

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

11 MAR 2019

TAN BEE LING BLK 527 BEDOK NORTH STREET 3 #04-504 SINGAPORE 460527

Dear Sir/ Mdm

OUR REF

: CC4/ASM19002868/Aeb3

YOUR REF

: SKH 8767X

ACCIDENT INVOLVING SKH 8767X AND SJD 6485E ALONG 61 CHAI CHEE STREET ON 14/02/2019

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 M/s PROGRESSIVE AUTOMOTIVE PTE LTD acting on behalf of the owner of SJD 6485E against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle hit Third Party Vehicle SJD 6485E. 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 7 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 ashersng@lkkauto.com within 7 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 ashersng@lkkauto.com.

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

Yours sincerely,

,

Asher Case Handler DID: 6841 6051 FAX: 6741 4108

Email: ashersng@lkkauto.com

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



SIGNATURE OF OWNER

Progressive Car Care Pte Ltd (Co. Reg. No. 201006949C) Blk 3022A Ubi Road 1 #01-45/ 46 S408716 T: +65 6741 5336 | F: +65 6741 7208 E: claims@procarcare.com.sg W: www. procarcare.com.sg

Date : 5 April 2019
Our Ref : TP 0219-5399.
+1 We Hamra out Hamid Nric No 56979585D.
Residing at 65 Jalang Senang Singgone 418524 owner of
Vehicle NoSJD(485E_hereby authorize PROGRESSIVE CAR CARE PTE LTD at
Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716 to resolve the above matter.
In respect of this authorization, I / We confirmed to accept whatsoever settled or agreed by them
and also agreed that all Payments include Loss of Use to make in favour of
PROGRESSIVE CAR CARE PTE LTD.
I / We am/are fully aware that all settlement made in respect of the accident occurred on
14019 Along/at Char Chee Street. will be full and
Final discharge of the claims inclusive of damages, loss of use etc.



Without Prejudice to any claim for personal injury

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKH8767			(Insd veh)			
	SJD64858			(TP veh)	Model: MAZDA 8-2.3 (A)		
Date of Accident/Time:	14/02/201						
Repair Estimate		:\$	5,71	5.34			
Final Repair Cost		:\$					
Loss of Use		:\$				days at \$ per day	
Rental (if any)		:\$				3 days at \$ 130 per day	
LTA / GIA Search Fee		:\$					
Others:		:\$					
		:\$					
Final Settlement Sum (Global S	Sum)	:\$	3,100.00				
Payee Name : PROGRESSIVE C.	AR CARE PTE	LTD					
Is Third Party Workshop GIA	Registered	? [[√] YES [] NO	(Kindly indicate below	v)	
A) For Non GIA	Registered '	Works	shop:	Agreed	Liability(%)	
B) For GIA Regis	stered Work	shop		BOLA A	pplicable: Yes/No BO	DLA Scenario No: NIL	
BOLA Liability	1:	(%)		Assesse	ed Liability (*):	(%)	
* Assessed Li	ability to be	filled	only for chain co	ollisions and f	or cases where BOLA d	oes not apply.	
Remarks:		PLOT -					

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) arisina from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

PROGRESSIVE CAR CARE PTE Blk 3022A Ubi Road 1 # 01-45 Singapore 408716 Signature of Workshop Pepresent Signature of Witness / Workshop stamp (if applicable) Nante Office Name of Witness: Date: Date:

LKK LWP Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative: Date:



Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6841 8055 (2 Lines) Fax: 6741

RENTAL AGREEMENT NO: 7387

HIRER'S PARTICULAR		GUARANTOR / ADD. DRIVER		
Name : Hamrapui Har	mid.	Name :		
71 0		Security of a contraction of the security of t		
. 43-0		Address : Maria and Maria		
5418524	_	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE		
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Tel (R) :	Children Control	Tel (R) :		
H/P 9833560	9.	H/P :		
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Licence Expiry : Class :	3.	Licence Expiry : Class :		
Driving Experience: Age :		Driving Experience: Age :		
Co.Name/ Address :		Co.Name/ Address :		
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Make : Tayota Can	nry	Vehicle No: SKB4085.		
RENTAL CHARGES	\	METHODS OF PAYMENT		
	Οψ-	- Committee Comm		
Hours @\$ per hour 3 Days @\$ \$\(\gamma\) per day	540	Cash		
3 Days @\$ \(\gamma()\) per day Weeks @\$ per week	310	No.		
Monthly @\$ per month	-	Bill Co:		
SUB-TOTAL		Credit Card No:		
Deposit		Exp. Date		
TOTAL CHARGE	540.	Type:		
	SURANCE	EXCESS CLAUSE		
Hirer is responsible for the first S\$ 3000 (I.e.EXPRESS RENTAL'S) vehicle and also fir party's vehicle for each and every accident / days	st S\$	excess for collision / damage / fire & theft for the first party excess for collision / damage / fire & theft to third		
CHECK OUT		CHECK IN		
Date Out 12319. Time Out 10>	0.	Date In 15 3 19 Time In 1730		
The state of the s	orton Siedten Gypt Hope i	ECLARATION .		

I have read the terms & conditions on overleaf of this rental agreement. I acknowledge receipt of vehicle in good condition plus accessories and if I opt to pay by credit/charge card, my signature here is to deemed to have been made on the application credit card charge slip. I am aware that Express Rental may have to take necessary steps by contact my employer in order to qualify me as a hirer.

Hire's Signature

EXPRESS RENTAL



OFFICIAL RECEIPT

Blk 3022A Ubi Road 1 #01-45 Singapore 408716 Tel: 6841 8055 (2 Lines) Fax: 6741 7208

5531 No:

Hamraout Hamid Received from And the sum of Dollars being payment of

Cash/Cheque No.

All receipts subject to the clearance of cheque.

Authorised Signature

GENERAL INSURANCE ASSOCIATION OF SINGAPORE



6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

RECORDS MANAGEMENT CENTRE

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-19-023729

Date of Request:

14/02/2019

Your Ref No:

Online Purchase

Progressive Car Care Pte Ltd Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716

Dear Sir/Madam,

Enquiry Date

14/02/2019

Enquiry By

Lily Lim

TP Vehicle No.

SKH8767X

Accident Date

14/02/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel, No.
SKH8767X	AXA Insurance Pte Ltd	08/03/2018-07/03/2019	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.

This is a computer generated document and requires no signature.



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-19-023729

Date of Request:

14/02/2019

Your Ref No:

Online Purchase

Progressive Car Care Pte Ltd Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716

Dear Sir/Madam,

Enquiry Date

14/02/2019

Enquiry By

Lily Lim

TP Vehicle No.

SKH8767X

Accident Date

14/02/2019

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