



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLA 750X (Insd veh)	Model: CHEVROLET ORLANDO 1.4AT TURBO
	SLQ 1915Y (TP veh)	
Date of Accident/ Time:	16/10/2018 17:45	

Repair Estimate	: \$	3,039.34	
Final Repair Cost (W/GST)	: \$	749.00	
Loss of Use	: \$	120.00	2 days at \$ 60.00 per day
Rental (if any)	: \$	-	days at \$ per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$	-	
	: \$		
Final Settlement Sum	: \$	871.00	

Payee Name : JOO HAK KEE AUTO 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: 27
 BOLA Liability: 100 (%) Assessed Liability (*): _____ (%)

* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

Remarks:

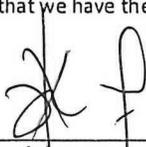
NOTE:

- 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/TORTEASOR 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.

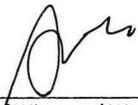
We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

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: _____

Date: 30/04/2020

Signature of Witness / Workshop stamp (if applicable)  

Name of Witness: _____

Date: 30/04/2020

Name of AXA's surveyor /Representative: _____

Date: 30/04/2020

8 July 2019

PERIASAMY VELLASAMY
BLK 52 CHAI CHEE STREET
#09-322
SINGAPORE 460052

Dear Sir/Mdm,

OUR REF : CC4/ASM18018972/Awb3
YOUR REF : SLA 750X
ACCIDENT INVOLVING SLA750X AND SLQ1915Y ALONG BEDOK NORTH RD ON
16/10/2018

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 third-party claim(s) from **JOO HAK KEE AUTO PTE LTD** acting on behalf of the owner of **SLQ1915Y** 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 because 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. Your 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 jimmychen@ikkauto.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)
- 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 authorized 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).

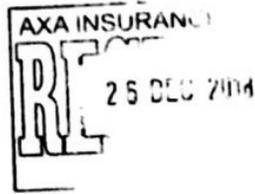
If you need any clarification, please do not hesitate to contact as at 6841 2928 or jimmychen@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Jimmy
Case Handler
DID: 6841 2928
FAX: 6741 4108
Email: jimmychen@lkkauto.com

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



3019505132 - -

60126787

Our Ref : SLQ1915Y
Your Ref : SLA750X

20th December 2018
AXA Insurance Pte Ltd
Motor Claims Department
8 Shenton Way
#24-01 AXA Tower
Singapore 068811

Accident involving SLQ1915Y / SLA750X (AXA Insured) on 16/10/2018

We act for **SAPIYAH BINTE MOHAMED**, the owner of vehicle no. **SLQ1915Y**, which was involved in the above accident.

Our client suffered loss and damage as a result of your Insured's negligence in the driving of motor vehicle no. **SLA750X**.

We quantify our client claim's as follows:

- | | |
|---|-------------|
| 1. Cost of Repair inclusive of GST | : \$ 749.00 |
| 2. TP Insurance Search inclusive of GST | : \$ 2.00 |
| 3. Loss of Use @\$60/day X 2 days | : \$ 120.00 |

Total Claim Amount : \$ 871.00

Pre-repair inspection of our client's vehicle was carried out by **Surveyor Adrian** on **18/10/2018** and we had finalized the lump sum COR at **\$ 700.00** before GST.

We enclose herewith the necessary invoices for your immediate action.

Please let us know whether you are accepting liability and will be doing settlement within 7 days upon receiving this letter. If there are no discrepancies, please assist to forward the DV to us within 7 days.



Joo Hak Kee Auto Pte Ltd
T: 6743 1913 F: 6743 5234
E: grace@jhk.com.sg



Tax Invoice

Ms Saplyah Binte Mohamed
 C/O BLK 3007, UBI ROAD 1,
 #01-406, SINGAPORE 408701

Inv No. : INV18120094
 Date : 20 Dec 2018
 Ref : WJ1812095
 Terms : COD
 Veh. No. : SLQ1915Y
 Make : CHEVROLET
 Model : ORLANDO 1.4

#	Description	Qty	UOM	U/P	Amt
1	TOTAL LUMP SUM COST OF REPAIR	1.00		700.00	700.00

I agree to the price as listed above and affirm that the goods are received in good condition.

E. & O.E.

Subtotal : S\$ 700.00
 GST 7.0% : S\$ 49.00
Total : S\$ 749.00

For Joo Hak Kee Auto Pte. Ltd.



 (Customer's Signature)

 (Authorized Signature)

Please make cheque payable to 'JOO HAK KEE AUTO PTE LTD' or Cash/Nets/ Credit Cards payment at our workshop.

BLK 3007 UBI ROAD 1 #01-406, SINGAPORE 408701 TEL: 6743 1913 FAX: 6743 5234 CO/GST REG NO: 201300082W
 BLK 3014 UBI ROAD 1 #01-324, SINGAPORE 408702 EMAIL: admin@jhk.com.sg WEBSITE: www.jhk.com.sg

bizSAFE₃



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-18-160840
 Date of Request: 17/10/2018

Your Ref No: Online Purchase

 Joo Hak Kee Auto Pte Ltd
 Blk 3007 Ubi Road 1
 #01-406
 Singapore 408701

Dear Sir/Madam,

 Enquiry Date 17/10/2018
 Enquiry By Lim Wan Ting, Grace
 TP Vehicle No. S_A750X
 Accident Date 16/10/2018

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



Re:<TP - MANDATE IA> - S8M00ZLN [ACCIDENT INVOLVING SLA 750X(OI) & SLQ 1915Y(TP) ON 16/10/2018]

Type

🔗 Question

Message

Hi Pls proceed, tks-VO

Reply

AUTHORIZATION TO ACT
授权采取行动

To **Joo Hak Kee Auto Pte Ltd**
Blk 3007 Ubi Road 1
#01-406 Singapore 408701

I, GAPINAH BINTE MOHAMED (the third party claimant) of
BLK 351 JURONG HEIGHTS #11-10 (64067) (address), owner of SLQ9154 (vehicle no) hereby authorize
Joo Hak Kee Auto Pte Ltd (the workshop) to act for me with respect of my claim for repair
costs and/or rental and/or loss of use (claim) for my vehicle no
SLQ9154 that was damaged pursuant to the accident which
occurred on 16/10/2018 (date) at
Before entrance Area of Road North # 1 (location) involving vehicle no/s
SLA550X in this (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 received payment further to settlement of
my claim with payment cheque/s being made in favor of Joo Hak Kee Auto Pte Ltd (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 vehicle is concerned.

Dated this day of 17 month of OCT year 2018

TP claimant

Suh 

TP driver

 [Signature] 

Signed by the third party claimant
(with chop if applicable)
NRIC/Coy Reg No: _____

 
Signed by Joo Hak Kee Auto Pte Ltd
(with chop)