



23 MAY 2019

**EMILDA BINTE MOHAMED SAID**

BLK 706 PASIR RIS DRIVE 10  
#03-151  
SINGAPORE 510706

Dear Sir/ Mdm

**OUR REF : CC4/ASM18015226/K1ja3**  
**YOUR REF : SKC4538T**

**ACCIDENT INVOLVING SKC 4538T AND SHC 6770K ALONG/AT CLEMENTI AVE 2 (OPEN CARPARK) ON 19/08/2018**

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 6770K against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

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 10 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 [joyirene@lkkauto.com](mailto:joyirene@lkkauto.com) within 10 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)



Auto  
Consultants  
Pte Ltd

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 [joyirene@lkkauto.com](mailto:joyirene@lkkauto.com).

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

Yours sincerely

Joy Irene  
Case Handler

DID: 6841 2409

FAX: 6741 4108

EMAIL: [joyirene@lkkauto.com](mailto:joyirene@lkkauto.com)

Cc AXA Insurance Pte Ltd  
(Motor Claims Dept)

## 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 6770K (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 6770K that was damaged pursuant to the accident which occurred on 19/08/2018 (date) along OPEN CARPARK @ BLK 329 – CLEMENTI AVE 2 (location) involving vehicle no/s SKC 4538T ("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 3 (day) of 12 (month) 2019 (year)



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



Signed by "the workshop"  
(with chop)

# LETTER OF AUTHORITY

To: Premier Taxis Pte Ltd  
23 Changi South Avenue 2  
#03-02  
Singapore 486443

And

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

ACCIDENT INVOLVING SHC6770K & SKC 4538T  
ON 19/08/18 AT/ALONG open carpark @ Clementi Avenue 2 (Blk

329)

1. I, YAP TEIK WEI, DAVID, NRIC No. S7020528I

am the registered Hirer / Relief Driver of motor taxi No. SHC6770K at the time of the above accident.

2. Hereby you have my authority to:

- send a letter of demand on my behalf;
- negotiate a settlement on my behalf;
- confirm a settlement / accept any offer on my behalf;
- sign any Discharge Voucher (if necessary) on my behalf;
- receive payment of the settlement sum / compensation monies on my behalf including to request that the cheque for the settlement sum be made payable to you.

 S7020528I  
X

Signature with NRIC No.

22/10/18 X  
Date

Name: YAP TEIK WEI, DAVID

Blk 2 Ghim Moh Road, #13-328, S(270.002)  
Address

Contact No.: 9619 2648

Email: \_\_\_\_\_



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:	SKC 453ET (Insd veh)	Model: KIA OPTIMA 1.7(A) DIESEL
	SHC 677DK (TP veh)	
Date of Accident/ Time:	19/06/2018	

Repair Estimate	= S	1,428.26	
Final Repair Cost	= S		
Loss of Use	= S		days at 5 per day
Rental (if any)	= S		days at 5 per day
LTA / GIA Search Fee	= S		
Others:	= S		
	= S		
Final Settlement Sum (Global Sum)	= S	490.00	

Payee Name : PREMIER AUTOMOTIVE SERVICES PTE LTD

Is Third Party Workshop GIA Registered?  YES  NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <del>No</del> BOLA Scenario No. <u>22</u>
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)

\* Assessed Liability to be filled only for claim 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 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/authorized 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: SHAFWATI MORAW  
 Date: 03/12/19

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness:  
 Date: 3/12/19

Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative: LKK Awk  
 Date: 4/12/19



23 August 2018

To Whom It May Concern

Dear Sir/Madam

**CERTIFICATION LETTER**

This letter serves to inform that Yap Teik Wei David of NRIC Number S7020528I is a registered driver of SHC6770K. Yap Teik Wei David is paying daily rental rate of \$108.93 (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 "Kellie Poh", written over a circular stamp.

Kellie Poh  
Administration Manager

Prepared By: SY

PREMIER TAXIS PTE LTD  
23 Chungi South Avenue 2  
#03-02  
Singapore 486443  
Telephone: +65 6214 8880 Fax: +65 6214 0330  
[www.premiertaxi.com](http://www.premiertaxi.com)  
Co. Reg. No. 20030497511



REPLACEMENT VEH GIVEN YES / NO

VEH NO. \_\_\_\_\_

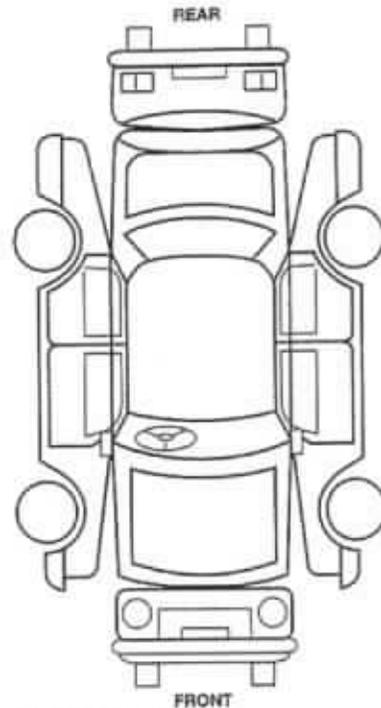
JOB NO. \_\_\_\_\_

**CHECK IN / OUT VOUCHER**



DRIVER'S NAME <b>KWOK SIANG FOOK (Relief)</b>		HANDPHONE <b>91280519</b>											
NRIC <b>S7531621F</b>		MAKE / MODEL <b>KO2</b>											
TAXI REGN NO. <b>S HC6770K</b>		DATE IN <b>190818</b> TIME IN <b>0945</b>											
DATE OUT <b>200818</b> TIME OUT <b>1720</b>		KILOMETRES IN <b>336343</b>											
FUEL 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									

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	DATE / TIME TOWED IN TO WORKSHOP D D M M Y Y H H M M
YES <input type="checkbox"/> NO <input type="checkbox"/>	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.

<b>CHECK IN</b>	<b>CHECK OUT</b>
<b>Kwok SIANG FOOK</b> X	<b>David Yap</b> X
DRIVER'S NAME	DRIVER'S NAME
<i>[Signature]</i> X	<i>[Signature]</i> X
DRIVER'S SIGNATURE / DATE / TIME	DRIVER'S SIGNATURE / DATE / TIME
<i>[Signature]</i>	<i>[Signature]</i>

CHECKED IN BY (PREMIER'S AUTHORISED WORKSHOP)	CHECKED OUT BY (PREMIER'S AUTHORISED WORKSHOP)
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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 checked="" type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT: <input type="checkbox"/> TURBO <b>190815 0945</b> <input type="checkbox"/> BRAKE SYSTEM <input type="checkbox"/> CLUTCH SYSTEM <input type="checkbox"/> BULB <input type="checkbox"/> UNDER CARRIAGE <b>TP/V</b> <input type="checkbox"/> CPF <input type="checkbox"/> BATTERY	<b>- Mr David Yap - 9619 2648</b>



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-18-127449  
 Date of Request: 20/08/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

 Enquiry Date 20/08/2018  
 Enquiry By VINCENT CHUA WEE AN  
 TP Vehicle No. SKC4538T  
 Accident Date 19/08/2018

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



**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-18-127449  
Date of Request: 20/08/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 20/08/2018  
Enquiry By VINCENT CHUA WEE AN  
TP Vehicle No. SKC4538T  
Accident Date 19/08/2018

#### Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKC4538T	AXA Insurance Pte Ltd	14/11/2017-13/11/2018	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.

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