### Suwanna (LKK Auto)

From:

Suwanna (LKK Auto)

Sent:

Monday, 26 August 2019 3:54 PM

To:

CYNTHIA@CHAMPIONSGOLF.COM.SG

Cc:

Admin A; Vivian Lau (LKKAuto)

Subject:

ACCIDENT INVOLVING SKH 8090P AND SLX 5455U ALONG/AT GRANDSTAND TURF

CITY CARPARK ON 16/09/2018

### Dear Sir/ Mdm

**OUR REF** 

: CC4/ASM18017442/T1wb3 // S8M00W9D

YOUR REF

: SKH 8090P

ACCIDENT INVOLVING SKH 8090P AND SLX 5455U ALONG/AT GRANDSTAND TURF CITY CARPARK ON 16/09/2018

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 third party claim(s) from TRANS EUROKARS PTE LTD acting on behalf of the owner of SLX 5455U against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your driver's favour as your vehicle reversing out from parking lot and collided with third party. Under Motor Accident Guide, Vehicle reversing in/out or moving in/out of parking lot should exercise greater caution. 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.

As Insurers, they 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. You intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to <u>vivianlau@lkkauto.com</u> within 7 days from the date of this letter <u>if not provided at our reporting centre</u>. 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)
- Copy of the letter of authorization
- 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 our prior knowledge and consent. If

you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA Customer Care Centre.

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), we 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 as at Ms. Vivian Lau (LKK Handler) 6841 8625 or <a href="wivianlau@lkkauto.com">wivianlau@lkkauto.com</a> Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Suwanna Te-Uttaruang | Admin support

LKK Auto Consultants Pte Ltd

Email Suwanna@lkkauto.com | fax: 67414108

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

## LETTER OF AUTHORISATION

o: Trans Eurokars Pte Ltd	
rom:	
Name: ELMOKONS LOUSMO; PIL(NRIC)	
Address: 12 Sungei Kadut Ave	
Singelpore 729648	
the matter of an accident involving motor vehicles SLX 545511 A	
we EMORONS Leading the owner of vehicle registration no: SLX 545E	34
ereby do authorize you to commence repairs to my abovementioned vehicle.	
We confirm that you are hereby authorized to handle the repair and/or to negotiate and ottle any claims relating to the above accident which I/we may have against other third arty/parties or insurers and/or to instruct lawyer on my/our behalf to facilitate the third party aim for me/us.	
ou are hereby authorized as my attorney to execute and/or sign any document/discharge uchers/discharge agreement regarding my/our claim for my convenience.	
onfirm that in the event of an unsuccessful claim against the negligent party and/or my own surer for the damages caused to my vehicle, I agree to pay for all repair cost and/or any cidental expenses incurred by you.	
Dated the ve day of Sep 20 18	
Constitue of the state of the s	
ner (name/signature) Witness (name/signature)	
IC No:	



Without Prejudice to Injury Claim

#### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKH 8090P (Insd veh	
	SLX 5455U (TP veh)	Model: YOLYD XC60.
Date of Accident/ Time:	16/09/2018	

Repair Estimate	15 14	, 408.83		
Final Repair Cost	- \$	12,222,82		
Loss of Use	2\$		days at \$	per day
Rental (if any)	:\$	481.50	03 days at \$160.	50 per day
LTA / GIA Search Fee	: \$	2.00		
Others:	:\$			
	:\$			
Final Settlement Sum	:\$	12,706.32		
Payee Name : TRANS EURO Is Third Party Workshop GIA Reg	DKARS PTE LTD gistered? [X ] YES	[ ] NO (Kindly indicate below)		
A) For Non GIA Reg	istered Workshop:	Agreed Liability(%		
B) For GIA Registere	ed Workshop:	BOLA Applicable: Yes/No BOLA	A Scenario No: 24	
BOLA Liability:		Assessed Liability (*):	(%)	
		CONTRACTOR		1
* Assessed Liabili	ty to be filled only for chain o	collisions and for cases where BOLA doe	s not apply.	

#### NOTE:

- 1. 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.
- 3. 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.

Eurokars Centre

2 Sunger Kadut Ave
Singapore 729548

Signature of Workshop representative / Workshop stamp
Name of Representative: Julian
Date:

76 | 819

Signature of AXA's surveyor/lepresentative: Name of AXA's surveyor/Representative:

Date:



ID: t05

TAX INVOICE

GST Reg No: M90364005A

NE

CODE:

A0004

IS-AXA

PAGE NO INVOICE NO: DEPT/POS ID:

92001982

1

L /

CUSTOMER:

AXA INSURANCE PTE LTD

DATE IN

EF 01/11/2018

ADDRESS:

MODEL:

8 SHENTON WAY #24-01 AXA TOWER DATE PRINTED: JOB NO:

10/12/2018

SINGAPORE 068811

CSO/OP CODE:

27614 Tsham

ATTN: MOTOR CLAIM DEP VOLVO XC60 TS

TEL NO: 68804635

CODEIS NO:

YV1UZ10ACJ104662 DESCRIPTION

Labour

Menus

REGN NO: REGN DATE: MILEAGE:

Total

Amount Due

Paid

22/03/Ap18

DESCRIPTION:

Body repair

ISK/51049 REQUISITION NO:

SUB	TO	REPLACE THE FRONT E	UMPE	R ANI	GRIL:	LE. TO R	EPAI	400.00
		AREAS AFFECTED BY						
SUB	TO	RESPRAY THE FRONT E	SUMPE	R				400.00
SUB	TO	CHECK ELECTRICAL SY	STEM	FOR	PROEP	R FUNCTI	ONIN	150.00
SUB	TO	PROGRAMME AFTER THE	ACC:	IDEN'	r REPA	IR WORKS		250.00
SUB		DRIES						30.00
		RHF BUMPER BRACKE			1.0	138.60		138.60
VV-3165		RH HEADLAMP, XC60	7	A	1.0	7099.00		7099.00
VV-3984	244774	FRT BUMPER, XC60	7	A	1.0	2721.60		2721.60
VV-3142	5188	RHF BUM LID COVER	XC A	A	1.0	63.60		63.60
VV-3062	2628	CLIP, FRT BUMPER	7	A	10.0	17.04		170.40

10,193.20 Parts Net 11423.20 Surcharge 0.00 799.62 G.S.T.

**ORIGINAL COPY** 

1,230.00

0.00

All major repaired parts stated above are covered under a 12 months or 20,000 km warranty, whichever comes first. The above excludes expendable maintenance items, natural wear & tear components and parts damaged due to neglience or improper handlings.

TRANS EUROKARS PTE LTD

Proof of Payment is only valid if this invoice is stamped "PAID" & signed by us. Any dispute to this invoice must be made within 5 calendar days.

CASH / NETS / AMEX / VISA / MASTER NO:

Customer Signature

**Authorised Signature** 



Head Office & Postal add: **Eurokars Centre** 12 Sungei Kadut Avenue Singapore 729648

Phone (65) 63633003 (65) 63693003

Branch 5 Ubi Close Singapore 408605 (65) 64743003 / 67494333 Fax

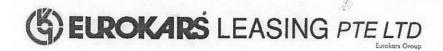
(65) 67460660

Website www.eurokarsgroup.com.sg

12222.82

12222.82

0.00



CO. REGN. NO: 199200636C GST REGN. NO: M90364005A

Invoice to: AXA INSURANCE PTE LTD

8 SHENTON WAY #24-01 AXA TOWER SINGAPORE 068811 TAX INVOICE

Invoice number:

17607

GST REGN NO:

M90364005A

Date:

31/12/2018

Account number: Invoice Currency: A0009 SIN

Term of Credit: Page:

Monthly

Description

GST

Amount

NAME OF CUSTOMER: EUROKAR LEASING PTE

LTD

S

540.00

CUSTOMER VEHICLE: SKX5455U(VOLVO XC-60)

LOAN'S CAR MODEL: MAZDA CX5 LOAN'S CAR REGN NO: SKU1154S

BEING CAR RENTAL CHARGE FOR 3 DAYS FROM 19/11/2018-22/11/2018 @\$180.00/DAY

Code	Description	% Rate	Goods	Total	GST Total	SIN Total
S	Standard Rate	7.000		540.00	37.80	577.80

Totals for invoice

540.00

37.80

577.80

For Eurokars Leasing Pte Ltd

ip

Head office & Postal address: Eurokars Centre

12 Sungei Kadut Ave Tel: 6363 3003 Singapore 729648 Fax: 6369 3003

003

Emergency Breakdown Tel: 9760 3003 Email: leasing@eurokarsleasing.com www.eurokarsleasing.com Authorised 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

# Third Party Insurer Enquiry

Our Ref No:

GR-18-144695

Date of Request:

19/09/2018

Your Ref No:

Online Purchase

Trans Eurokars Pte Ltd 12 Sungei Kadut Ave Singapore 729648

Dear Sir/Madam,

**Enquiry Date** 

19/09/2018

Enquiry By

STANLEY NGU KEE SIONG

TP Vehicle No.

SKH8090P

Accident Date

16/09/2018

**Enquiry Result** 

SLX5455U - Volvo

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SKH8090P	AXA Insurance Pte Ltd	02/08/2017-17/01/2019	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-18-144695

Date of Request:

19/09/2018

Your Ref No:

Online Purchase

Trans Eurokars Pte Ltd 12 Sungei Kadut Ave Singapore 729648

Dear Sir/Madam,

**Enquiry Date** 

19/09/2018

Enquiry By

STANLEY NGU KEE SIONG

TP Vehicle No.

SKH8090P

Accident Date

16/09/2018

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:

[X] GIRO [] Cash [] Cheque