

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

27 FEB 2019

PERUMAL S/O A SUPPIAH BLK 177 LOMPANG ROAD #02-10 SINGAPORE 670177

Dear Sir/ Mdm

OUR REF

: CC4/ASM18021147/Kpb3

YOUR REF

: SJF 624A

ACCIDENT INVOLVING SJF 624A AND SLJ 1053X ALONG/AT PIE LORONG 1 TOA PAYOH EXIT ON 17/11/2018

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 ESTEEM PERFORMANCE PTE LTD acting on behalf of the owner of SLJ 1053X against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your favour as it is head-to-rear collision. 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 chewht@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:

- Letter of Authorisation from the car owner
- 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

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 6742 3197 or email us at chewht@lkkauto.com.

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

Yours sincerely

Chew Asiao Tong Case Handler

DID: 6742 3197 FAX: 6741 4108

EMAIL: chewht@lkkauto.com

Cc AXA Insurance Pte Ltd (Motor Claims Dept)

# LETTER OF AUTHORITY

To	Whom	It	May	Concern:
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ACCIDENT INVOLVING	SLJ 1053 X	& SJF 624 A	along	Toa Payoh	Oppsite
	/11/2019 @ 22	1:20			

I <u>,</u>	(	oldbell C	ar Rental P	te Ltd	N	ric N	o		2007	10651	D		
Of	10 Ra	aeburn Par	k #02-10 S	ingapo	re 0887	02				Access to the		0	wner
=		vehicle			J 1053)			đ	lo :	hereby	appo	oint	M/S
	ГЕЕМ		MANCE	PTE	LTD	as	my	autho	rized	l repr	resenta	ition	and
KS	CGP JU	RIS LLP	_as my sol	icitors	to write	e, to	negoti	ate and	sett	le my	claim	again	st the
L. Control			involved										
			TE LTD sl										
teri	ms.												

I also confirm and instruct that any agreed settlement sum in respect of my claim be paid to M/S ESTEEM PERFORMANCE PTE LTD and such payment will constitute a full and final discharge of my claims.

I further authorize M/S ESTEEM PERFORMANCE PTE LTD to execute the discharge voucher on my behalf.

Signature of Owner



Vehicle No:

#### AXA THIRD PARTY DIRECT SETTLEMENT

(Insd veh)

Venicie No.	SLJ 1053X	(TP veh) Model: TOYOTA	WISH 1.8 CVT				
Date of Accident/ Time:	17/11/2018 10.10AN						
	107	26.42					
Repair Estimate		10 12					
Final Repair Cost (W/GST)	:\$ 6,219.78	<u> </u>	8 days at \$80,00per day				
Loss of Use	:\$   640.00	)					
Rental (if any)	:\$		days at \$ per day				
LTA / GIA Search Fee	:\$ 7.45						
Others:	:\$						
	:\$						
Final Settlement Sum	:\$ 6,867.23	3					
Payee Name : ESTEEM P	ERFORMANCE PTE	E LTD					
Is Third Party Workshop GIA Re		NO (Kindly Indicate below	")				
A) For Non GIA Re	gistered Workshop;	, 18, 232 2, 277	Agreed Liability(%)				
B) For GIA Registe	red Workshop:	BOLA Applicable: Yes/ No BO	BOLA Applicable: Yes/ No BOLA Scenario No:				
BOLA Liability:	(%)	Assessed Liability (*):	(%)				
* A d Link	ility to be filled only for chain (	rollisions and for cases where BOLA de	oes not apply.				

#### NOTE:

LTD

Remarks:

- 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.
- 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 / involces 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.

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Eurile Loh Date: 20.03.2020

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: Camun Date: 20-03-2020

KSC

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

Date:

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

### > Back to OneMotoring

Authority Land Transport

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

21 Nov 2018 / 13:06:14

Receipt Date/Time: 21 Nov 2018 / 13:06:14

## Tax Invoice/Receipt

Receipt No.: ITNET-00000-181121-001154				
Previous Receipt No. :				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SJF624A As at 17 Nov 2018/22:20:00 Insurance Co: AXA INSURANCE PTE LTD	56710x3x			
1 Insurance Enquiry - SJF624A Enquiry Fee 20181121130459134718		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - GBF1482E As at 21 Nov 2018/09:50:00 Insurance Co: NTUC INCOME INS CO-OP to Insurance Enquiry - GBF1482E Enquiry Fee	_TD	7,00	0.49	7.49
20181121130459180175	2.7.2.1.7	7.00	0.49	7.49
	Sub-Total		0.49	14.98
	Total Before Rounding	14.00	0.90	0.03
	Rounding Difference			14.95
	Total Amount Payable			14.95
	Paid By			
	20181121130526702	Direct Debit: eNETS Debit (Internet Banking)		14.95
	Total			14.95
	Cash Change			0.00
	Tendered Amount			14.95
	Excess Refundable Amount			0.00

### THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.