

Co. Reg: 200922097K GST Reg.No.: 200922097K

Date : 11/02/2019

Our Ref: 08621018TP - SKZ758E

To : AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way

#27-01 AXA TOWER Singapore 068811

Attn :

Officer In-Charge Motor Claims Dept.

Dear Sir/Madam

# ACCIDENT INVOLVING SKZ758E & SGA655Y ON 03/10/2018 ALONG BEDOK SOUTH AVE 1

We refer to the above accident. The accident was caused solely by the negligence of your insured and as a result, we had incurred the following Costs and Losses: -

 Costs of Repair (inc GST)
 \$ 3,225.58

 Loss of Use days @ \$100 per day
 \$ 400.00

 Claimed Amount
 \$ 3,625.58

Enclosed are the supporting documents for your perusal: Original Repair Bill: Proforma Invoice ANC0862/TP GIA Report of SKZ758E

Please look into our client's claim soonest possible.

Yours faithfully

AUTO N CARS SERVICES PTE LTD

### AUTHORIZATION TO ACT

I, KOK SIEW CHERN	("the third p	party claimant") of
BLK 4914 templ	NE 9T 45 \$13-240	(address),
owner of SK1758E	(vehicle no.) he	ereby authorize
AUTO W CHEY SERVICES	The LTD ("the work	shop") to act for
me with respect to my claim for repair	r costs and/or rental and/or loss o	f use ("claim") for
my vehicle no. SKZ 759E	that was damaged	pursuant to the
accident which occurred	on <u>03/10/2018</u>	(date) along
KEOOK SOUTH	AVE	(location)
involving vehicle no/s	S696224	_("the accident").
I further authorize the workshop to s	settle my above-mentioned claim	in a manner that
they deem fit and the workshop is		
settlement of my claim with payment		
e grada Manalay ya nayu satusa mida s Manalay ya nayu satusa mida s		
I further acknowledge that any settler without prejudice and without driver/owner/insurers of the other ve	admission of liability basis	
Dated this 12 day of 00	f (month) 20 18 (year)	
X Signed by "the third party claimant"	Signed by the workshop	SWCAPORE TO

OD/TP-Form 2



Vehicle No:

### **AXA THIRD PARTY DIRECT SETTLEMENT**

SGA 655Y (Insd veh)

		SKZ 758E (TP	veh)	Model: Honda V	ezel (1496d	c)
Date of Accident/Time:		03/10/2018				
Repair Estimate	:\$					
Final Repair Cost	:\$					
Loss of Use	:\$				days at \$	per day
Rental (if any)	:\$				days at \$	per day
LTA / GIA Search Fee	:\$				40	
Others:	:\$					
	:\$					
Final Settlement Sum (Global St	ım) :\$	3,460.00				
Payee Name: Auto N Cars	Service	s Pte Ltd				
Is Third Party Workshop GIA Regist	ered?	[ X] YES [ ]	NO	(Kindly indicate below)		
A) For Non GIA Registe	red Work	shop:	Agreed	Liability(%		
B) For GIA Registered	Workshop	:	BOLA A	pplicable: Yes/ No. BOL/	A Scenario No:	27
BOLA Liability:1	00 (%)	*	Assesse	d Liability (*):	(%)	
* Assessed Liability	to be filled	only for chain collision	s and f	or cases where BOLA doe	s not apply.	
Remarks:						

#### 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 elient to act for and on their behalf in this accident.

CKS.

Signature of workshop representative / Workshop stamp

Name of Representative:

Date: 1401

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date: 14 6 200

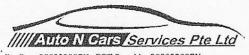
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative:

Date: 15 a zvri

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811

AXA Customer Centre #01-21/22 Telephone: +65 6880 4888 - axa.com.sg





Co. Reg: 200922097K GST Reg. No: 200922097K

Date

: 11/2/2019

Bill To

AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way #27-01 AXA Tower Singapore 068811

Our Customer

Name : KOK SIEW CHERN

NRIC : S7020201H

Address : BLK 491H TAMPINES ST 45 #13-240

SINGAPORE 527491

Vehicle No: SKZ758E

Date of Accident: 3/10/2018

Model: HONDA VEZEL

No.	Item Descriptions	Qty	Unit Price	Amount
1	To supply labour and materials to repair the above-mentioned	1	-	3,014.56
	vehicle to its pre-accident condition (Lump Sum)			
	co. Total discounting of the control		in ne -	
	to control and the same of			
			SUB-TOTAL	3,014.56
			GST 7%	211.02
	1. Committee of the second and the second		TOTAL	3,225.58

<sup>\*</sup> All cheque should be crossed and make payable to "Auto N Cars Services Pte Ltd"



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

09 May 2019

Wee Hong Wen 6 Bishan Street 25 #27-11 Singapore 573975

Dear Sir/ Mdm

OUR REF

: CC4/ASM18018479/Uwa3

YOUR REF

: SGA 655Y

## ACCIDENT INVOLVING SGA 655Y & SKZ 758E ALONG Bedok South Ave 1 ON 03/10/2018

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 **Auto N Cars Services Pte Ltd** acting on behalf of the owner of SKZ 758E 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 7 days from the date of this letter. You 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 Vivianlau@lkkauto.com\_within 7 days 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



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 our 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 6841 8625 or email us at Vivianlau@lkkauto.com

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

Yours sincerely,

Vivian Lau Case Handler DID: 6841 8625 FAX: 6741 4108

EMAIL: Vivianlau@lkkauto.com

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