Asher Sng (LKKAuto)

From:

Asher Sng (LKKAuto)

Sent: To:

Tuesday, 16 October 2018 11:54 AM 'WILLARD Y2K@HOTMAIL.COM'

Subject:

ACCIDENT INVOLVING SKE 9495P AND SJR 9599S ALONG AYE TOWARDS CITY ON

28/08/2018

16 OCT 2018

BAY JING ZHI

Dear Sir/ Mdm

OUR REF

: CC4/ASM18015855/Keb3

YOUR REF : SKE 9495P

ACCIDENT INVOLVING SKE 9495P AND SJR 9599S ALONG AYE TOWARDS CITY ON 28/08/2018

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 SUPREME AUTO SERVICE PTE LTD acting on behalf of the owner of SJR 9599S against your motor insurance policy.

Basing on the circumstances of the accident reported by both parties, where your vehicle was involved in a three (3) vehicle chain collision and your vehicle was the 2nd vehicle and rear-ended the Third Party Vehicle SJR 9599S and we are of the opinion that we cannot be absolved from liability.

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 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 ashersng@lkkauto.com within 7 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)
- 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 ashersng@lkkauto.com.

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

Yours sincerely

Asher Case Handler DID: 6841 6051 FAX: 6741 4108

Email: ashersng@lkkauto.com

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

	0		2			
To:	Supreme	ALHO	Service	PHE	Lid	

SINGAPORE

Date this _ J day of Avout

Letter of Authorisation

	ONG/AT FILE BETORE JURONE TOWN HIGH
1.	I/We, Degree Central Ple 14d (NRIC No. 201600605C) owner/driver of motor vehicle no. 20160605C) & residing at
	respectively in consideration of your workshop repairing my/our vehicle, I/we hereby authorise you to claim on my/our behalf for the costs of repair and loss of use. I/We further confirm and authorise you to use my/our name/s to engage the said service of a solicitor to proceed with negotiation with the defaulting party's insurance company for payment of the same and in the event negotiation fails, to instruct the solicitor to issue Summons on my/our behalf and in my/our name/s to claim for the same. Irrespective whether the claim is successful or not, all legal costs incurred shall be borne by you, provided we rendered our assistance as per second paragraph stated herein below.
2.	I/We understand that by signing this Letter of Authorisation, I/we has/have to render whatever reasonable assistance to you including signing all relevant Court's document and attendance in Court to give evidence to enable the claim to succeed. If I/we failed or neglected to do so despite request from you, you shall be entitled to claim from me/us the repair costs together with legal costs, other incidental costs and expenses pertaining the issuance of Summons in order to obtain payment from defaulting party.
3	You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my/our claim, you are authorised to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our full authority to collect all compensation monies pertaining to the above-mentioned accident from insurance company or any other party, directly to your workshop M/s
1.	In the event the claim is settled or judgment is obtained against the defaulting party, payment after deducing all costs and disbursements incurred should be drawn in your name or my/our name/s (at your discretion) and will be forwarded to you.
5.	This letter of Authorisation is irrevocable.
ign	ature:
VRI	C NO:



Vehicle No:

AXA THIRD PARTY DIRECT SETTLEMENT

(insd veh)

SKE9495P

		SJR9599S		(TP veh)	Model:HONDA CIVIC 1.8L 5AT				
Date of Accident/ Time:		28/08/2018 @ 1445HRS			RS				
Repair Est	lmate		. 5	7,787.4	+4				
Final Repa	iir Cost		5						
Loss of Use			. 5					days at 5	per day
Rental (if any)		1.5					days at 5	per day	
LTA / GIA Search Fee		1.5							
Others:			5						
			- 5	V					
Final Settl	lement Sum		15	4,010.00	· ·				
Payee Na	me : SUPREME	AUTO S	SERV	ICE PTE L	TD.				
Is Third Pa	arty Workshop GIA	Registeres	17	YES	NO NO	(Kindly indicate b	relow)		
A)	For Non GIA	Registered	Work	shop:	Agreed	Liability 100	[96]		
8)	For GIA Regis	tered Wor	kshop	£:	BOLAA	pplicable: Yes/ No	BOLA 50	cenario No:	
	SOLA LIADRO		(16)		Assesse	d Liability (*):		(%)	
	* Assessed Lie	ability to b	filled	only for chain i	collisions and fo	or cases where BO	LA does n	of apply.	

NOTE:

Remarks:

- 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/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

Signature of workshop representative:

Name of Representative:

Signature of AXA's adriveyor/representative:

Name of AXA's surveyor /Representative:

Date

2 5 1 7 2019



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-18-132576

Date of Request:

28/08/2018

Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare Singapore 575721

Dear Sir/Madam,

Enquiry Date

28/08/2018

Enquiry By

Yuki Ho

TP Vehicle No.

SKE9495P

Accident Date

28/08/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SKE9495P	AXA Insurance Pte Ltd	13/06/2018-12/06/2019	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-18-132576

Date of Request:

28/08/2018

Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare Singapore 575721

Dear Sir/Madam,

Enquiry Date

28/08/2018

Enquiry By

Yuki Ho

TP Vehicle No. Accident Date

SKE9495P 28/08/2018

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