

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

18 APRIL 2019

RADHA EXPORTS PTE. LTD. 40 PANDAN ROAD SINGAPORE 609282

Dear Sir/Madam,

OUR REF

: CC4/ASM19000685/Kjb3

YOUR REF

: YN 8238J

# ACCIDENT INVOLVING YN 8238J AND GBH 6151S ALONG BUKIT PANJANG PLAZA CAR PARK ON 09.01.2019

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 Singapore Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s CITY AUTO PTE LTD acting on behalf of the owner of GBH 6151S against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had hit parked Third Party. As such, liability is down against us.

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 <a href="mailto:joyirene@lkkauto.com">joyirene@lkkauto.com</a> 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 Authority that NG SOON BENG is authorized to drive
- 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)



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• 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 6256 3561 or email us at joyirene@lkkauto.com.

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

Yours sincerely,

Joy Irené Case Handler

DID: 6841 2409 FAX: 6741 4108

Email: joyirene@lkkauto.com

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



## CITY AUTO PTE LTD

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643. TEL: 6453 1235, 6452 0250 FAX: 6453 7844 24hrs Towing Services Tel: 9823 8898 Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

### RE: LETTER OF AUTHORIZATION

Name of owner: ELITE FINE FOUR ILP	NRIC:
Address: HIL	
Name of Driver: HERVE STEPHANE LAUR	ENT FRANCOIS NRIC: S7077595F
Address: 34 BANGKIT ROAD # 05-	OI SINGAPORE 679977
Accident on 09/01/2019 Involving	g YN 6238T AND HOF 6151S
At/along BUKIT PANTANG PLAZA LUNDIN	6 BAY - B1
or to commence legal proceeding if necessary use/rental, etc and to any of there appointed so accident/claim and all amounts claimed or set authorize them to give an absolute discharge of I/We hereby authorize City Auto Pte Ltd, my/	otor Vehicle No:  GEF 61515  do authorize natever amount payable by the Insurance Co or Third Party in my/our name for the cost or repair and the loss of policitors to act for me/us in respect of the said filed shall be belong to them absolutely. I/We further
	ur behalf monies claims, correspondence and give a ats in connection with this on my/our behalf and for
I/We further agree to fully co-operate and atte to prosecution and claim maintained by City	and all court hearing that are necessary and subject . Auto Pte Ltd.
I/We further agree to undertake to indemnify therewith.	them against my/our claim for the cost which arises
In the event that my/our unsuccessful claim, I repairs to my motor vehicle.	/We undertake to pay the repairer for the cost of  CITY AUTO PTE LTD  Blk 8 Sin Ming Boad
Owner Signature:	Bik 8 Sin Ming Road #01-58/60/62 Sin Ming Ind Est Witness Signature Singapore 975643 Tel: 6453 1235 Fax: 6453 7944
Name:	Name: (Claims Section)
Date:	Date:



#### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	No: YN 8238J (Insd veh)			
The second secon	GBH 6151S	(TP veh)	Model: TOYOTA DYNA	
Date of Accident/ Time:	e of Accident/ Time: 09/01/2019			

Repair Est	imate	:\$	7273.41
Final Repa	air Cost GST	:\$	3,959.00
Loss of Us	e	:\$	600.00 6 days at \$100.00 per day
Rental (if	any)	:\$	days at \$ per day
LTA / GIA	Search Fee	:\$	2.00
Others:		:\$	
		1:5	
Final Sett	ement Sum	:\$	4,561.00
	me: CITY AUTO PE L arty Workshop GIA Register For Non GIA Registere	ed?	[ ] YES [У] NO (Kindly indicate below)  cshop: Agreed Liability
D)	For GIA Registered Workshop:  BOLA Liability:(%)		BOLA Applicable: Yes/ No BOLA Scenario No:
B)			
ы	BOLA Liability:	(%)	Assessed Liability (*):(%)
В)		W.C.	Assessed Liability (*):

#### NOTE:

- 1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 2. 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.

CITY AUTO PTE LTD Blk 8 Sin Ming Road

#01-58/60/62\Sin Ming Ind Est

Single 575643
Signature 81 wat 53 2759 East 6453 W94kshop stamp
Name of Representations Section)

Date:

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date:

Signature of AXA's surveyor/cepresentative: Name of AXA's surveyor /Representative: Date:



## CITY AUTO PTE LTD

One Stop Automotive Solution
BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944

24hrs Towing Services Tel: 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

#### **AXA INSURANCE SINGAPORE PTE LTD**

NO. 8 SHENTON WAY AXA TOWER SINGAPORE 068811

Attention: Motor Claim Department

Contact: 6338 7288

Fax No.: 6880 4838

#### TAX INVOICE

Tax Invoice: 12019-002710

Date: 24/04/2019 Vehicle No.: GBH6151S

Make / Model : TOYOTA DYNA

Mileage (km): 11691

Chassis No.: JTFAT35Y60K210240

Accident Date: 09/01/2019

Claim No. : CC4/ASM19000685/Kjb3

Reference: JO201901-0262 Policy No.: B29090975MKC

#### S/No. Particular

**Amount** 

S\$

\* Lumpsum repair

3,700.00

Total S\$: 3,700.00 GST @ 7% S\$: 259.00

Grand Total S\$: 3,959.00

CASH / NETS / CREDIT CARD PAYMENT ONLY

Customer's Signature/Co. Stamp

for CITY AUTO PTE LTD

Please note all works performed by City Auto Pte Ltd as performed in this invoice is subjected to the following Warranty conditions:

1) Any replacement of electrical components will carry 1 month warranty period from date of this invoice.

2) Any replacement of mechanical components will carry 3 months warranty period.

Please note that all warranty does not cover wear and tear conditions regardless of any components.

City Auto Pte Ltd reserves the right to determine any warranty conditions.

Thank You For Your Business!



# 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-19-005377

Date of Request:

10/01/2019

Your Ref No:

Online Purchase

City Auto Pte Ltd 160 Sin Ming Drive #05-01, Sin Ming AutoCity, Singapore 575722

Dear Sir/Madam,

**Enquiry Date** 

10/01/2019

Enquiry By

Jason Quak Leng Hui

TP Vehicle No.

YN8238J

Accident Date

09/01/2019

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YN8238J	AXA Insurance Pte Ltd	09/12/2018-09/01/2020	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.

This is a computer generated document and requires no signature.



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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-19-005377

Date of Request:

10/01/2019

Your Ref No:

Online Purchase

City Auto Pte Ltd 160 Sin Ming Drive #05-01, Sin Ming AutoCity, Singapore 575722

Dear Sir/Madam,

**Enquiry Date** 

10/01/2019

Enquiry By

Jason Quak Leng Hui

TP Vehicle No.

YN8238J

Accident Date

09/01/2019

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