019

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: NG WAH YIN
Date: 29 APR 2019

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

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
8 Shenton Way, #24-01 AXA Tower, Singapore 068811
Customer Centre #B1-01
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666**Fax:** 6287 7764**Co. Reg. No.:** 201019626G**GST Reg. No.:** 201019626G**Tax Invoice / Debit Note**

TO: AXA INSURANCE PTE LTD 8 SHENTON WAY,#27-01 AXA TOWER 068811 SINGAPORE ATTENTION:	INVOICE NO. : INV1809-406 DATE : 29. September 2018 REFERENCE NO : AAD1807-133 TERMS : DUE DATE : 29. September 2018 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD9737H;DOA 14.07.18(LUMP SUM-18)	1	4,173.00	4,173.00

Total SGD Excl. GST :	3,900.00
7% GST :	273.00
Total SGD Incl. GST :	4,173.00

****** FOUR THOUSAND ONE HUNDRED SEVENTY THREE SGD ONLY ******

- 1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"
- 2) Please quote our Invoice Number during payment.
- 3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
- 4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

11 October, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 14/07/18 09:25 AM at JALAN EUNOS

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHD9737H. The taxi was hired to SIM SENG TZE ALVIN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$83.46 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan

General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

14-07-2018

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD1807-133	Accident Date 14-07-2018
7/16/2018 13:01	7/20/2018 16:00	SHD9737H

Yours Faithfully,

Trans-Cab Services Pte Ltd**Jasmine Tan****General Manager**

7/16/2018

Vehicle Insurance Particulars Enquiry

[> Back to OneMotoring](#)

Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
SLV3855Y	14 Jul 2018 / 09:25:00	AXA INSURANCE PTE LTD

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