



Auto
Consultants
Pte Ltd

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

20 JUNE 2018

RENT & GO CAR RENTAL PTE.LTD.

100 JALAN SULTAN,
#01-26, SULTAN PLAZA
SINGAPORE 199001

Dear Sir/Madam,

OUR REF : CC4/ASM19001303/fb3

YOUR REF : SJP 9412H

**ACCIDENT INVOLVING SJP 9412H / SGM 159A AND OTHERS ON 15/01/2019
ALONG/AT SLE TOWARDS WOODLANDS**

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 Property Damage claim against your policy.

We have received a claim from KAI MOTOR TRADING, acting on behalf of the owner of SGM 159A against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

Please be informed that your No Claim Discount (NCD – if applicable) may be affected as a result of the claim against your policy. We also wish to advise that there is an excess of **S\$2,000.00** in accordance to your policy.

Our principal, AXA shall keep you informed of when to make the excess payment, which cheque is to be made in favor of "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

As Insurers, AXA 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 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpen@lkkauto.com, **if not provided at AXA's 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)



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- 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 AXA immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA's 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), 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 6841 2132 or email us at pohkin@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Poh Kin, Chong
Case Handler
DID: 6841 2132
FAX: 6741 4108
EMAIL: pohkin@lkkauto.com

Cc M/s AXA Insurance Pte Ltd
(Motor Claims Department)

LETTER OF AUTHORITY

To: M/S KAI MOTOR TRADING

Blk 3007 Ubi Road-1

#01-440

Singapore 408701

Date:

Dear Sirs / Madam,

Re: ACCIDENT INVOLVING TO VEHICLES Nos: SGM 159A & SJP 94124

ALONG SLE / BKE Near Nee Soon Flyover ON 15-01-2019

In Consideration of your repairing our/my motor vehicle number SGM 159A

at our/my request, We / I TAN AH HEE NIRC NO: S1760160A

the owner of motor vehicle number: SGM 159A do hereby authorise you

as our / my authorised representative to demand claim settle and / or receive whatever amount settled / payable by the insurance company and / or third party or to commence legal proceedings, if necessary, in our / my name, for the cost of repairs, loss of usage and any other relevant expenses and to your appointing any solicitor to act for us / me in respect of the said accident.

Signature:



Owner Name:

Tan Ah Hee

Vehicle No: of Owner:

SGM 159A

NIRC No:

S1760160A

Address:

Blk 547 PASIR RIS

ST. 51 #08-25

SC 510 547)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJP 9412H (Insd veh)	Model: TOYOTA WISH
	SGM 159A (TP veh)	
Date of Accident/ Time:	15/01/2019	

Repair Estimate	: \$	17,560.93	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		12 days at \$ 100 per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	7,400.00	
Payee Name : KAI MOTOTRADING			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____	
	BOLA Liability: _____ (%)	Assessed Liability (*): 100 (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			


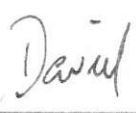

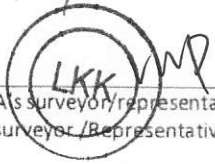
NOTE:

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/TORTEASOR 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	Signature of Witness / Workshop stamp (if applicable)
Name of Representative: TAN BENH HWA	Name of Witness: KOH CHAI KIM
Date: 04-09-19	Date: 04-09-19
	
Signature of AXA's surveyor/representative:	
Name of AXA's surveyor /Representative:	
Date:	



凱摩哆服務 KAI MOTOR TRADING

BLK 3007 UBI ROAD 1 #01-440, SINGAPORE 408701.
TEL: 6747 4006 FAX: 6743 7591 EMAIL: kaimotor@gmail.com
BUS. REG. NO: 44223100L GST NO: M90371531Y

專業服務：汽車意外保險賠償·拖車·汽車修理及維修服務·打嗎呷·噴漆·
Specialist in: Accidents Insurance Claim, Towing Service, Motor Vehicle Repairing, Panel Beating, Spray Painting.

Date : 12/01/2019

Your Insured veh no : SJP 9412 H

Tax Invoice

AXA Insurance S'pore Pte Ltd

8 Shenton way

27-01 AXA Tower

Singapore 068811

Singapore 189557

WITHOUT PREJUDICE

(By Email Only)

Dear Sir :-

Final Cost Repair Bill To Toyota Wish No SGM 159 A & SJP 9412 H on 15/01/2019 @07:10:00

To Supply :-

Total Lumpsum As Of Repair Costs Recommended By Surveyor And

Agreed By Ourselves : \$ 6,000.00

GST 7% \$ 420.00

\$ 6,420.00





DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1
SINGAPORE 798125
TEL: 6383 2661 FAX: 6484 2836
REG. NO. 430058/00D

No. 19649

Date, 31/1/19

OFFICIAL RECEIPT

Received from Tan Ah Hee
the sum of Dollars One thousand nine hundred

twenty only
being Payment Of SKH 4827H (15/1/19 - 31/1/19)

DAWN ENTERPRISES

\$ 1920/-
Cash Cheque No.



Kai Motor

DAWN ENTERPRISES

21 Seletar West Farmway 1
Singapore 798125
Tel: 63832661 Fax: 64842836
Reg No.430058/00D

N^o 36376**RENTAL AGREEMENT**DATE 15/1/19**HIRER'S PARTICULARS**

Name Tan Ah Hwe
Address 547 Pasir Ris St. 51
08-25
S 510547
I/C or Passport No. 1760160A Country _____
Occupation _____
Date of Birth _____ Age _____
Driving Licence No. _____ Date Passed _____
Tel: (HP) 94591798 (Residence) _____

DRIVER'S PARTICULARS

Name _____
Address _____
I/C or Passport No. _____ Country _____
Occupation _____
Date of Birth _____ Age _____
Driving Licence No. _____ Date Passed _____
Tel: (Office) _____ (Residence) _____

IMPORTANT NOTES:

1. No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
2. This vehicle is licensed to carry 04 passengers only.
3. Hirer is liable to pay first \$ _____ as excess of all claims any accident plus loss of earning while damaged vehicle is under repair.
4. For usage to Malaysia subject to higher excess all claims of \$55,000.00 and different rental rate.
5. Please notify our office should there be any accident involving this hired vehicle within 24 hrs.
6. No refund will be given for vehicle returns early.
7. No refund will be given for petrol left in vehicle.
8. Hirer is liable to pay all parking fee and traffic summonses.
9. Vehicles to be return during office hour only.
10. No Service on Public Holiday and Sunday.

CHARGES

16 Day at \$ <u>120.00</u> per days	\$ <u>1920.00</u>
Day at \$ _____ per week	
Day at \$ _____ per month	
TOTAL AMOUNT	\$ <u>1920.00</u>
AMOUNT PAID	\$ <u>1920.00</u>
BALANCE DUE	
Days Extension From _____ To _____	
Amount Deposit (refundable) \$ _____	

SCHEDULE

Date	Time	Mileage
<u>SKH A027H</u>	<u>T</u>	<u>AHLS</u>
<u>15/1/19</u>		
<u>31/1/19</u>		

FROM

15/1/19

TO

31/1/19

I/we have read and understood the terms and conditions above and hereby agreed to abide

Hirer's Signature

Driver/Gurantor's Signature

DAWN ENTERPRISES

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 16 Jan 2019 / 09:05:19

Receipt Date/Time : 15 Jan 2019 / 16:34:50

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190115-002868

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 - SJP9412H As at 15 Jan 2019/07:10:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SJP9412H Enquiry Fee 20190115163339604126	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20190115163355583 Direct Debit: eNETS Debit (Internet Banking)			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.