



Auto
Consultants
Pte Ltd

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

24 JANUARY 2019

SALLY ANNE HO JUAT FONG @HO JUAT FONG
BLK 113 BISHAN STREET 12
#02-112 BISHAN VIEW
SINGAPORE 570113

Dear Sir/Madam,

OUR REF : CC4/ASM19001536/Ajb3
YOUR REF : SKV 5774X

ACCIDENT INVOLVING SKV 5774X AND GZ 5461A ALONG UPPER THOMSON ROAD ON 21.01.2019

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 MG SOLUTION PTE LTD acting on behalf of the owner of GZ 5461A against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had hit Third Party vehicle from the rear. 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 joyirene@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)
- 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 Irene
Case Handler
DID: 6841 2409
FAX: 6741 4108
Email: joyirene@lkkauto.com

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

Provided always that the discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

AUTHORIZATION TO ACT

I, GREAT AIRCON ("the third party claimant")

of 22 SIN MING LANE #06-76 MIDVIEW CITY (S) 537969 (address),

owner of 925461A (vehicle no.) hereby authorize

M/S MG SOLUTION 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. 925461A that was damaged pursuant to the accident which occurred on 21/1/19 (date) along Upper Thomson Road towards Lornie Road after Sin Ming Ave (location)

involving Vehicle No/s SKV 5774X

("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.

Date 23 day of 01 (month) 20 19 (year)



my 1

Signed by "the third party claimant"



Signed by "the workshop"



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	8KV 5774X [Insd veh]	Model: MITSUBISHI L300
	GZ 5461A [TP veh]	
Date of Accident/ Time:	21/01/2019	

Repair Estimate	S	11,868.35	
Final Repair Cost	S	2,056.00	WGST
Loss of Use	S	540.00	8 days at 5 80.00 per day
Rental (if any)	S		days at 5 per day
LTA / GIA Search Fee	S	7.46	
Others:	S		
	S		
Final Settlement Sum	S	4,600.00	GLOBAL SUM (ALL-IN)
Payee Name : MG SOLUTION PTE LTD			
Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability	100 (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No	BOLA Scenario No: 27
	BOLA Liability: _____ (%)	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: WONG SU HUI
Date: _____

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: SHARON CHIA
Date: _____

Signature of AXA's surveyor/representative
Name of AXA's surveyor / Representative
Date: 20/3/2020

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No.: M4-0005529-2

Print Date/Time: 21 Jan 2019 / 13:01:33

Receipt Date/Time: 21 Jan 2019 / 13:01:33

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190121-001511

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 - SKV5774X				
As at 21 Jan 2019/09:50:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SKV5774X Enquiry Fee 20190121130033388422	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

20190121130039636 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.

[> Back to OneMotoring](#)

Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
SKV5774X	21 Jan 2019 / 09:50:00	AXA INSURANCE PTE LTD

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