

## Cecilia Chong (LKK Auto)

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**From:** Cecilia Chong (LKK Auto)  
**Sent:** Tuesday, 22 October 2019 6:44 PM  
**To:** PNSTEVE@YAHOO.COM  
**Subject:** <STANDARD NOTIFICATION LETTER> OUR REF: CC4/ASM18016936/K1ga3 \*\*\*  
ACCIDENT INVOLVING EC 777S & SHB 8472M ON 13/09/2018 \*\*\*

22 OCTOBER 2019

**LEE PHUI NYEN**

Dear Sir/ Mdm

**OUR REF : CC4/ASM18016936/K1ga3**

**YOUR REF : EC 777S**

**ACCIDENT INVOLVING EC 777S & SHB 8472M ALONG/AT RITZ CARLTON CARPARK ON 13/09/2018**

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 claim against your policy.

We have received a claim from **PREMIER AUTOMOTIVE SERVICES PTE LTD** acting on behalf of the owner of SHB 8472M against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in our favour. 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 [ceciliachong@lkkauto.com](mailto:ceciliachong@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)
- Driver's Work Permit
- Employment Letter from your company
- Authorisation letter
- Rental Agreement/ Leasing Agreement
- 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 6749 4274 or email us at [ceciliachong@lkkauto.com](mailto:ceciliachong@lkkauto.com).

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

Cc *AXA Insurance Pte Ltd*  
*(Motor Claims Dept)*

"Please note that our proposal and correspondence with you is strictly on a without prejudice basis and should not be construed as an admission of liability on our part and/or that of our policyholder and/or the authorised driver. The terms of our without prejudice engagement should not be disclosed in any other related matter(s) in respect of this accident nor should it be binding in any other related claims."

Best Regards,

Cecilia Chong | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6749-4274 | email: [CeciliaChong@lkkauto.com](mailto:CeciliaChong@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.*

## 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 SHB8472M (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 SHB8472M that was damaged pursuant to the accident which occurred on 13/09/2018 (date) along RITZ CARLTON HOTEL BASEMENT CARPARK (location) involving vehicle no/s EC777S ("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 11 (day) of 12 (month) 2019 (year)

A handwritten signature in black ink.

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

A handwritten signature in black ink.

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 SHB8472M & EC 7775  
ON 13/6/18 AT/ALONG Bakmat Carpark @ Ritz Carlton

1. I, KANNAN S/O MAKIMUTHU, NRIC No. S75294622  
am the registered Hirer / Relief Driver of motor taxi No. SHB8472M 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.



Signature with NRIC No. S75294622

14/9/18  
Date

Name: KANNAN S/O MAKIMUTHU

B1K 613, JURONG WEST 8762 #06-153 S(6Y0613)  
Address

Contact No.: 93813780

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:	BC7778	(Insd veh)	Model: KIA OPTIMA-1.7 D (A)
	BH8A472M	(TP veh)	
Date of Accident/ Time:	13/02/2018		

Repair Estimate	: S	787.10	
Final Repair Cost (WGST)	: S	299.80	
Loss of Use	: S		days at \$ per day
Rental (if any)	: S	208.12	2 days at \$ 114.06 per day
LTA / GIA Search Fee	: S	2.00	
Others:	: S		
	: S		
Final Settlement Sum	: S	828.72	

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  No BOLA Scenario No: 24

BOLA Liability: 100 (%) 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 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.

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: SHAFAWATI MD RAU  
 Date: 11/12/19

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: VINCENT CHUA  
 Date: 11/12/19

Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative: LKK  
 Date: 13/12/19



20 September 2018

To Whom It May Concern

Dear Sir/Madam

**CERTIFICATION LETTER**

This letter serves to inform that Heng Poh Choong of NRIC Number S1511519Z is a registered driver of SHB8472M. Heng Poh Choong is paying daily rental rate of \$114.06 (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".

Kellie Poh

Administration Manager

Prepared By: Hasnah

PREMIER TAXIS PTE LTD  
23 Changi South Avenue 2  
#03-02  
Singapore 486443  
Telephone: +65 6214 8880 Fax: +65 6214 0338  
[www.premiertaxi.com](http://www.premiertaxi.com)  
Co. Reg. No. 200304975H

REPLACEMENT VEH GIVEN YES / NO

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

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

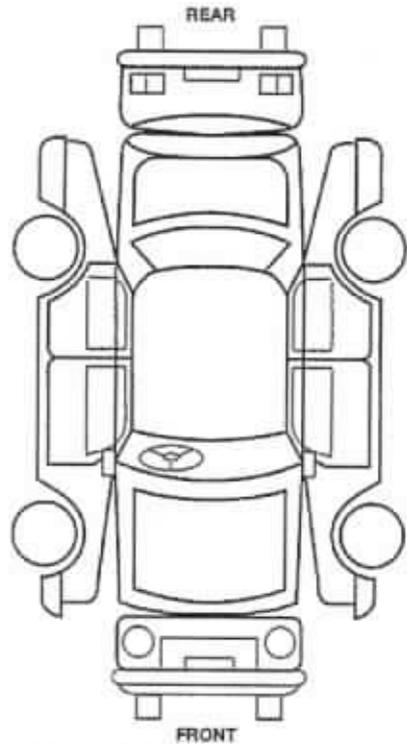
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**CHECK IN / OUT VOUCHER**

DRIVER'S NAME <u>Hang Poh Choong</u>			
NRIC <u>S 75294627</u>	HANDPHONE <u>9 384 3780</u>		
TAXI REGN NO. <u>S H B 8472M</u>	MAKE / MODEL <u>KOZ</u>		
DATE IN <u>180918</u>	TIME IN <u>0910</u>	DATE OUT <u>190918</u>	TIME OUT <u>1550</u>
KILOMETRES IN	FUEL IN	KILOMETRES OUT	FUEL OUT
	E 1/4 1/2 3/4 F		E 1/4 1/2 3/4 F

INDICATE AREA OF DAMAGE HERE:



TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED IN TO WORKSHOP  
D D M M Y Y H H M M

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.

CHECK IN

CHECK OUT

Hang P-C  
DRIVER'S NAME

M. Kannan  
DRIVER'S NAME

[Signature]  
DRIVER'S SIGNATURE / DATE / TIME

[Signature]  
DRIVER'S SIGNATURE / DATE / TIME

[Signature]  
CHECKED IN BY  
(PREMIER'S AUTHORISED WORKSHOP)

[Signature]  
CHECKED OUT BY  
(PREMIER'S AUTHORISED WORKSHOP)

BODY MARKINGS

- |                     |             |
|---------------------|-------------|
| 1 - Light Dent      | 5 - Damaged |
| 2 - Serious Dent    | 6 - Chip    |
| 3 - Light Scratch   | 7 - Crack   |
| 4 - Serious Scratch | 8 - Peeling |

<p>SERVICE / REPAIRS DONE</p> <p><input type="checkbox"/> SERVICING      <input type="checkbox"/> OTHERS:</p> <p><input type="checkbox"/> T / BELT</p> <p><input type="checkbox"/> AIRCON SYSTEM      <input type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT:</p> <p><input type="checkbox"/> TURBO      D D M M Y Y H H M M</p> <p><input type="checkbox"/> BRAKE SYSTEM</p> <p><input type="checkbox"/> CLUTCH SYSTEM</p> <p><input type="checkbox"/> BULB</p> <p><input type="checkbox"/> UNDER CARRIAGE</p> <p><input type="checkbox"/> CPF</p> <p><input type="checkbox"/> BATTERY</p> <p style="text-align: center; font-size: 2em;"><u>TP/G</u></p>	<p>DRIVER'S REMARKS</p> <p><u>NMH - Clementi</u></p>
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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

### Third Party Insurer Enquiry

Our Ref No: GR-18-142391

Date of Request: 14/09/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

 Enquiry Date 14/09/2018  
 Enquiry By GARY SHI GUO RONG  
 TP Vehicle No. EC777S  
 Accident Date 13/09/2018
**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
EC777S	AXA Insurance Pte Ltd	02/09/2018-01/09/2019	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.



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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-18-142391  
Date of Request: 14/09/2018

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 14/09/2018  
Enquiry By GARY SHI GUO RONG  
TP Vehicle No. EC777S  
Accident Date 13/09/2018

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.

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For GIARMC Official use:

Date:

GIRO  Cash  Cheque