



**LETTER OF DEMAND**

Your Ref: SJN6723R

Our Ref: SKK1103S

To: AxA

Dear Sirs,

ACCIDENT INVOLVING SKK1103S & SJN6723R ON 14.9.18

We are claiming on behalf of our client Chua Meng Liang Vincent.

owner of vehicle number SKK1103S involved in accident on 14.9.18

with vehicle SJN6723R along/at Bik 54 Sims drive car park no. 8888.

Description of claims:

Cost of Repairs \$ 5,132.41 (incl 7% GST)

Loss of Use/Rental \$ 60 x 4 Days = \$ 240. (incl 7% GST)

Search Fee \$ 2 (incl 7% GST)

Miscellaneous Fee \$ \_\_\_\_\_ (incl 7% GST)

TOTAL \$ 5,374.41 (incl 7% GST)

We are claiming in full and final settlement of \$ 5,374.41  
payable to Volkswagen Group Singapore Pte Ltd.

Kindly send us a written acknowledgement within 14 days from receipt of this document.  
Please note that finalization/settlement offer of this claim should be within 8 weeks from the  
date of this document. Please email all settlement offers to [shushi.tang@vw.com.sg](mailto:shushi.tang@vw.com.sg)



Dated this

15/10/18



Auto  
Consultants  
Pte Ltd

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

25<sup>th</sup> September 2018

**TAN BOON KIAT**

Block 297 Choa Chu Kang Avenue 2,  
#08-122,  
Singapore 680297.

Dear Sir,

**OUR REF : CC4/ASM18016915/T1jb3**

**YOUR REF : SJN 6723R**

**ROAD TRAFFIC ACCIDENT INVOLVING NOS. SJN 6723R AND SKK 1103S ALONG  
SIMS DRIVE-HDB CARPARK ON 14.09.2018**

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 Property Damage claim against your policy.

We have received a claim from M/s Volkswagen Centre Singapore, acting on behalf of the owner of SKK 1103S against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided into Third Party vehicle SKK 1103S. As such, 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 [pohkin@lkkauto.com](mailto:pohkin@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



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

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 6841 2132 or email us at [pohkin@lkkauto.com](mailto:pohkin@lkkauto.com).

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

Yours sincerely,

Poh Kin, Chong  
Case Handler  
DID: 6841 2132  
FAX: 6741 4108  
Email: [pohkin@lkkauto.com](mailto:pohkin@lkkauto.com)

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

# Volkswagen Centre Singapore



Biz Reg. No. 53103069E  
GST No. M20098505-2

## LETTER OF AUTHORITY

ACCIDENT INVOLVING SKK11035 and SJN6723R on 14/9/2018  
along Blk 54 Sims Drive Carpark No 58506  
Own vehicle's number Other vehicle's number Date of accident  
Accident location

BY THE LETTER OF AUTHORITY, I/we, Chua Meng Liang Vincent  
of S1728156 I Name of Policy Holder & IC / Passport number  
owner of Vehicle Registration

Number SKK11035 Own vehicle's number hereby irrevocable appoint **Volkswagen Centre Singapore**  
(hereinafter refer to VGS), a company incorporated in Singapore and having its registered office at **247 Alexandra Road, Singapore 159934**, its agents of any person authorized by VGS to be \*my / our Attorney and in \*my / our name(s) on \*my / our behalf to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which \*I/we may have against the other \*party/parties to the Accident and under the insurance \*policy/policies taken up by such \*party/parties or **alternatively** under Insurance Policy number 474003781 my/w taken up by \*me/us and pay the **compulsory excess** in respect of the cost repairs suffered by \*me/us arising from the Accident (loss and damage)/.
2. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of Cheque in favour of **Volkswagen Centre Singapore** and give a valid receipt and discharge therefore.
3. For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
4. Generally do all such acts as it shall deem necessary for the purpose of settling such claim.

\*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on \*my/our behalf by the Attorney, its agents or any person authorized by VGS in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by \*me/us in \*my/our own proper person(s) and \*I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

\*I/We hereby further declare that the **letter of authority hereby conferred shall remain irrevocable.**


\*I/We further confirm that the acceptance by VGS of the settlement amount in respect of such constitute the full discharge of \*my/our claim(s) in respect of such loss and damage.

IN WITNESS WHEREOF, \*I/we have hereunto to set \*my/our hand and sign this 5 of the month  
10 Year 18.

Signed & Delivered By:

  
\_\_\_\_\_  
Policy Holder

Witness By:

  
\_\_\_\_\_



redefining / insurance

CLAIM REF : S8M00VKT  
INSURED : TAN BOON KIAT

**DISCHARGE VOUCHER**

We/I [ CHUA MENG LIANG VINCENT, NRIC NO. S17281561I ] hereby agree to accept the sum of dollars [ FIVE THOUSAND THREE HUNDRED SEVENTY FOUR AND CENTS FORTY ONE ONLY ] (\$5,374.41 ) 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. [ SJN 6723R ] as a result of an accident along [ SIMS DRIVE HDB CARPARK SDS06 ] on [ 14/09/2018 ] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. [ SKK 1103S ].

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. [ SJN 6723R ] 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. [ SJN 6723R ].

Dated this 17 day of 12 2018

Claimant's Signature

[Signature]

NRIC no./ Company Stamp

S17281561

Occupation/ Business

Address

Blk 544 Pasir Ris St 51 #11-03 Singapore 510544

Telephone No.

96667661

Witness's Name

Witness's Signature

[Signature]

Witness's NRIC No.



AXA Insurance Pte Ltd (Company Reg. No. 199903512M)  
8 Shenton Way, #24-01 AXA Tower, Singapore 068811  
Customer Centre #B1-01  
Tel: +65 6890 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

# Volkswagen Centre Singapore



Service Tax Invoice No. SV18P44386

Biz Reg. No. 53103069E  
GST No. M20098505-2

SERVICE ORDER NO: 18IP2487  
SERVICE CUSTOMER NO.: CV000066  
SERVICE CUSTOMER NAME.: AXA Insurance Pte Ltd  
TELEPHONE NO.:  
ADDRESS: 8 SHENTON WAY  
#27-01 AXA TOWER  
Singapore  
Post Code: 068811

VEH NO.: SKK1103S  
DATE: 08/10/18 Pickup:  
VIN NO.: WVWZZZAUZHW119996 KM : 15,605  
GEARBOX CODE:  
MODEL: GOLF A7 1.4 CL 92 (DSG)  
SA : Tang Shu Shi  
Next Appointment Date :  
Next Appointment Mileage : 0

No.	DESCRIPTION	QTY	UOM	UNIT PRICE	AMOUNT
<b>AXA DIRECT SETTLEMENT</b>					
<b>DOA: 14/09/2018</b>					
<b>TP VEH: SJN6723R</b>					
<b>SURVEY BY: TAUFILK (LKK)</b>					
Labor					
1	LABOUR	1.00	UNIT	840.00	756.00
2	SPRAY PAINT	1.00	UNIT	800.00	720.00
3	Tow SVC- Quality Recovery Services	1.00	UNIT		
4	Tow SVC- Quality Recovery Services	1.00	UNIT		
5	PROGRAMMING & CALIBRATION- NETT	1.00	TU	480.00	432.00
6	CHECK WIRE HARNESS, ECU, SENSOR, SOCKET	1.00	TU	280.00	252.00
7	RIM & BALANCE	1.00	TU	50.00	45.00
8	B&P WHEEL ALIGNMENT NETT	1.00	TU	360.00	324.00
Item					
9	RUBBER VALVE	1.00	PCS	1.76	1.58
10	17" 'MADRID' RIM ONLY	1.00	PCS	1,533.36	1,380.03
11	RHF BUMPER BRACKET	1.00	PCS	17.04	15.33
12	FRT BUMPER	1.00	PCS	801.22	721.10
13	SENSOR BRACKET	1.00	PCS	11.92	10.73
14	SENSOR BRACKET	2.00	PCS	11.92	21.46

# Volkswagen Centre Singapore



Service Tax Invoice No. SV18P44386

Biz Reg. No. 53103069E  
GST No. M20098505-2

SERVICE ORDER NO: 18IP2487

SERVICE CUSTOMER NO.: CV000066

SERVICE CUSTOMER NAME.: AXA Insurance Pte Ltd

TELEPHONE NO.:

ADDRESS: 8 SHENTON WAY  
#27-01 AXA TOWER  
Singapore

Post Code: 068811

VEH NO.: SKK1103S

DATE: 08/10/18 Pickup:

VIN NO.: WVVZZZAUZHW119996 KM: 15,805

GEARBOX CODE: Engine No.:

MODEL: GOLF A7 1.4 CL 92 (DSG)

SA: Tang Shu Shi

Next Appointment Date :

Next Appointment Mileage : 0

No.	DESCRIPTION	QTY	UOM	UNIT PRICE	AMOUNT
15	SENSOR BRACKET	1.00	PCS	11.92	10.72
16	2KADHESIVE	1.00	PCS	69.11	62.20
17	BONDAGENT	1.00	PCS	49.44	44.50

GST (7%) AMOUNT: 335.76

TOTAL AMOUNT: 5,132.41

For Volkswagen Group Singapore Pte Ltd

Customer



## NOTICE

1. All fund transfer payments should be made payable to Volkswagen Group Singapore Pte Ltd Bank Account: 2528214002 Swift Code: DEUTSG66 Please indicate Customer Name and Invoice Number in the payment

Phone : Fax :





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

**Third Party Insurer Enquiry**

Our Ref No: GR-18-142404

Date of Request: 14/09/2018

Your Ref No: Online Purchase

Volkswagen Centre Singapore  
247 Alexandra Road  
Singapore 159934

Dear Sir/Madam,

Enquiry Date 14/09/2018  
Enquiry By Tang Shu Shi  
TP Vehicle No. SJN6723R  
Accident Date 14/09/2018**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJN6723R	AXA Insurance Pte Ltd	06/02/2018-23/02/2019	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.

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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-18-142404

Date of Request: 14/09/2018

Your Ref No: Online Purchase

Volkswagen Centre Singapore  
247 Alexandra Road  
Singapore 159934

Dear Sir/Madam,

Enquiry Date 14/09/2018  
Enquiry By Tang Shu Shi  
TP Vehicle No. SJN6723R  
Accident Date 14/09/2018

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