(1420)	te CC /AXA1900 (605)	2 hb / LIKE
INS. CASE OWNER	CC /AXA1900 (009 /	IDAC:
Surveyor	Tarfich DOI: ASSIGNMENT	Date / Time _ well(4.
Pre-ussign / CCU	/FTE	Registered in Merimon.
Insured Vehicle N	cletuxel	gamoible (a 57176
	Cina mitting billion ill Out	GAINGOST.
Name of Insured	Policy No.	mtplous.
Insured Tel No.	HP: Make / Model	GIN WIND DR.
Excess Sec II :SS	D.O.A: VI) L M Place of Accid	ent: Giv with Vic
Is driver the owner		
If NO. Driver Na	me/Age: SIM WITHIN WILM OIGIA REPO	RT: YES/ NO : TP GIA REPORT: (ES)/ NO
Driver Tel		ty: % Final ? Yes/No
5HA 827	9	
I INSRS:	INSRS: INSRS:	INSRS:
WSP: 070	WSP: WSP:	WSP:
Tel: V	Paneta H Tel: H Tel:	H Tel:
EMKS:	Liability: Liability: RMKS: RMKS:	Liability: RMKS:
	RAIRS. DATE:	name.
Date Time	CHORADOK MICHAELOK	STAGE DATE/PIC
(/3/\fr/	MARKET STORT OF	Non-Reporting for (1st):
		Non-Reporting Itr (2nd):
1/1	a chartalata	Non-Reporting lir (Final): Nonfication lir (if non-pickup);
	ok glantuaim	CMOR / 11/05/19 - VIC
	A	After call ltr to Of:
	OINE	Documentation Check List: Handler Typist
	- TO LOD IN BY MUMIL	Notification lir (if non-pickup) After call lir to OE:
e piladin	SPOKE TO OID. OI TO WHY. HE	Authorisation To Act
10:0544	CONFIGURED ACCIDENT DEVANO 4 WIS	Release Venicher 100 VOV
	KRAPITORIA MHRIO HILL BY ILD INDUTTION	Final Repair Bill:
	HILL OF TO CUMIN, REGISTED TO GETTLE	Car Restal Invesor:
	A MONTHS HOS BODS SOME DETAILS	Towing Invoice
Nowlea	CHALLES HARMONING IN IN OC.	Medical Bill
P1/E0/31	- ASIA APPROVED WHATPITY. CORESPON.	PIR
	T devin the chart -(0 th - is researth)	Mandate/Reject Instruction:
28/05/19	- WHE KENIGED WHINDRE LEFTWIED	LOD
PRELIMINARY ADVICE	Date/Time: Scnt By:	Payment Breakdown Form: Post-Repair Photos:
PRELIMINARY ADVICE	Dates time: Sent by:	Others: Do POKIM
FINALIZATION	Date/Time: Confirm with:	Confirm by:
Repair Cost: LO	55 4,100,00 (4 days)Reduction: 44 %	Email Call
FINAL SETTLEMENT	Date/Time: OSOKIJQ Confirm with KESONISTH	Email Cal
Final Liability	% OO (Agend / Assessed) BOLA S/N No.: 9\6	If NO or B 28. Ass. Lia:
Repair Cost (LOR):	\$\$ 4.887-00 \$\$ 548.00 (5 days) X \$ (09.60	COM (GOVERNOY)
Loss of Use (LOU):	55 250-50(5 50 x 5 days)	- motor from
Lors of Income (LOI):	55° - (5 s days)	- La Lativita
LOR only LOU only		
GIAATA Search Medical:	55 -	Claim status: Normal/Reject/Private Settle
Disbursement:	SS - (e.g. Tow/ Independent)	2) Report Format
Legal Cost	55	3) Survey fee: 4500.00
Total:	SS 5 1/67 · CO Global Sum SS: —	
FINAL PAYMENT	SS 5,187.00 Name 1: DING AUTOMOTI	Email Call
Payee 1:		NA BLR PLD
Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.)	SS — Name 2: SS — Name 3:	
P. P. David Co. Committee of Co. Co. Co.	INC. STIERRES	

Taufikh Ket:	74×19.
mar: lagren	25-1-55ME57
Front Date: Estimated Cost.	Typo M.Car / M.Cycle / Bus / Van / Lorry (Taki / Prime Mover)
OD TO INSPECT Vehicle No.	Make Hydright 140 cs 1685 Colour Mellon AIC Insured / Std / NI / NA
of Insured	Sp.Reading 512,725 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No.	CINO: CONDITION HUS 414ME 40615 +4
Sum Insured: Excess: (Client's Record)	Sleering: Inorder / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: (Rtp / S/Rim / STD A/Rim or / Tyre Size: F: 205 / C-PLL-
(Palicy Condition)	R: N. I N.
Remark: The veh had commenced its repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
Ball or Market Value. IDAC Accident Rport: Consistent? : Yes or No. GIA / PR Seen: Consistent? : Yes or No.	
Est. Repairs: 4 days Res.: Yes or M	No D.O.A. D.O.L 24/1/1 No Survey held at Ding Auch
CA / REV / REP. / 24 HRS Vehi Date: Person Contacted:	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
CKED: \$ 8	.00 .85.71 H.J.)
ExterTime File Pass to: Prefi. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Foe.
Contestima File Raturn 662	Add Fee: Site Insp. (\$ 15+8 1)
Page 4 Format -	Tech, loves (\$) Sinus
Report Format : Lump Sum / LB lc / S	
Samp Same of the Section 1	AA45, 400 15



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 Intern	nationale Des Experts En Auton	nobile
AXA	INSURANCE PTE	LTD	Ref : CC4/ASM1900	01605/T1hb3
700	8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date: 24-01-2019 Code: ASM	
1.		Policy Particula	ars :- THIRD PARTY CLA	IM
	Insured Veh.	SLC 5428J	Veh. Inspected	SHA 827G
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	24/01/2019
2.		Vehicle Pa	articulars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Con	ditions 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.		Descri	iption of Damages	
5.	_	Con	eral Information	
	Accident Date	23/01/2019	Inspection Date	24/01/2019
	Survey held at	DING AUTO PTE LTD	mapecuon Date	+11411-414)
	July to Held at		D EST SEC C SINGAPORE	575645
5a.	•		Remarks	
		ON WAS CONDUCTED ON A"		

TO :

ESTIMATE REPORT 1ST Quotation

FAX NO:

24/01/2019 10:39

JOB-NO: 50111353

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet) CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHA0827G

TRANS: AUTO

MAKE / MODEL: HYUNDAI / i40

JOB-CODE: TP

OWNER'S INSURER: MS First Capital Insurance Limited

SA: Ding Auto User 1

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED	DISCOUNT	DISC PRICE	IND	SUR DISP	PRICE
LABOUR	11534	10000000				4 40 7	70 -
1 STRAIGHTEN AND PANEL BEAT AN AREAS	CCIDENT 1.00	800.00	0.00	800.00		600 A	300.
2 R&R CONDENSOR AND RADIAOTE REFILL AIRCON GAS	R.AND 1.00	150.00	0.00	150.00		Y	7.120
3 R&R TYRE AND RIM	1.00	120.00	0.00	120.00		Y	30.
4 FRONT WHEEL ALIGNMENT AND BALANCING	1.00	120.00	0.00	120.00		Y	8-0.
5 CHECK WIRING	1.00	150.00	0.00	150.00		Y	30.
6 RUSH PROOFING	1.00	150.00	0.00	150.00		Y	30
7 SPRAY PAINTING ON FRONT BUM	PER 1.00	250.00	0.00	250.00		Y	200
8 SPRAY PAINTING ON FRONT FEND	DER 1.00	250.00	0.00	250.00		Y	200
9 SPRAY PAINTING ON BONNET	1.00	250.00	0.00	250.00		Y	×
TOTAL		2,240.00	0.00	2,240.00			
MATERIALS							
1 FRONT BUMPER	1.00	599.68	119.94	479.74	L	Y	de
2 FRONT BUMPER RETAINER RH	1.00	42.32	8.46	33.86	L	Y	64
3 HEAD LAMP RH LOWER BRACKET	1.00	68.32	13,66	54.66	L	Y	2×1
4 HEAD LAMP RH	1.00	1,808,10	361,62	1,446.48	L	Y	car
5 FRONT FENDER RH	1.00	659.50	131,90	527.60	L	Y	ht-
6 FRONT FENDER RH INNERSHIELD	1.00	185.12	37.02	148.10	L	Y	21-
7 FRONT RIM CAP RH	1.00	250.00	50.00	200.00	L	Y	and!
8 SUPPORT PANEL	1.00	962.67	192.53	770.14	L	Y	2/
9 FRONT BUMPER CLIPS	1.00	35.00	0.00	35.00	S	Y	ne
10 FRONT FENDER RH INNER SHIELD	CLIP 1.00	35.00	0.00	35.00	S	Y	ne
11 FRONT FENDER ADS STICKER	1,00	180.00	0.00	180.00	S	Y	wh
12 FRONT TYRE RH	1.00	350,00	0.00	350.00	S	Y	XW
TOTAL		5,175.71	915.13	4,260.58			
TOTAL PARTS & LABOUR :		7,415.71	915.13	6,500.58			

EXCESS/LOADING:S\$ 0.00

No. Of Day:

RE-SURVEY, BEFORE/AFTER PAINTING PART-BY-PART OR LUMP SUM: SS

DATE OF SURVEY: 24 / 1 / 19

G-STAR-WI-ET-001-02-Rev00

64739522

CHASSIS: KMHLB41UMEU061574

ENGINE: D4FDEU449439

DESCRIPTION		QTY	COSTS DIS	COUNT	DISC PRICE	IND	SUR.DISP	PRICE
SURVEYED BY:	_ l w	4 1:1			2	Oli	harak	0000
CONTACT NO:	974457	FAX NO:			s 4v.	EW	hant	
							•	
NOTE: LUMP SUM AN	YOUNT WOULD BE	REVISED IF S	UPPLEMENT F	REPAIR IS	REQUIRED			
	MOUNT WOULD BE	REVISED IF S	UPPLEMENT F	REPAIR IS	S REQUIRED			
DAuto001	OUNT WOULD BE	REVISED IF S	UPPLEMENT F	REPAIR IS	S REQUIRED			
DAuto001 Ding Auto User 1	MOUNT WOULD BE	REVISED IF S	SUPPLEMENT F	REPAIR IS	SREQUIRED			
NOTE: LUMP SUM AN DAuto001 Ding Auto User 1 ESTIMATOR STA AUTOCENTRE	MOUNT WOULD BE	REVISED IF S	SUPPLEMENT F	REPAIR IS	S REQUIRED			

LKK Auto Consultants hence notify

the Repairer of the following:

- . To resurvey before latter spray painting:
- To display damaged series; during resurvey
 Parts prices are under a commission.
- Third party survey is as a Droppice' basis.
- . No illegal modification of 5) is allowed
- Supplementary stems, and the resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:

Menu



Service Request Details

Claim

59M01BQC

Reference

None @

Loss Date

January 23, 2019

Request Date

January 24, 2019

Due Date

January 31, 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Sung whin
Tauhleh



Vehicle Information

Incident Vehicle Registration #

SHA827G

Make

TPVD HYUNDAI

LKK AUTO CONSULTANTS PTE LTD (TP) -

Menu

Service Address

...

Primary Contact/Insured

SIM MEOW LIAN IRENE 187 TENAH MERAH KECHIL AVENUE, 465721, Singapore

JOANNECHONG@ANDA.COM.SG

Claim Handler

CHAN Kian Chuan 6568804269 kianchuan.chan@axa.com.sg

Additional Instructions
NON-REPORTED

Messages Invoices

History

Documents

Assessment

Metrics

Notes

New Message

Catherine Chong (LKK Auto)

From:

taxiscs@stengg.com

Sent:

Wednesday, 23 January, 2019 6:22 PM

To:

SG AXA Insurance SM AXA SGP - Motor Survey

Cc:

ACCOUNTS@DINGAUTO.SG; ADMIN@DINGAUTOMOTIVE.COM.SG;

carlor.chan@dingauto.sg; Dd hashim

Subject:

ACCIDENT INVOLVING SHA827G AND SLC5428J ON 23/01/2019 ARRANGE

SURVEY

Attachments:

SAS2541326.PDF; Invoice SHA827G - SLC5428J.html

Categories:

Santosh

Dear Officer,

Please arrange surveyor come onto Survey SHA827G ASAP

The vehicle SHA827G already in 31 Corporation Road 649825.

Thanks

Best Regards

Ding Automotive Pte Ltd

Guang

Hp: 62657130 / 94669828

NOTE !!!

All mailed letter & cheque payment is to be mailed to our main office address:

BLOCK 10 #01-20

SIN MING INDUSTRIAL EST. SEC C

SINGAPORE 575645

[This e-mail is confidential and may also be privileged. If you are not the intended recipient, please delete it and notify us immediately; you should not copy or use it for any purpose, nor disclose its contents to any other person. Thank you]

Menu



Re:RE: Re:<MANDATE IA> S9M01BQC ACCIDENT INVOLVING VEHICLES SLC 5428J(OI) AND SHA 827G(TP) ON 23/01/2019 TOTAL: \$5,266.80

Type

Question

Message

PLS PROCEED FOR SETTLEMENT NOT EXCEEDING \$5,187.00

Reply

DING AUTOMOTIVE PTE LTD

OUR REF

: 50111353/ TP/SHA827G/AD /23/01/2019/ DD HASHIM

YOUR REF

: SLC5428.J/ --

19 February 2019

Motor Claims Department AXA INSURANCE 8 SHENTON WAY, #24-01 AXA TOWER, 068811 SINGAPORE

ACCIDENT INVOLVING: SHA827G AND SLC5428J on 23/01/2019 LOCATION ALONG: SIN MING DRIVE TOWARDS 383 SIN MING DRIVE

We refer to the above matter.

	Rate per day	Repair days	AMOUNT BEFORE GST	GST 7%	AMOUNT AFTER GST
Cost of Repair	s -	6	\$ 4,100.00	\$ 287.00	\$ 4,387.00
Loss of Rental	\$ 109.60	6	\$ 657.60	s -	\$ 657.60
Loss of Income	S 80.00	6	\$ 480.00	s -	\$ 480.00
LTA/GIA Search Fee	s -	0	\$ 1.87	s 0.13	s 2.00
Towing Fee	s -	0	5 -	s -	s -
Surveyor Fee	s -	0	s -	s -	s -
Total	\$ 189.60	6	5 5,239.47	\$ 287.13	\$ 5,526.60

The accident was caused solely by the negligence of your insured and as a result, We had incurred the following costs of repair and losses of our insurer:

Enclosed are copies of the following documents for your perusal:

0	Repair Estimate	0	Discharge Voucher
0	GIA/Police Accident Report	0	Certificate Of Insurance
8	LTA 3rd Party Search Fee	0	Letter Of Demand
6	Milleage Record	0	Repair Tax Invoice/Final Bill
0	Rental Rates Confirmation	0	Confirmation Finalize&Liability Email Copy
0	Letter Of Authority	0	

Our insurer has authorized DING AUTOMOTIVE PTE LTD to deal with the repair and accept payment in relation to the claim for repairs or loss of use and execute documents on behalf of insurer.

Please look into our client's claim soonest possible.

Yours sincerely DING AUTOMOTIVE PTE LTD DD HASHIM HP: 81160811 Office: 6452 1208

Fax: 6452 0614

Satisfaction Voucher Date: 28/01/2019 MS First Capital Insurance Limited Attention: MOTOR CLAIMS DEPT Dear Sir/Madam S135 Tan lian SZR 28 JAN'19 11:3 I/We hereby acknowledge having received from Singapore Technologies Kinetics Ltd.,249 Jalan Boon Lay, Singapore 619523, my/our vehicle number SHA0827G which has been repaired to my/our satisfaction and acceptance. I/We admit that the payment of SGD _____ account for such repairs is in full discharge of my/our claim upon the corporation under the policy number D-18088937MFSH reference claim number 50111353 in respect of the damage caused to the said vehicle in an accident that occurred thereto or about the 23/01/2019 at SIN MING DIRVE Dated this day of Company Stamp if applicable Signature: NRIC No: Name: CityCab PTE LTD (Fleet)

383 SIN MING DRIVE

SINGAPORE 575717 0

Address:

Form G-STAR-WI-FC-005-01- Rev00



51 UBLAVE 1, #01-25 PAYA UBLINDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

11 MARCH 2019

SIM MEOW LIAN IRENE 187 TANAH MERAH KECHIL AVENUE SINGAPORE 465721

By Post & By Email

Dear Sir/Madam.

OUR REF

: CC4/ASM19001605/T1hb3

YOUR REF : SLC 5428J

ACCIDENT INVOLVING SLC 5428J AND SHA 827G ALONG SIN MING DRIVE ON

23.01.2019

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

We have received a claim from M/s DING AUTO PTE LTD acting on behalf of the owner of SHA 827G against your motor insurance policy.

Based on the accident report and accident, it was reported that your vehicle had collided to the Third Party vehicle SHA 827G. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD - if applicable) 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 7 days from the date of this letter 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)
- Authorization Letter for the Driver to drive the vehicle
- 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)



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

 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 vicalpeh@lkkauto.com.

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

Yours sincerely,

Vic Alpeh Case Handler DID: 6841 2096 FAX: 6741 4108

Email: vicalpeh@lkkauto.com

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

<u>Simkc1@gmail.com</u> / <u>joannechong@anda.com.sg</u> (Email)

Vic (LKKAuto)

From:

Vic (LKKAuto)

Sent:

Monday, 11 March, 2019 10:51 AM

To:

Simkc1@gmail.com

Cc:

joannechong@anda.com.sg; Admin A; Vic (LKKAuto)

Subject:

YOUR REF: SLC 5428J, ACCIDENT INVOLVING SLC 5428J AND SHA 827G ALONG

SIN MING DRIVE ON 23.01.2019



Auto Consultants Ple Ud

51 UBLAVE 1, #01-25 PAYA UBLINDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

11 MARCH 2019

SIM MEOW LIAN IRENE 187 TANAH MERAH KECHIL AVENUE SINGAPORE 465721 By Post & By Email

Dear Sir/Madam,

OUR REF

: CC4/ASM19001605/T1hb3

YOUR REF

: SLC 5428J

ACCIDENT INVOLVING SLC 5428J AND SHA 827G ALONG SIN MING DRIVE ON 23.01.2019

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

We have received a claim from M/s DING AUTO PTE LTD acting on behalf of the owner of SHA 827G against your motor insurance policy.

Based on the accident report and accident, it was reported that your vehicle had collided to the Third Party vehicle SHA 827G. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD – if applicable) 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to <u>vicalpeh@lkkauto.com</u> within 7 days from the date of this letter <u>if not provided at AXA's reporting centre</u>. 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)
- Authorization Letter for the Driver to drive the vehicle
- 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 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 vicalpeh@lkkauto.com.

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

Best Regards.

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: <u>vicalpeh@lkkauto.com</u> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

IKK Save the Earth Print only when necessary

This e-mail contain confidential and privileged material, and are for the sole use of the intended recipient. Use or distribution by an unintended recipient is prohibited, and may be a violation of law. If you believe that you received this e-mail in error, please do not read this e-mail or any attached items. Please delete the e-mail and all attachments, including any copies thereof, and inform the sender that you have deleted the e-mail, all attachments and any copies thereof. Thank you.

LETTER OF AUTHORITY

ACCIDENT INVOLVING SHA8279	& SLC5428J	_ON	23/1/19	
citycab pte ltd owner/ No. SHA STAG he Ltd to submit, correspondent accident.	ereby authorize Di ond, negotiate and	e Reg ng Au settl	istration I tomotive P e my claim f	for
I further authorize that repair, loss of income a party vehicle insurance in favour of the Ding A payment be forwarded my claim.	and rental, survey reparticulars enquius utomotive Pte Ltd	repor ry fee I and	t fee, third e etc. Be mad that the said	de d
SIGNED BY:	DATE:	23/	119	





AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle ?	Not	SLC 5428J	(Insd	Model: HYUNDAI 140		
		SHA 827G	(TP veh)			
Date of A	e of Accident/ Time: • 23/01/2019 - 14:30					
Repair Es	timate		:\$	6,955.61		
Final Rep	air Cost		:\$	4,387.00		
Loss of U	ise		: \$	250.00	5 days at \$50.00 per day	
Rental (if	auy)		: 8	548.00	5 days at \$109.60per day	
LTA/GI	A Search Fee		:\$	2.00		
Others:			: \$			
Final Se	ttlement Sum		: \$	5,187.00		
Payee N	ame: DING AUTO	MOTIVE PTE LT	D			
	Party Workshop GIA			[×] NO (Kind	dly indicate below)	
A)	For Non GIA B	tegistered Workshop:	1	greed Liability 10	0(%)	
B)	For GIA Regist	For GIA Registered Workshop:			/ No BOLA Somario No:	
	BOLA Liability	(%)		assessed Liability (*):_	(%)	
	* Assessed Liab	ility to be filled only for	chain collis	ions and for cases whe	re BOLA does not apply.	
Remarks						
OTE.						

- 1. 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.
- 3. AXA RESERVE THEIR RIGHTS OF RECOVERY IN THE EVENT OF FRAUD / MIS REPRESENTATION / MISTAKE / MATERIAL NON DISCLOSURE. AXA ALSO RESERVES THEIR RIGHTS TO WITHDRAW THEIR ACCEPTANCE IN THE EVENT OF ANY INCONSISTENCIES/FRAUD/SUSPECTED FRAUD/MIS REPRESENTATION AND/OR MATERIAL NON DISCLOSURE OF FACTS/MISTAKE(S).

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 that settlement that we and or our client have/had/has against you and the policyholder/authorised driver/tortfea. (a) for any and all losses (past/present/future) arising from this accident.

We onfirmed that we have the authority of confirmed that the confirmed that the confirmed that we have the authority of confirmed that the confirmed that the confirmed that the confirmed that the confirmed that we have the authority of confirmed that the c

Signature workshop representative / Name of Representative: KANA

Signature of Witness / Workshop stamp (if applicable Name of Witness: DD HASHIM

Dato: 05/04 10

Signature of AXA's surveyor representative

Name of AXA's surveyor /Representative: Date:

AXA Insurance Pte Ltd (Company Reg. No. 199903512M) 8 Shenton Way, #24-01 AXA Tower, Singapore 06881.1.

Customer Centre #B1-01

Date: 05 04 1

Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.comi.sg

DING AUTOMOTIVE PTE LTD

Business Reg. No: 201619222G BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645 Tel: 6452 1208 Fax: 6452 0614

TAX INVOICE

AXA INSURANCE PTE LTD 8 SHENTON WAY #27-01, AXA TOWER

DATE GST REG NO :

I-000588 05/04/2019

SINGAPORE 068811

ATTN: MOTOR CLAIMS DEPT

TERMS

201619222G C.O.D.

PO NO

INVOICE

SLC5428J

OUR REF

SHA827G

1 of 1

TEL :	FAX :	PAGE	:	1 of 1
ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1.	COST OF REPAIR	1	4,100.00	4,100.00
2.	LOSS OF RENTAL (W/O GST)	5	109.60	548.0
3.	LOSS OF INCOME (W/O GST)	5	50.00	250.00
4.	LTA SEARCH FEE	1	1.87	1.8
REMARKS 50111353	:	SUB TOTAL	:	4,899.8 287.1
YOUR REF:	LKK REF CC4/ASM1900 C ALPEH (LKK) /2019	TOTAL SGI DEPOSIT O/S BALAN	:	5,187.0

FOR DING AUTOMOTIVE/ST

Authorised Signature

Customer Signature

I have inspected and hereby confirmed that the job done and the amount due herein are entire to my satisfaction

Our Ref: CC19010686

Date: 14 February 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

23/01/2019 @ 14:30 hrs

ALONG

ALONG SIN MING DRIVE TOWARDS 383 SIN MING

DRIVE

INVOLVING

SLC5428J

We refer to the above-mentioned accident and wish to inform that CityCab Pte Ltd is the registered owner of the taxi bearing vehicle registration number SHA0827G (the "Taxi"). The Taxi was hired to TAN YIAN SZE IC NO S1354679G a registered hirer-operator of CityCab Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$117.28 per day (inclusive of GST).

Please be advised that the Taxi was insured with MS First Capital Insurance Ltd on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

SHA 877G



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-19-013586

Date of Request:

23/01/2019

Your Ref No:

Online Purchase

Ding Auto Pte Ltd Blk 10, #01-20

Sin Ming Industrial Estate Sector C

Singapore 575845

Dear Sir/Madam,

Enquiry Date

23/01/2019

Enquiry By

You Jing Feng

TP Vehicle No.

SLC5428J

Accident Date

23/01/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLC5428J	AXA Insurance Pte Ltd	06/08/2018-05/08/2019	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.

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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

TAX INVOICE

Our Ref No:

GR-19-013566

Date of Request:

23/01/2019

Your Ref No:

Online Purchase

Ding Auto Pte Ltd Blk 10, #01-20 Sin Ming Industrial E

Sin Ming Industrial Estate Sector C

Singapore 575845

Dear Sir/Madam,

Enquiry Date

23/01/2019

Enquiry By

You Jing Feng

TP Vehicle No.

SLC5428J

Accident Date

23/01/2019

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

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SLC 5428J	(Insd veh)	Model:	HYUNDAI 140
	SHA 827G	(TP veh)		200
Date of Accident:	23/01/2019			- C
	-			
Global Sum Settlen	nent : [] Y	'es [X] No	
Repair Estimate		: \$	6,955.61	
inal Repair Cost		s	4,387.00	
oss of Token Sum		: \$	250.00	5days at \$50.00 per d
Rental (if any)		: \$	548.00	5 days
TA / GIA Search F	ee	: \$	2.00	97 a 3445-2
			2 0	
Others:		: \$	0.00	
		\$		
inal Settlement Su	ım	: S	5,187.00	
	kshop GIA Regist	L970] YES [X	1 NO (Kindly indicate
elow)	namep our region	i t	, ,,,,	, no (randy marcate
A) For Non GIA R	egistered Worksh	iop;	Agreed Liability _	(%)
B) For GIA Regis	tered Workshop:	1	BOLA Applicable	Yes/ No BOLA Scenario N
SATISFACE AND REPORT AND A	200023			1927
	(%)			/ (*):(%)
D3 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	bility to be filled on	y for chain co	llisions and for ca	ses where BOLA does not ap
Remarks				
ayment Instruction	n: Payee's Break	down		
DING AUTOM	OTIVE PTE LTD		: \$	5,18
THE PERSON NAMED IN COLUMN 1	-		~	7
				6377
JOANNE L	EE KHANG MIN		7/05/2019	

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)



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 Intern	ationale Des Experts En Auton	nobile
AXA INSURANCE PTE	LTD	Ref : CC4/ASM1900	1605/T1hb3q2
8 SHENTON WAY #24 AXA TOWERSINGAPO ATTN:KIAN CHUAN	1.4.7.7.7.	Date: 07-05-2019 Code: ASM	
1.	Policy Particula	rs :- THIRD PARTY CLA	IM
Insured Veh.	SLC 5428J	Veh. Inspected	SHA 827G
Policy No.	GA124057	Coverage (\$)	0.00
Claim No.	S9M01BQC	Excess (\$)	0.00
Assign From		Assign Date	24/01/2019
2.	Vehicle Pa	rticulars & Condition	
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	KMHLB41UMEU061574	Colour	YELLOW
Odometer	512925	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3.	Con	ditions of Tyres	
	Size	Make	Balance
R/H Front Tyre	205/60 R16	TRIANGLE	6 mm
L/H Front Tyre	205/60 R16	TRIANGLE	6 mm
R/H Rear Tyre	205/60 R16	TRIANGLE	6 mm
L/H Rear Tyre	205/60 R16	TRIANGLE	6 mm
4.		ption of Damages	
DAMAGES SEE D	STAINED DAMAGES AT THE ETAILS.	FRONT O/S PORTION.	
5.	Gene	eral Information	A TOTAL STREET
Accident Date	23/01/2019	Inspection Date	24/01/2019
Survey held at	DING AUTO PTE LTD		
	BLK 10 #01-20 SIN MING IN	DEST SECICION SINGAPORE	575645
5a.		Remarks	
	ON WAS CONDUCTED ON A"		
5b.		ate Days of Repair	

4 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 827G

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER (CONSISTENT)	DEFORMED	599.68	599.68
-1	FRONT BUMPER RETAINER RH (CONSISTENT)	NECESSARY	42.32	42.32
1	HEADLAMP RH LOWER BRACKET (CONSISTENT)	NOT NECESSARY	68.32	3
-1	HEAD LAMP RH (CONSISTENT)	CRACKED	1,808.10	1,808.10
1	FRONT FENDER RH (CONSISTENT)	BENT	659.50	659.50
1	FRONT FENDER RH INNERSHIELD (CONSISTENT)	DEFORMED	185.12	185.12
1	FRONT RIM CAP RH (CONSISTENT)	CUT	250.00	250.00
1	SUPPORT PANEL (CONSISTENT)	DEFORMED	962.67	962.67
	LESS 20% DISCOUNT		-915.14	-901.48
	And the second s		3,660.57	3,605.91
	SPECIAL NETT ITEMS			
-1	FRONT BUMPER CLIPS (CONSISTENT) (SN)	NECESSARY	35.00	35.00
1	FRONT FENDER RH INNER SHIELD CLIP (CONSISTENT) (SN)	NECESSARY	35.00	35.00
-1	FRONT FENDER ADS STICKER (CONSISTENT)(SN)	NECESSARY	180.00	180.00
1	FRONT TYRE RH (CONSISTENT)(SN)	NOT NECESSARY	350.00	
			600.00	250.00
	LABOUR			
	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.		800.00	600.00
	R&R CONDENSOR AND RADIATOR AND REFILL AIRCON GAS.		150.00	120.00
	R&R TYRE AND RIM.		120.00	30.00
	FRONT WHEEL ALIGNMENT AND BALANCING.		120.00	80.00
	CHECK WIRING.		150.00	30.00
	RUSH PROOFING.		150.00	30.00
	SPRAY PAINTING ON FRONT BUMPER .		250.00	200.00
	SPRAY PAINTING ON FRONT FENDER.		250.00	200.00
	SPRAY PAINTING ON BONNET.	NOT NECESSARY	250.00	
			2,240.00	1,290.00
	GRAND TOTAL		6,500.57	5,145.91

Report Ref No. CC4/ASM19001605/T1hb3q2



Page No.:2 of 2

RECOMMENDED COST OF LUMP SUM REPAIRS	4,100.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CC4/ASM19001605/T1hb3q2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

Amort's

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

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

Service Request Details

CLAIMS

MESSAGES

SERVICE REQUESTS

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Claim	SPHOIBOC	Actions	Vehicle Information	
Reference	CC4/ASM19001605/T1h63q2	Next Step: Walt for Approve invoice	Incident Vehicle SHAL Registration #	94A827G
Lovi Date 2	23 January 2019	dulid frequency	Make TPVC	TIVD HYUNDAI
Report Date 2	24 Jan 2019 E56.25 AM		Model MO-1	M0-1.7 D
Request Date 2	24 January 2019		Service Address	
Dive Date				
Viridor Name	LICK AUTO CONSULTANTS PTE LTD (TF)		Primary Contact/Insured	pa
Type of Loss	Third Party Withide Damage		SIM MEOW LIAN IHENE 187 TENAN MERAH KECHIL AVENUE, 465721, Singapore	HIL AVENUE, 465721,
Services	Pending welfkation - Direct Settlement		JOANNECHONGIJANDA.COM.5G	COM SG
			Claim Handler	
			CHAN Kian Chuan 6568804269 kianchuan chanillaka comsig	35
Additional Interactions	NON-REPORTED	0.		
Messages invoices	History Documents	Assessment Metrics Notes		
Document Type	Document Suffype			
+ Ultrari Discoverin				
NAME	9441	3444:90%	AUTHOR	UNCADED
Liconvoice1 pdf	(invalie)	Surveppit/ Assessor expense	LKK AUTO CONSULTANTS PTE LTD	TD 10 May 2019

	MA	Sun TVY	MUTHOR	DATE
RENTAL RECEIPT put	Forms / Claim Documents	Others	LICK AUTO CONSULTANTS PTE LTD (TP)	30 May 2019
RENTAL MILEAGE pol	Forms / Claim Documents	Others	LIKK AUTO CONSULTANTS PTE LTD (TP)	10 May 2019
preprient bresindown pdf	Forms / Claim Documents	Others	LINK AUTO CONSULTANTS PTE (TD (TP)	10 May 2019
LiOtinspection (Tapel)	Forms / Claim Documents	Others	LIKK AUTD CONSULTANTS PTE LTD (TP)	30 May 2019
LXXXAquetmentla.pdf	Farms / Claim Documents	Others	LAK AUTD CONSULTANTS PTE LTD (TP)	10 May 2019
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DS FORMari	Forms / Claim Documents	Satisfaction / Discharge Voucher	LINK ALUTO CONGULTANTS PTE LTD (TP)	10 May 2019
AUTHORISATION TO ACT FORM pill	Frams / Claim Documents	PCA / Authority Letter	LIAK AUTD COMBUTANTS PTELTD (TP)	10 May 2019
WORKSHOP INVOICEDAR	imoke	Repairer	UKK AUTD CONGULTANTS PTE LTD (TP)	10 May 2019
Email from TP dd 130319 pdf	Letters and Correspondence	Workshop	LIXX AUTD CONSULTANTS PTE LTD (TP)	26 March 2019
MANIDATE IA.ptff	lleports & Statement	Others	LINK AUTD COMPUTANTS PTE LTD (TP)	12 March 2019
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Enial From TP LOD off 190319-pet	Farms / Claim Documents	Others	LINK AUTD CONSULTANTS PTE LTD [TP]	11 March 2019

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