



Auto
Consultants
Pte Ltd

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

11 APRIL 2019

CHOO SOON CHANG
33 KRETA AYER
#02-30
SINGAPORE 080333

Dear Sir/ Mdm

OUR REF : CC4/ASM19002495/Apb3
YOUR REF : SJG 5147Y
ACCIDENT INVOLVING SJG 5147Y AND SJV 4973G ALONG/AT SOUTH BRIDGE ROAD 02/02/2019

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 96 MOTORSPORTS PTE LTD acting on behalf of the owner of SJV 4973G against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your favour as it is head-to-rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

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 chewht@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)
- 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.

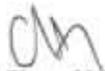
This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

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 6742 3197 or email us at chewht@lkkauto.com.

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

Yours sincerely



Chew Hsiab Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

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

96 MOTORSPORTS PTE LTD

Company Registration: 201711783Z

64 Kaki Bukit Avenue 6 Singapore (417894)

LETTER OF AUTHORISATION

Accident on 02/02/2019 along South Bridge Road
Involving vehicles SJV4973G, SJG5147Y

In consideration of 96 MotorSports Pte Ltd 64 Kaki Bukit Avenue 6 Singapore (417894), repairing my/our motor vehicle no SJV4973G at my request, I/We, MAAHES D/O CHANDIRAS ("the claimant") of Blk 602 #02-2649 Ang Mo Kio Ave 5 (S560602) (address) bearing NRIC No S7099112H the owner of motor vehicle no SJV4973G, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by 96 Motorsports Pte Ltd

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

~~In the event that my/our claim is unsuccessful, I/We undertake to pay to 96 Motorsports Pte Ltd the cost of repairs to my/our vehicle.~~

In the event that settlement cheque were to be drawn in my/our favour, I/We hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into 96 Motorsports Pte Ltd account. Upon clearance of the said cheque, I/We further authorize 96 Motorsports Pte Ltd and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to 96 Motorsports Pte Ltd shall amount to a good discharge of 96 Motorsports Pte Ltd and/or their appointed law firm's obligation to me in respect of the settlement monies.

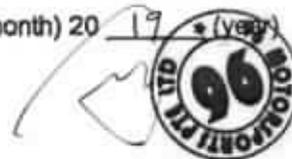
Dated this 02 day of 02 (month) 20 19 (year)



Signed by "the claimant"

Name: MAAHES D/O CHANDIRAS

NRIC No: S7099112H



96 MOTORSPORTS PTE LTD



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJG5147Y (Insd veh)	Model: SUZUKI SX4 SEDAN 1.6 AT
	SJV4973G (TP veh)	
Date of Accident/ Time:	02/02/2019 @ 2300HRS	

Repair Estimate	: \$	14,679.46	
Final Repair Cost	: \$	5,457.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	1,000.00	10 days at \$100 per day
LTA / GIA Search Fee	: \$	66.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	6,493.45	

Payee Name : 96 MOTORSPORTS PTE LTD

Is Third Party Workshop GIA Registered? [] YES 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: _____
	BOLA Liability: _____ (%)	Assessed Liability (*): _____ (%)	

* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

Remarks:

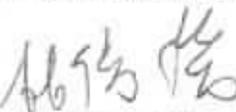
NOTE:

- 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.
- 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:

31/1/2020
 Jade Lwin
 LWP

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date:

Vincent Lee
 31/1/2020

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date:

31/1/2020



GOLDEN CAR RENTAL PTE LTD
No.1 Soon Lee Street Pioneer Center #01-02 Singapore 627605
Company & GST Registration No: 201503574R

TAX INVOICE

Bill To MAAHES D/O CHANDIRAS
Address BLK 602 #02-2649
ANG MO KIO AVE 5
SINGAPORE 560602

Invoice No : GCRP-0319-0054
Date : 31.03.19
Term : 30 Days
Page : 1

DESCRIPTION

	Rate	No of days	
Car Number Plate : SJH 1035H			
Model : MAZDA 2			
Chassis Number :			
Start Period : 03-02-19			
End Period : 13-02-19			
Rental Amount :	\$ 120.00	10	\$ 1,200.00

Sub Total :	\$ 1,200.00
GST :	\$ -
Grand Total :	\$ 1,200.00

SGD : _____

THIS IS A COMPUTER GENERATED DOCUMENT NO SIGNATURE IS REQUIRED



[> Back to OneMotoring](#)

Land Transport Authority

Land Transport Authority
 10 Sin Ming Drive
 Singapore 575701
 GST Registration No. : M4-0006529-2

Print Date/Time : 07 Feb 2019 / 13:23:52

Receipt Date/Time : 07 Feb 2019 / 13:23:52

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190207-001190

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 - SJG5147Y As at 02 Feb 2019/22:50:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SJG5147Y Enquiry Fee 20190207132317646408	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				
	xxxxxxxxxxxx1094		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.

Print Receipt

OK

Save as PDF

TAX INVOICE

Our Ref No: GR-19-020250
Date of Request: 08/02/2019

Your Ref No: WALK IN LIEW

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Your Vehicle No: SJV4973G
Date of Accident: 02/02/2019
Place of Accident: SOUTH BRIDGE RD
Involving Vehicle No: SJG5147Y (NO REPORT) VALID TILL 11-19/2

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

GIRO Cash Cheque



RECORDS MANAGEMENT CENTRE

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-19-021938
Date of Request: 12/02/2019

Your Ref No: WALK IN LIEW

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Date of Accident: 02/02/2019
Vehicle No: SJV4973G
Place of Accident: SOUTH BRIDGE ROAD
Involving Vehicle No: SJG5147Y

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SJG5147Y	SOUTH BRIDGE ROAD	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:
Date:
 GIRO Cash Cheque