### Cecilia Chong (LKK Auto)

From:

Cecilia Chong (LKK Auto)

Sent:

Tuesday, 9 July 2019 1:39 PM JANETTE\_HE@YAHOO.COM.SG

To: Subject:

<STANDARD NOTIFICATION LETTER> OUR REF: CC4/ASM18022689/K1gb3 \*\*\*

ACCIDENT INVOLVING SJL 645H & SHC 6821Y ON 14/12/2018 \*\*\*

#### HE HUEI KHIM

Dear Sir/ Mdm

OUR REF

: CC4/ASM18022689/K1qb3

YOUR REF

: SJL 645H

ACCIDENT INVOLVING SJL 645H AND SHC 6821Y ALONG/AT SOUTH BRIDGE RD ON 14/12/2018

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 SHC 6821Y 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 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/ Authorisation letter from your company
- · 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.

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

"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| fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LKK Save the Earth Print only when necessary.



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

19 December, 2018

HE HUEI KHIM (XU HUIQIN) BLK 82B LORONG 4 TOA PAYOH, #03-496, Singapore 312082

Dear Sir,

OUR REF

: CC4/ASM18022689/K1eb3

YOUR REF

: SJL 645H

ACCIDENT INVOLVING SJL 645H & SHC 6821Y ON 14/12/2018 ALONG/AT SOUTH BRIDGE ROAD

We write to inform you that we are the appointed loss adjuster by your motor insurer, AXA insurance Pte Ltd to deal with the third party claim against your motor policy.

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We highlight that this accident has not been reported to your insurer. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you. We would appreciate it if you could urgently file a report at our approved reporting centre.

The report has to be lodged at any of AXA Premium Workshops or reporting centres (subject to your policy). For the list of AXA Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit <a href="https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting">https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting</a>.

Your full co-operation is required. Kindly submit the following when lodging the report which list 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.

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 <a href="mailto:ashersng@lkkauto.com">ashersng@lkkauto.com</a> or deliver it by hand to <a href="mailto:51 Ubi Avenue 1">51 Ubi Avenue 1</a>, #01-25 Paya Ubi Ind, Park S(408933).

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition, your insurer shall have full discretion in the process and settlement of the said third party claim subject to the merits of the case and according to the rights afforded under the policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, your insurer reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact us at 6841 6051 if you have any further enquiries.

Yours sincerely, Claim Department

This is a computer generated letter and no signature is required.

CC : AXA INSURANCE PTE LTD Motor Claim Department

## 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 SHC 6821Y (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 SHC 6821Y that was damaged pursuant to the accident which occurred on 14/12/2018 (date) along SOUTH BRIDGE ROAD (location) involving vehicle no/s SJL645H ("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 \_\_\_\_\_ (day) of \_\_\_\_\_ (month) 20 19 (year)

Signed by "the third party claimant"

(with chop if applicable)

Signed by "the workshop"

(with chop)

# LETTER OF AUTHORITY

To: Premier Taxis Pte Ltd

	23 CI #03-0	hangi South Avenue 2
	111111111111111111111111111111111111111	apore 486443
	And	
	23 CI #01-0	nier Automotive Services Pte Ltd hangi South Avenue 2 02 apore 486443
ACC	IDENT	H 249 JL2 & FIC89 SHZ DRIVLOVALT
	14   12	William St.
1. am ti	he regis	RANDON PENG CHEE HONG , NRIC No. S7484662 Tetered Hirer Relief Driver of motor taxi No. SHC 6831Y at the bove accident.
2.	Chromoto	by you have my authority to:
	(a) (b) (c) (d) (e)	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.
Sign	ature wi	Date 3748466>1
Nam	e:	-3
Addı	ress	
Cont	act No.	: Email :



This Settlement excludes any bodily injuries arising out of the above said accident and pertato property damage only

#### AXA THIRD PARTY DIRECT SETTLEMENT

Heart unbl

E ETITOR 1501	- and the state of		-	4		
	SHOR821Y	1	(In hep)	Model: KIA OFTIMA		
Date of Accident/Time: 14/12/20						
		- 1				
Repair Estimate		4,844-45 /				
Final Repair Cost (WOST)	:5	2,193.50				
Loss of the (LO)	:5	200.00			s days at 5 ages per day	
Rental (if any)	15	513.60			s days at \$ 102.72 per day	
LTA / GIA Search Fee	:5	2.00				
Others	:5					
	:5					
Final Settlement Sum	:5	2,909,10				
Payee Name : PREMIER AUTON	ACTIVE SERVICES PT	ELTO				
Is Third Party Workshop GIA	A Registered?	[√] YES [	1 NO	(Kindly indicate below	)	
A) For Non GIA	For Non GIA Registered Workshop:			Liability [5	(C)	
B) For GIA Regi	istered Workshop	20	BOLA A	oplicable: Yes No BO	LA Scenano No: 8	
SOLA Liabilit	y: 100 (%)	3	Assesse	d Liability (*):	(%)	

#### NOTE:

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.

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

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.

Name of Witness:

Date:

Signature of Witness / Workshop stamp (if applicable)

We confirmed that we have the authority of our client to act for and on their behalf in his accident.

Signature of workshop representative of workshop stamp
Name of Representative: SHAFFWR 1 MD RN6v

Date: 5/12/19

AWK

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

Date:



20 December 2018

To Whom It May Concern

Dear Sir/Madam

### CERTIFICATION LETTER

This letter serves to inform that Brandon Peng Chee Hong of NRIC Number S74846621 is a registered driver of SHC6821Y. Brandon Peng Chee Hong is paying daily rental rate of \$102.72 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

Kellie Poh

0

Administration Manager

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#63-02
Singapore 486443
Telephone: +65 6214 8880 Pax: +65 6214 0330
www.premiertaxi.com
Ca. Reg. No. 200304975H

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@In	TAX	(15					

### REPLACEMENT VEH GIVEN YES / NO

VEH NO.

TAXIS	CIVITCI	CHECK IN	/ OUT VOUCHER	JOB NO.
DRIVER'S NAME 2	randon Peng	chop HOM	9	INDICATE AREA OF DAMAGE HERE:
NRIC S TH	8 4662 T	HANDPHONE 9		C REAR C
TAXI REGN NO. S	1668215	MAKE / MODEL	K02	
DATE IN DAME 18	TIME IN	B MAN B	TIME OUT	
KILOMETRES IN	FUEL IN E 1/4 1/2 3/4 F	KILOMETRES OUT	FUEL OUT  E 1/4 1/2 3/4 F	
TAXI METER DOWNL	DADED	DATE / TIME TOWED	IN TO WINDWISHOR	
YES	NO	DDMMY	PRIVER FOR VEHICLE COLLECTION	
THAT THE SAME IS II TOGETHER WITH TH	N GOOD CONDITION AN	D TO MY SATISFACT MS LIST ABOVE. THE	SOVE SAID VEHICLE AND TON IN EVERY RESPECT S VOUCHER IS USED IN	
СН	ECK IN	СН	ECK OUT	
Brandon A	no thee Hort	/		
DRIVER'S NAME	<del>)</del> , , ,	DRIVER'S NAME	(Shana)	The state of the s
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	C)	Onat		BODY MARKINGS 1 - Light Dent 5 - Damaged
CHECKED IN BY	HISED WORKSHOP)	CHECKER OUT B	Y HORISED WORKSHOP)	2 Serious Dent 6 Chip 3 Light Scratch 7 Crack 4 Serious Scratch 8 Peeling
SERVICE / REPAIRS	DONE	1	DRIVER'S REMARKS	
O SERVICING O T/BELT O AIRCON SYSTEM O TURBO O BRAKE SYSTEM O CLUTCH SYSTEM O BULB O UNDER CARRIAG O CPF O BATTERY	O'DNM'Y	и ним м		



### 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-18-194038

Date of Request:

17/12/2018

Your Ref No:

Online Purchase

Premier Automotive Services Pte Ltd

23 Changi South Ave 2

#01-02

Singapore 486443

Dear Sir/Madam,

Enquiry Date

17/12/2018

quiry By

GOH WEE DEK

Vehicle No. Accident Date

SJL645H 14/12/2018

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel, No.
SJL645H	AXA Insurance Pte Ltd	22/09/2018-21/09/2019	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.

is a computer generated document and requires no 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

#### TAX INVOICE

Our Ref No:

GR-18-194038

Date of Request:

17/12/2018

Your Ref No:

Online Purchase

Premier Automotive Services Pte Ltd 23 Changi South Ave 2

#01-02 Singapore 486443

Dear Sir/Madam,

**Enquiry Date** 

17/12/2018

guiry By

GOH WEE DEK

Vehicle No. Accident Date

SJL645H 14/12/2018

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