

Joy Irene (LKKAUTO)

From: Joy Irene (LKKAUTO)
Sent: Monday, 29 October 2018 2:08 PM
To: 'zitpl@singnet.com.sg'; 'eileen@hundhobbes.com.sg'
Cc: Admin A
Subject: ACCIDENT INVOLVING GZ 3378X AND SHC 6056P ALONG 50 RAFFLES PLACE SINGAPORE LAND TOWER ON 23.07.2018

ZHONG LIN TRADING & TRANSPORTATIONS PTE. LTD

Policy Holder

Dear Sir/Madam,

OUR REF : CC4/ASM18013324/K1ja3
YOUR REF : GZ 3378X

ACCIDENT INVOLVING GZ 3378X AND SHC 6056P ALONG 50 RAFFLES PLACE SINGAPORE LAND TOWER ON 23.07.2018

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 PREMIER AUTOMOTIVE SERVICES PTE LTD**, acting on behalf of the owner of **SHC 6056P** against your motor insurance policy.

Based on the accident report and scene photos, it was reported that your vehicle was to turn left whilst Third Party vehicle was moving straight. We are of the opinion that 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 full co-operation in the handling of the claim is required and kindly submit the following to joyirene@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)

- 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 the undersigned.

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

Best Regards,

Joy Irene | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108

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

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AUTHORIZATION TO ACT

I, **PREMIER TAXIS PTE LTD** (the third party claimant") of **23 CHANGI SOUTH AVENUE 2 #03-02 SINGAPORE 486443** (address), owner of **SHC 6056P** (vehicle no.) hereby authorize **PREMIER AUTOMOTIVE SERVICES PTE LTD** ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no **SHC 6056P** that was damaged pursuant to the accident which occurred on **23/07/2018** (date) along **BATTERY ROAD** (location) involving vehicle no/s **GZ 3378X** ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 03 (day) of Jan (month) 2020 (year)

A circular stamp with the text "Premier Taxis Pte Ltd" around the perimeter. A handwritten signature is written over the stamp.

Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)



This Settlement excludes any bodily injuries arising out of the above said accident and pertains to property damage only

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	GZ 3378X	(Insd veh)	Model: KIA OPTIMA 1.7(A) DIESEL
	SHC 6056P	(TP veh)	
Date of Accident/ Time:	23/07/2018		

Repair Estimate	\$ 5,030.44	
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 (Global Sum)	\$ 2,100.00	
Payee Name : PREMIER AUTOMOTIVE 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: <input checked="" type="checkbox"/> No BOLA Scenario No: <u>NIL</u>	
BOLA Liability: _____ (%)	Assessed Liability (*): <u>70</u> (%)	
* 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 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 NHTA rates.

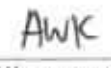
We/I confirmed that this is a full and final settlement that we and/or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority to act for and on their behalf in this accident.

Signature of workshop representative: 
 Name of Representative: SHAFAWATI MD RAGA
 Date: 03/01/2020



Signature of Witness / Workshop stamp (if applicable)
 Name of Witness:
 Date: 03/01/2020

Signature of AXA's surveyor/representative: 
 Name of AXA's surveyor / Representative:
 Date: 3/1/2020





02 August 2018

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Chan Chi Kit of NRIC Number S7571895J is a registered driver of SHC6056P. Chan Chi Kit is paying daily rental rate of \$101.44 (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 be "Kellie Poh", written over a horizontal line.

Kellie Poh
Administration Manager

Prepared By: Hannah

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>Chan Chi Kit</u>											
NRIC <u>S 7571895J</u>	HANDPHONE <u>93289389</u>										
TAXI REGN NO. <u>S H C 60568</u>	MAKE / MODEL <u>KO2</u>										
DATE IN <u>230718</u> TIME IN <u>12:00</u>	DATE OUT <u>270718</u> TIME OUT <u>0830</u>										
KILOMETRES IN <table border="1"><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr></table>	E	1/4	1/2	3/4	F	KILOMETRES OUT <table border="1"><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr></table>	E	1/4	1/2	3/4	F
E	1/4	1/2	3/4	F							
E	1/4	1/2	3/4	F							

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED IN TO WORKSHOP

D C M U Y Y H H M M

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION

D C M U 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

DRIVER'S NAME

DRIVER'S SIGNATURE / DATE / TIME

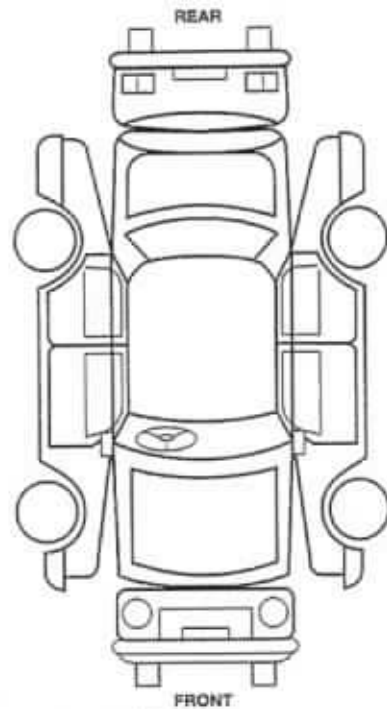
CHECKED IN BY
(PREMIER'S AUTHORISED WORKSHOP)

DRIVER'S NAME

DRIVER'S SIGNATURE / DATE / TIME

CHECKED OUT BY
(PREMIER'S AUTHORISED WORKSHOP)

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 |

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 C M U 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	<p style="text-align: center; font-size: 2em;">7P/G</p>

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

8 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-18-112206

Date of Request: 23/07/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 23/07/2018
Enquiry By GARY SHI GUO RONG
TP Vehicle No. GZ3378X
Accident Date 23/07/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GZ3378X	AXA Insurance Pte Ltd	13/03/2018-12/03/2019	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.



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-18-112206

Date of Request: 23/07/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 23/07/2018
Enquiry By GARY SHI GUO RONG
TP Vehicle No. GZ3378X
Accident Date 23/07/2018

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:

☒ GIRO ☐ Cash ☐ Cheque