



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLC 1445K (Insd veh)	Model: MERCEDES BENZ CITARO
	SBS 6522Y (TP veh)	
Date of Accident/ Time:	23/12/2018	

Repair Estimate	: \$	14,366.74	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	5,000.00	(GLOBAL SUM)
Payee Name : Soon Bee Vehicle & Bodywork Maintenance			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES [ ] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: <u>Yes</u> / No BOLA Scenario No: _____	
	BOLA Liability: <u>50</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

#### 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.
3. AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

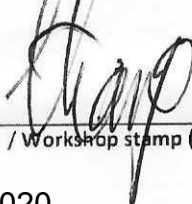
Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

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.

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: 17/07/2020



  
Signature of Witness / Workshop stamp (if applicable)  
Name of Witness:  
Date: 17/07/2020

Signature of AXA's surveyor/representative:  
Name of AXA's surveyor /Representative:  
Date: 17/07/2020



Auto  
Consultants  
Pte Ltd

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

26 MARCH 2020

**EARL GRAY CREATIVE  
BLK 62 MARINE DRIVE  
#13-90  
SINGAPORE 440062**

Dear Sir/ Mdm

**OUR REF : CC4/ASM19001166/Nga3**

**YOUR REF : SLC 1445K**

**ACCIDENT INVOLVING SLC 1445K AND SBS 6522Y ALONG/AT JUNCTION OF  
MARINE DR & MARINE PARADE RD ON 23/12/2018**

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 **GO AHEAD LOYANG PTE LTD** acting on behalf of the owner of SBS 6522Y against your motor insurance policy.

Both parties involved have given conflict of version. Based on the circumstances of accident and both parties damage profile, there is no conclusive evidence to substantiate either's parties version. We are of the view that the case would be settled at equal liability.

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](mailto: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](mailto:ceciliachong@lkkauto.com).

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

Yours sincerely



Cecilia Chong  
Case Handler  
DID: 6749 4274  
FAX: 6741 4108  
EMAIL: [ceciliachong@lkkauto.com](mailto:ceciliachong@lkkauto.com)

Cc     *AXA Insurance Pte Ltd*  
          *(Motor Claims Dept)*

# LETTER OF AUTHORISATION

Date: 07 Jan 2019

To: Soon Bee Vehicle & Bodywork Maintenance  
Singapore

I, GO AHEAD SINGAPORE PTE. LTD. of 2 Loyang Way, Singapore 508776, owner of SBS6522Y hereby authorize Soon Bee Vehicle & Bodywork Maintenance to act on my behalf with respect of the accident claim on the repair costs for my vehicle no. SBS6522Y that was damaged due to the accident occurred on (Date:) 23/12/2018 at (Time:) 09:20 am at (location:) MARINE DRIVE X MARINE PARADE ROAD involving vehicle no. SLC1445K forthwith.

I hereby authorise the workshop to settle my above mentioned claim in a manner that they deem appropriate and the workshop is further authorised to negotiate and receive payment regarding to the settlement of our claim with payment cheque/s being made in favor of the workshop. Our authorised workshop will separately reimburse GO AHEAD SINGAPORE PTE. LTD. for any Loss of Use claim for the above mentioned bus.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and with admission of liability as the driver / owner / insurers of the other vehicle /s is concerned.



Go Ahead Loyang Pte Ltd 's Signature  
Co's Stamp: (if applicable)

Acknowledge by:



Soon Bee Vehicle & Bodywork Maintenance's  
Signature

## Soon Bee Vehicle & Bodywork Maintenance

10 Anson Road #33-17 International Plaza Singapore 079903 Company Registration No: 53076555A

Tel: 9003 6715, Email: paul@soonbee-vbm.com.sg

GST Registration No: 53076555A

### TAX INVOICE



Tax Invoice No : TCC18033

Tax Invoice Date : 2 Apr 2020

#### AXA INSURANCE PTE LTD

8 Shenton Way  
#24-01 AXA Tower  
Singapore 068811

No	Description	Qty	Cost (\$)	Amount (\$)
01.	Completed Accident Repair Of Bus No: <b>SBS6522Y</b> Accident on 23/12/2018, along MARINE DRIVE x MARINE PARADE ROAD involving SBS6522Y and SLC1445K To supply spare part and repair for the above mentioned accident	1	\$8,350.00	\$8,350.00
	7% GST :			\$584.50
	<b>All cheques should be crossed and made payable to:</b> Soon Bee Vehicle & Bodywork Maintenance			

**GRAND TOTAL :** \$8,934.50

**AMOUNT DUE :** \$8,934.50



Paul

COMPANY STAMP & AUTHORIZED SIGNATURE



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 08 Jan 2019 / 23:23:51

Receipt Date/Time : 08 Jan 2019 / 23:23:11

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190108-004606

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 - SLC1445K As at 23 Dec 2018/09:20:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SLC1445K Enquiry Fee 20190108232010448362	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
Paid By				
	xxxxxxxxxxxx1782	Credit Card: Visa /MasterCard		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
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.



## Pls proceed DS at 50/50 with quantum as proposed

Type

🔗 Question

Message

.

Reply

# **Soon Bee Vehicle & Bodywork Maintenance**

10 Anson Road #33-17 International Plaza Singapore 079903

Tel: 90036715 Email: Paul@soonbee-vbm.com.sg

Our Ref: SBV-GAS/2018/SBS6522Y (SLC1445K)

Your Ref: SBS6522Y (SLC1445K)

Date: 02/04/2020

AXA INSURANCE PTE LTD.

8 Shenton Way

#24-01 AXA Tower

Singapore 068811

Attn: Motor Claim Control Dept.  
(Vehicle No. SLC 1445 K)

Dear Sir/ Madam

**Accident on 23/12/2018, along MARINE DRIVE x MARINE PARADE ROAD involving SBS6522Y and SLC1445K**

We are acting on our client behalf, **Go Ahead Singapore Pte Ltd**, the owner of the above said motor vehicle no. **SBS 6522 Y**.

We are instructed to claim damages against you/your driver/your insured in connection with the above-captioned accident involving our client vehicle registration number **SBS 6522 Y** and vehicle registration number **SLC 1445 K** driven by you/your driver/your insured at the material time.

We are instructed that the accident was caused by you/your driver's/your insured's negligent driving and/or management of motor-vehicle **SLC 1445 K**. As a result, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as stated in Part 1 of the annexure.

We have on 17 January 2019 notified you of the accident and a pre-repair survey of our client's vehicle was carried out on 17 January 2019. Our client's claim for cost of repairs is based on the amount negotiated and agreed with your surveyor, Mr Naz whom you have appointed/agreed after the pre-repair survey was completed.

We therefore propose the claim as follow Part 1 of the annexure.

Please let us have your reply the soonest.

Thank you.

A circular stamp with the text "Soon Bee Vehicle & Bodywork Maintenance" around the perimeter. To the right of the stamp is a handwritten signature that appears to be "Paul".

Best Regards,  
Paul  
+65 9003 6715



## ANNEXURE

### Part 1 – Particulars of loss and expense

Cost of repair	\$8,934.50
Loss of Use @ 5 days (\$250 per day)	\$1,250.00
Survey Report	\$0.00
GIA Report/LTA search	\$7.45
<b>TOTAL</b>	<b>\$ 10,191.95</b>