

PRELIMINARY ADVICE		Date/Time:	Sent By:	Post-Repair Photos:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
FINALIZATION		Date/Time:	Confirm with:	Confirm by:	Taufik.	
Repair Cost:	PIP	\$5 3093.58	(4 days) Reduction:	\$210.94	% 30	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT		Date/Time:	Confirm with:	Email:	<input checked="" type="checkbox"/>	Call <input type="checkbox"/>
Final Liability:	%	100	(Agreed / Assessed)	BOLA S/N No.:	NIL	
Repair Cost:	GSI	\$5 3,310.13				
Loss of Rental (LOR):	\$5	-	(1 days)			
Loss of Use (LOU):	\$5	320.00	(5 80 x 4 days)			
Loss of Income (LOI):	\$5	-	(5 x days)			
LOR only <input type="checkbox"/>	LOU only <input checked="" type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LO <input type="checkbox"/>	[Tick only one]		
GIA/LTA Search	\$5	-				
Medical:	\$5	-				
Disbursement:	\$5	-	(e.g. Tow/ Independent)			
Legal Cost	\$5	-				
Total:	\$5	3620.00	Global Sum \$5:			
FINAL PAYMENT		Date/Time:	Confirm with:	Email:	<input checked="" type="checkbox"/>	Call <input type="checkbox"/>
Payee 1:	\$5	3620.00	Name 1:	Tc Autoclinic Pte. Ltd		
Payee 2: (Strike if N.A.)	\$5	220.00	Name 2:	Lim Hwa Leng		
Payee 3: (Strike if N.A.)	\$5		Name 3:			

TC AUTOCLINIC PTE LTD
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATE : ACCIDENT/BODY REPAIRS
WORKSHOP : LENG KEE
CONTACT NO : 67038511
REFERENCE : 242/IC/TCAC/CCR/2018
DATE : 21-DEC-2018

AXA INSURANCE PTE LTD
8 SHENTON WAY
#27-01 AXA TOWER
S(068811)
TEL : 68804741
FAX : 68804838
ATTN:MOTOR CLAIM MANAGER VALENCIA

OWNER'S NAME : MR LIM HUA LENG
ADDRESS : 27 HILLVIEW AVENUE
#03-09
S(669559)
TELEPHONE NO : 81126116

TYPE OF CLAIM : DIRECT SETTLEMENT / THIRD PARTY CLAIM
POLICY NO : 2100500152-01
VEHICLE NO : S8B1001G
MODEL CODE : FORARBZJ11EWAFJJ-
MODEL/YEAR : NISSAN QASHQAI 2.0 MY2014
ENGINE NO : MR20449339W
CHASSIS NO : SJNFBZJ11U1892629
MILEAGE : 27025 KM
DATE IN : 21/12/2018
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : SHAWN CHUA CHU RONG
ACCIDENT DATE : 21/12/2018

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after repair
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on "Without Prejudice" basis
- No illegal modifications to #1
- Supplementary item(s) must resurvey and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature:

Date:

Tanfilin 97495749
WP
12/1/19 @ 1110
Resing before paint
sure @ Likantoun
tanfilin @ Likantoun
H days.

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SBB1001G

S/NO JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1 FHI	FOCUS & ADJUST H/LAMP, RESET HORIZONTAL & VERTICAL ALIGNMENT TO FACTORY SPECIFICATION	48.00	✓
2 RPI	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL	120.00	✓
3 SEALI	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA	100.00	X
4 WAPI	ELECTRONIC 4 WHEEL ALIGNMENT & ADJUST STRG ANGLES TO STANDARD SPECIFICATION- PASSENGER	93.00	X
5 ZZ/001	REPLACE FRONT BUMPER, FRONT RIGHT FENDER & TRIM, ENERGY ABSORBER, REINFORCEMENT ETC. REPAIR PANELS	1000.00	500.
6 ZZ/002	RESPRAY FRONT BUMPER, FRONT RIGHT FENDER	600.00	400.
7 ZZ/003	QC, RETUNE & CONSULT CHECK		
8 ZZ/004	COMPLIMENTARY WASH & VACUUM		
	TOTAL LABOUR CHARGES	1961.00	

107.42

53.40

TC AUTOCLINIC PTE LTD
25 LENG KEE ROAD
SINGAPORE 159097

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SBB1001G

		DAMAGED PARTS & PRICES		
S/NO	PARTS DESCRIPTION	PARTS NUMBER	NETT	LIST S/NETT REMARKS
1	RIGHT HEADLAMP	26010-4EA0B	1617.00	at ✓
2	FENDER TRIM	63810-4EADA	483.00	at ✓
3	FRONT BUMPER	62022-4EADH	614.60	de ✓
4	FRONT RIGHT FENDER	F3100-4EAMB	622.70	Rx
5	RIGHT BUMPER BRACKET	62222-4EADA	20.90	de ✓
6	ENERGY ABSORBER	62090-4EA1B	195.70	X MV
SUB TOTAL			3553.90	0.00 0.00
LESS DISCOUNT (NETT-20.00%, LIST-30.00%, S/NETT-.00%)			710.78	0.00 0.00
GRAND TOTAL			2843.12	0.00 0.00
OVERALL TOTAL			2843.12	

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

TC AUTOCLINIC PTE LTD
25 LENG KEE ROAD
SINGAPORE 159097

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO 5881001G

TOTAL LABOUR CHARGES	1961.00
TOTAL SPARE PARTS CHARGES	2843.12
<hr/>	
GRAND TOTAL	4804.12 *
<hr/>	

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME	:	
SURVEYED DATE	:	
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00
LIABILITY	:	0.00
REMARKS	:	

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
AXA INSURANCE PTE LTD		Ref : CC4/ASM19000339/jb3	
8 SHENTON WAY #24-01 AXA TOWERS SINGAPORE 068811		Date : 07-01-2019	
		Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 5682M	Veh. Inspected	SBB 1001G
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	07/01/2019
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer		Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	21/12/2018	Inspection Date	
Survey held at	TC AUTOCLINIC PTE LTD 25 LENG KEE RD SINGAPORE 159097		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

Joy Irene (LKKAUTO)

From: Shawn Chua <shawnychua@tanchong.com>
Sent: Tuesday, 23 April 2019 1:14 PM
To: Joy Irene (LKKAUTO)
Subject: SBB1001G Claim Computation
Attachments: Liability Cleared.pdf; Letter Of Authority & Indemnity.pdf; Letter Of Claim For Third Party.pdf; Satisfactory Note.pdf; Approved Finalized Claim.pdf; Repairer's Invoice.pdf

AXA Ref: **S8M017KB**
LKK Ref: **CC4/ASM19000339/T1jb3**
Our Ref: **SBB1001G**

Good afternoon.

Attached are the documents for **SBB1001G claim computation**.

Kindly issue the **cost of repair of \$3310.13** payable to **TC AutoClinic Pte Ltd** & the **loss of use of \$320** payable to **Lim Hua Leng**.

Please mail the payments to **TC AutoClinic Pte Ltd 25 Leng Kee Rd S159097**.

Attention to **Mr Shawn Chua**.

Thank you so much for your time & assistance.

Shawn Chua
Service Executive
TC AutoClinic Pte Ltd
25 Leng Kee Road
Singapore 159097
DID: +65 67038515
HP: +65 96450023
Fax: +65 64795019



SATISFACTORY NOTE

TAN CHONG MOTOR SALES PTE LTD (TCMS)

AUTOLUTION INDUSTRIAL PTE LTD (AIPL)

TC AUTOCLINIC PTE LTD (TCAC)

DATE:

OWNER NAME:

NRIC NO.:

ADDRESS:

VEHICLE MODEL:

REGN. NO.:

CHASSIS NO.:

TYPE OF CLAIM:

OWN DAMAGE (OD)

OWN DAMAGE (OD) & UNINSURED LOSS
(EXCESS & LOSS OF USAGE) VIA
TCMS / AIPL / TCAC

THIRD PARTY THROUGH
TCMS / AIPL / TCAC

THIRD PARTY - OWNER
DIRECT CLAIM AGAINST
THIRD PARTY INSURANCE

WINDSCREEN / GLASS (W/S)

Lim Hua Leng

S1356355A

27 Hillview Ave

#03-09 S669559

Nissan Qashqai 2.0

SGB 1001 G

SJNFGAJ11V1892629

INSURANCE CO.:

AIG

CLAIM NO.:

242/TC/TCAC/ICCR/2018

POLICY NO.:

2106500152-01

DATE OF ACCIDENT:

21-12-18

DATE RECEIVED:

01-04-19

DATE COMPLETED:

04-04-19

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no further claim whatsoever against the above Company in respect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on*

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD (Non Claim Discount) may also be affected, subject to business policy of respective Insurance Company.

(NAME / SIGNATURE OF INSURED)

FOOTNOTE:

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER
THROUGH TCMS'S LEGAL AID.

DEPOSIT PAID BY OWNER

OWNER WILL MAKE CLAIM AGAINST
THIRD PARTY INSURANCE COMPANY

DOCUMENTS RETURNED TO
OWNER

TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER UNINSURED LOSS. (EXCESS
PAYMENT & LOSS OF USAGE)

INSURANCE CO. COPY

* Delete When Necessary

◀ Service Request Details

Claim

S8M017KB

Reference

None ✎

Loss Date

21 December 2018

Request Date

7 January 2019

Due Date

14 January 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

07012019 @ 10:17am
Shawn. Vch NLI in

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SBB1001G

Make

TPVD NISSAN

Service Address

...

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD

No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

Owner Default

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

Catherine Chong (LKK Auto)

From: Shawn Chua <shawnychua@tanchong.com>
Sent: Friday, 4 January, 2019 5:50 PM
To: SG AXA Insurance SM Claims Service Team; SG AXA Insurance SM AXA SGP - Motor Survey
Cc: Kelvin Heng
Subject: Accident Involving SBB1001G & SHC5682M On 21/12/18
Attachments: Estimate Before Survey.pdf; SBB1001G GIA Report.PDF
Categories: SHEKHAR

Dear Sir/Madam,

Our customer holds your insured driver, **SHC5682M** liable for the accident on **21/12/18** and would like to claim against your insured driver. We hereby inquire whether you would like to have a direct settlement with our customer, **SBB1001G**.

If you minded to reach an amicable direct settlement with our customer, please let us have your substantive reply strictly by **09/01/19**. Otherwise our customer will proceed in a manner that he deems fit.

Kindly let me know when I can arrange for an accident survey.

Attached herewith the **GIA Report** and **estimate of repair cost** for **SBB1001G**.

Shawn Chua
Service Executive
TC AutoClinic Pte Ltd
25 Leng Kee Road
Singapore 159097
DID: +65 67038515
HP: +65 96450023
Fax: +65 64795019



Shawn Chua

From: Taufikh (LKKAUTO) <Taufikh@lkkauto.com>
Sent: Monday, April 22, 2019 11:48 AM
To: Shawn Chua
Cc: Admin A; Joy Irene (LKKAUTO)
Subject: RE: SBB1001G Finalized Claim
Attachments: Finalized Claim.pdf; SBB1001 FINAL MARKING.pdf

Hi Shawn,

COR \$3093.58 , 4 days.

Regards
Taufikh
Lkk Auto

From: Shawn Chua [mailto:shawnychua@tanchong.com]
Sent: Thursday, 4 April 2019 9:35 AM
To: Taufikh (LKKAUTO)
Cc: Admin A
Subject: SBB1001G Finalized Claim

LKK Ref: CC4/ASM19000339/T1jb3
AXA Ref: S8M017KB
Our Ref: SBB1001G

Good morning.

Attached is SBB1001G finalized claim.

Kindly reply so that I can close the case soon.

Thank you very much for your time & assistance.

Shawn Chua
Service Executive
TC AutoClinic Pte Ltd
25 Leng Kee Road
Singapore 159097
DID: +65 67038515
HP: +65 96450023
Fax: +65 64795019





Pls proceed DS with quantum as proposed

Type

🔗 Question

Message

There was a system glitch and I did not receive activities. Issue is rectified. Pls proceed DS. TP Excess: \$5000.

Reply

Letter of Claim for Third Party

Insurance Company: AXA Insurance Plc Ltd
Address: 8 Shenton Way
#27-01 AXA Tower
S068811

Date: _____

Attention: Claims Department - Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number SBB 1001 G & SHC 5682 M at
corner of X&J Bldg & Bistro, 1 St Martin on 21-12-18.

I am the owner of vehicle number SBB 1001 G which was involved with the accident as mentioned above. As the accident was solely caused by your insured vehicle bearing registration number SHC 5682 M, I hereby submit my claim against your company for the uninsured loss which are as follows:

Excess Payment for OD Claim	\$ _____
Loss of Use (\$\$ <u>80</u>) for <u>4</u> days	\$ <u>320</u>
Car Rentals as per invoice attached	\$ _____
Search Fee	\$ _____
Cost of Repair	\$ <u>3310.13</u>
Others _____	\$ _____
Total Claim Amount	\$ <u>3630.13</u>

Enclosed please find copies of GIA report, Invoices & certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof or alternatively let me have the full & final settlement for all uninsured loss which amounted to \$ 3630.13, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely



Name: Tan Guoh L37

Address: _____

Tel No: _____

Joy Irene (LKKAUTO)

From: Joy Irene (LKKAUTO)
Sent: Wednesday, 26 June 2019 10:13 AM
To: claims
Cc: transcab_avaclaims@ava-ins.com; Admin A
Subject: ACCIDENT INVOLVING SHC 5682M & SBB 1001G ALONG DUNLOP 1 ST. MARTIN'S DRIVE ON 21/12/2018

Transcab Taxi
Singapore

Dear Sir/Madam,

OUR REF : CC4/ASM19000339/T1jb3
YOUR REF : P1680520 (SHC 5682M)

ACCIDENT INVOLVING SHC 5682M & SBB 1001G ALONG DUNLOP 1 ST. MARTIN'S DRIVE ON 21/12/2018

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 **M/s TC AUTOCLINIC PTE LTD** acting on behalf of the owner of **SBB 1001G** against your motor insurance policy.

Based on the accident reports, our reversing taxi hit parked third-party vehicle . Liability is down against us, we will proceed to negotiate for an amicable settlement accordingly.

We also wish to advise that there is an excess of **S\$5,000.00** attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

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 AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following **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.

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 / joyirene@lkkauto.com or deliver it by hand to our 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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or cst@axa.com.sg / joyirene@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Joy Irene | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108

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

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LETTER OF AUTHORITY AND INDEMNITY

- ☐ Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623
- ☐ Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254
- ☐ Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623
- ☒ TC Autoclinic Pte Ltd, 25, Leng Kee Road, Singapore 159097
- ☐ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

Type of Claim:

- ☒ Third Party (Direct Settlement)
- ☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SBB 1001 G **AND** SHC 5682 M
ON 21-12-18 **AT** carpark of K&J Butchery & Bistro, 1 St Martin's Dr

- ① I, the owner of vehicle no. SBB1001G hereby instruct you and authorise you to act for me with respect to the following: -
 - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
 - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
 - (d) To sign discharge voucher on my behalf.
- ② I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
- ④ In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
- ⑦ I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
- ⑧ I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
 - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
 - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name	<u>Lim Hua Leng</u>	Company Name	<u>TC Autoclinic Pte Ltd</u>
Address		Claim Officer's Name	<u>Sharon Chua</u>
Telephone No	<u>8112 6116</u>	Telephone No	<u>9645 0023</u>
Date		Date	
Company Stamp [For Co Regn Vehicle]		Claim Officer Signature	
			



AXA THIRD PARTY DIRECT SETTLEMENT

Vehide No:	BHC 5682M	(Insd veh)	Model: NISSAN GASHQAI
	BBB 1001G	(TP veh)	
Date of Accident/ Time:	21/12/2018 / 15:30		

Repair Estimate	: \$	5,146.41	
Final Repair Cost	: \$	3,310.13	(VWGBT)
Loss of Use	: \$	320.00	4 days at \$ 80.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	3,630.13	
Payee Name : TC AUTOCLINIC PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:		Agreed Liability _____ (%)
B)	For GIA Registered Workshop:		BOLA Applicable: Yes/ No BOLA Scenario No: <u>NIL</u>
	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/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 / 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: Sham Chua

Date: 19-08-19



Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date:

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date:

TAX INVOICE

CO. REG: 19-9105199-R

NAME :
ADDRESS : AXA INSURANCE PTE LTD
8 SHENTON WAY
TELEPHONE : #27-01 AXA TOWER S(068811)
MODEL : 68804741
ENGINE NO : FDRAR8ZJ11EWAFAJJ-
CHASSIS NO : MR20449339W
VEHICLE NO : SJNFBAJ11U1892629
S8B1001G

INVOICE NO :
INVOICE DATE : WE2102882
TERMS : 23-APR-2019
DATE REC'D : CREDIT
SA/SE : 01-APR-2019
JOB NO : CCR
MILEAGE : EG152316
YOUR REFERENCE : 027025
242/IC/TCAC/CCR/2019

ITEMS	JOB DESCRIPTION	AMOUNT
	LABOUR	
1	FOCUS & ADJUST H/LAMP, RESET HORIZONTAL & VERTICAL ALIGNMENT TO FACTORY SPECIFICATION	48.00
2	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL	120.00
3	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA	NC
4	ELECTRONIC 4 WHEEL ALIGNMENT & ADJUST STRG ANGLES TO STANDARD SPECIFICATION- PASSENGER	NC
5	REPLACE FRONT BUMPER, FRONT RIGHT FENDER TRIM, RIGHT HEADLAMP, REPAIR FRONT RIGHT FENDER	500.00
6	RESPRAY FRONT BUMPER, FRONT RIGHT FENDER	400.00
	SUBTOTAL :	1068.00
	PARTS	
1	RIGHT HEADLAMP	1293.60
	Qty:1 @ \$1617.00 each (Disc:20.00% After Disc:\$1293.60each)	
2	FRONT BUMPER	491.68
	Qty:1 @ \$614.60 each (Disc:20.00% After Disc:\$491.68each)	
3	RIGHT BUMPER BRACKET	16.72
	Qty:1 @ \$20.90 each (Disc:20.00% After Disc:\$16.72each)	
4	FENDER TRIM	386.40
	Qty:1 @ \$483.00 each (Disc:20.00% After Disc:\$386.40each)	
	SUBTOTAL :	2188.40

DOLLARS:

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this invoice must be made within seven (7) days from the date of this invoice, otherwise it shall be assumed that this invoice has been accepted as correct and conclusive.

CUSTOMER

TO SECURITY GUARD

PLEASE TEAR ALONG PERFORATED LINE

DATE

TIME

VEHICLE NO :

RELEASE BY

TAX INVOICE

CO. REG: 19-9105199-R

NAME :
ADDRESS : AXA INSURANCE PTE LTD
8 SHENTON WAY
TELEPHONE : #27-01 AXA TOWER S(068811)
MODEL : 68804741
ENGINE NO : FDRARBZJ11EWAFJJB-
CHASSIS NO : MR20449339W
VEHICLE NO : SJNFBAJ11U1892629
SBB1001G

INVOICE NO :
INVOICE DATE : WE2102882
TERMS : 23-APR-2019
DATE REC'D : CREDIT
SA/SE : 01-APR-2019
JOB NO : CCR
MILEAGE : EG152316
YOUR REFERENCE : 027025
242/IC/TCAC/CCR/2018

ITEMS	JOB DESCRIPTION	AMOUNT
1	REMARKS ACCIDENT INVOLVING SBB1001G & SHC5682M ON 21/12/8 AT CARPARK OF K&J BUTCHERY & BISTRO, 1 ST MARTIN	
2	DRIVE 3RD PARTY & LOSS OF USE CLAIM AGAINST AXA VIA TCAC	
3	AXA REF: S8M017KB OUR REF: SBB1001G	
4	SURVEYED BY MR TAUFIKH FROM LKK ON 10/01/19 ASSIGNED BY AXA	
5	ATTACHED DIRECT SETTLEMENT EMAIL BY MS JOY IRENE FROM LKK	
6	ATTACHED LETTER OF AUTHORITY & INDEMNITY ATTACHED LETTER OF CLAIM FOR THIRD PARTY	
7	ATTACHED SATISFACTORY NOTE: 242/IC/TCAC/CCR/2018	
	Insurance Co : AXA INSURANCE PTE LTD Policy No....: 2100500152-01 Claim Type...: DIRECT SETTLEMENT / THIRD PARTY CLAIM DOA.....: 21-DEC-2018 Our Ref.....: 242/IC/TCAC/CCR/2018 Surveyor.....: M/S LKK ENGINEERING & MANAGEMENT SERVICES	
	LABOUR :	1068.00
	PARTS :	2188.40
	SUBTOTAL :	3256.40
	ADD. DISCOUNT :	162.82
	TOTAL :	3093.58
	GST(7%) :	216.55
	AMOUNT DUE :	3310.13

DOLLARS: (NB : NC=No Charge;P=Included in Package;W=Warra;G=Goodwill)
THREE THOUSAND THREE HUNDRED TEN
AND CENTS THIRTEEN ONLY.

WORKSHOP MANAGER

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Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days
from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER

TO SECURITY GUARD

PLEASE TEAR ALONG PERFORATED LINE

DATE

TIME

VEHICLE NO :

RELEASE BY

SBB1001G (EG152316/WE2102882)




LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD			Ref : CC4/ASM19000339/T1gb3q2	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:PETER			Date : 28-08-2019	
			Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 5682M	Veh. Inspected	SBB 1001G	
Policy No.	VPX/P1680520	Coverage (\$)	0.00	
Claim No.	S8M017KB	Excess (\$)	0.00	
Assign From		Assign Date	07/01/2019	
2. Vehicle Particulars & Condition				
Make & Model	NISSAN QASHQAI	c.c	1997	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	SJNFBAJ11U1892629	Colour	WHITE	
Odometer	27913	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/45 R19	CONTINENTAL	6 mm	
L/H Front Tyre	225/45 R19	CONTINENTAL	6 mm	
R/H Rear Tyre	225/45 R19	CONTINENTAL	6 mm	
L/H Rear Tyre	225/45 R19	CONTINENTAL	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	21/12/2018	Inspection Date	10/01/2019	
Survey held at	TC AUTOCLINIC PTE LTD 25 LENG KEE RD SINGAPORE 159097			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SBB 1001G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	RIGHT HEADLAMP (N) (CONSISTENT)	CUT	1,617.00	1,617.00
1	FENDER TRIM (N) (CONSISTENT)	CUT	483.00	483.00
1	FRONT BUMPER (N) (CONSISTENT)	DEFORMED	614.60	614.60
1	FRONT RIGHT FENDER (N) (CONSISTENT)	TO REPAIR SEE LABOUR	622.70	-
1	RIGHT BUMPER BRACKET (N) (CONSISTENT)	NECESSARY	20.90	20.90
1	ENERGY ABSORBER (N) (CONSISTENT)	NOT NECESSARY	195.70	-
	LESS 20% DISCOUNT		-710.78	-547.10
	ADDITIONAL 5% DISCOUNT		-	-109.42
			2,843.12	2,078.98
	<u>LABOUR</u>			
	FOCUS & ADJUST H/LAMP ,RESET HORIZONTAL & VERTICAL ALIGNMENT TO FACTORY SPECIFICATION.		48.00	48.00
	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL		120.00	120.00
	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA.	NOT NECESSARY	100.00	-
	ELECTRONIC 4 WHEEL ALIGNMENT & ADJUST STRG ANGLES TO STANDARD SPECIFICATION -PASSENGER.	NOT NECESSARY	93.00	-
	REPLACE FRONT BUMPER ,FRONT RIGHT FENDER & TRIM ,ENERGY ABSORBER ,REINFORCEMENT ETC .REPAIR PANELS.INCLUSIVE OF THE REPAIR OF FRONT RIGHT FENDER.		1,000.00	500.00
	RESPRAY FRONT BUMPER ,FRONT RIGHT FENDER.		600.00	400.00
	ADDITIONAL 5% DISCOUNT		-	-53.40
			1,961.00	1,014.60
	GRAND TOTAL		4,804.12	3,093.58
RECOMMENDED COST OF REPAIRS				3,093.58

Report Ref No. CC4/ASM19000339/T1gb3q2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A














Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report in whole or in part, does so at his or her own risk.

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LKKInvoice1.pdf	Invoice	Surveyor/ Assessor expense	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 LKKInspecfron.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 LKKAdjustment14.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 PAYMENT BREAKDOWN, EXPRESS SETTLEMENT FORM.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 AUTHORITYISATION TO ACT FORM.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 WORKSHOP INVOICE.pdf	Invoice	Registrar	LKK AUTO CONSULTANTS PTE LTD (TP)	29 August 2019
 MANDATE IA - TC AUTOCLINIC - SBB 1001G.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 June 2019
 TP ESTIMATE- MARKED - .pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 June 2019
 SURVEY PHOTOS.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 June 2019
 RE-SURVEY PHOTOS.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 June 2019
 LETTER TO INSURED.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 June 2019
 EMAIL TP PH.mig	Letters and Correspondence	Workshop	VISHNU BATHAM Shikhar	7 January 2019
 CIA SBB1001G TP.PDF	Reports & Statement	GIA Report	VISHNU BATHAM Shikhar	7 January 2019