



Auto  
Consultants  
Pte Ltd

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

19 JUNE 2019

**DREAMS CAR WHEEL & ACC.**  
278 MACPHERSON ROAD  
SINGAPORE 348603

Dear Sir/Madam,

**OUR REF : CC4/ASM19003281/Ajb3**  
**YOUR REF : SFL 1109E**  
**ACCIDENT INVOLVING SFL 1109E AND SGH 461C ALONG UPPER SERANGOON**  
**RD INFRONT OF CALTEX ON 20/02/2019**

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 PREMIUM CARZ SERVICES PTE LTD, acting on behalf of the owner of SGH 461C against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had rear-ended the Third-Party vehicle SGH 461C. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected because 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](mailto: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)
- 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 6841 2928 or email us at [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com).

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

Yours sincerely,

Jimmy  
Case Handler  
DID: 6841 2928  
FAX: 6741 4108  
Email: [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com)

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



Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel : 6636 9100 Fax : 6636 9113

Date : 26/02/2020

Your Ref : SFL1109E

Our Ref : 0367/SGH461C/TP/PC/0219

**AXA INSURANCE SINGAPORE PTE LTD**

**8 Shenton Way**

**#27-01 AXA Tower**

**Singapore 068811**

**Attn : Motor Claims Dept.**

Dear Sir/Madam

**ACCIDENT INVOLVING SGH461C & SFL1109E ON 20/02/2019 ALONG UPPER  
SERANGOON ROAD (NEXT TO CALTEX STATION)**

We refer to the above accident.

The accident was caused solely by the negligence of your insured and as a result, we had incurred the following Costs and Losses: -

Costs of Repair (Lump Sum)	\$ 1,000.00
Rental Fee (5 days at \$120/day)	\$ 600.00
LTA TP Search Fee	\$ 7.45
<b>Claimed Amount</b>	<b><u>\$ 1,607.45</u></b>

Enclosed are the supporting documents for your perusal:

1. Invoice 0367
2. Rental Agreement/Receipt
3. LTA Tax Invoice/Receipt
4. Certificate of Insurance
5. Letter of Authority and Indemnity
6. Satisfaction Voucher

Please let us hear from you within the next 14 days.

Yours faithfully



**PREMIUM CARZ SERVICES PTE LTD**



Co. Reg. No.: 201416720C

1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883

Tel : 6636 9100 Fax : 6636 9113

INVOICE: 0367

Date : 26/02/2020

Bill To :

**AXA Insurance Singapore Pte Ltd**

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

**Our Customer**

Name : Chung Siew May Juliana

IC No. : S0005797E

Address : 35 Jalan Songket

Singapore 537406

Vehicle No : **SGH461C**

Date of Accident : 20/02/2019

Model : Toyota Altis

No.		Qty	Unit Price	Amount
1	To supply labour and materials to repair the above-mentioned vehicle to its pre-accident condition (Lump Sum)	1	-	\$1,000.00
TOTAL				\$1,000.00

For Premium Carz Services Pte Ltd



\* All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"



## DAWN ENTERPRISES

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

No. **19551**

Date, 25/2/19

### OFFICIAL RECEIPT

Received from

Chung Siew May Juliana  
Six hundred only

the sum of Dollars

being Payment Of

SKA A863 C (20/2/19 - 25/2/19)

DAWN ENTERPRISES

\$

600/-

Cash/Cheque No.





## DAWN ENTERPRISES

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

Premium Carz

SGH 461 ←

Nº 36470

### RENTAL AGREEMENT

DATE

20/2/19

#### HIRER'S PARTICULARS

Name Chang Siew May, Juliana  
Address 35 Jalan Songket  
8 537406

I/C or Passport No. 0005797E Country \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Driving Licence No. \_\_\_\_\_ Date Passed \_\_\_\_\_

Tel: (HP) 96685087 (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 licenced to carry 8 passengers only.
- 3 Hirer is liable to pay first \$ 2000 as excess 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 S\$5,000.00 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.

#### SCHEDULE

#### MODEL

SKH 4863C

7/11/19

Date	Time	Mileage
20/2/19	3.15 pm	
25/2/19	3.35 pm	

#### CHARGES

\$ Day at \$ <u>120.00</u> per days	\$ <u>600.00</u>
Day at \$ _____ per week	
Day at \$ _____ per month	
TOTAL AMOUNT	\$ <u>600.00</u>
AMOUNT PAID	\$ <u>600.00</u>
BALANCE DUE	
Days Extension From _____ To _____	
Amount Deposit (refundable) \$	

FROM

20/2/19

TO

25/2/19

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

*[Signature]*

*[Signature]*

&gt; Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 20 Feb 2019 / 15:55:40

Receipt Date/Time : 20 Feb 2019 / 15:55:40

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190220-002612

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 - SFL1109E				
As at 20 Feb 2019/09:05:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SFL1109E Enquiry Fee 20190220155448692443	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				
	20190220155503696	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.



Co. Reg. No : 201416720C  
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883  
Tel : 6636 9100 Fax : 6636 9113

## LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SGH461C AND SFL1109E  
AT/ALONG UPPER SERANGOON RD (NEXT TO CALTEX STATION)  
ON 20 DAY FEBRUARY MONTH 2019 YEAR

- I/We, the owner of vehicle no. SGH461C hereby instruct and authorize you to commence repair to the said vehicles.
- You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors.
- If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- I/we have read and understand the above statement and agreed.

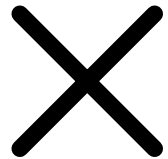
Dated this 20 day February month 2019 year

Signature : Juliana  
Name : CHUNG SIEW MAY JULIANA  
NRIC/ROC No. : S0005797E  
Address : 35 JLN SONGKET  
S537406

Company Stamp

/





Co. Reg. No.: 201416720C  
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883  
Tel: 6636 9100 Fax: 6636 9113

## SATISFACTION VOUCHER

Our ref.: 0367/SGH461C/TP/PC/0219

To : AXA Insurance Pte Ltd

ACCIDENT INVOLVING SGH461C AND SFL1109E ON 20 FEB 2019  
ALONG UPPER SERANGOON ROAD

I/We hereby acknowledge having received from Premium Carz Services Pte Ltd, 1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883, my/our vehicle number SGH461C 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.

Dated 25<sup>TH</sup> day of FEB 2019

Signature :

Owners' name: CHUNG SIEW MAY JULIANA

NRIC/Co. Reg.: S0005797E

Address : 35 JLN SONGKET

S537406



Co. Reg. No.: 201416720C  
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883  
Tel : 6636 9100 Fax : 6636 9113

INVOICE NO: PC10044

Date : 16/04/2020

Your Ref.: SFL1109E

Our Ref.: 0367/SGH461C/TP/PC/0219

Bill To :

**AXA Insurance Pte Ltd**

8 Shenton Way  
#24-01 AXA Tower  
Singapore 068811

Our Customer : Chung Siew May Juliana

NRIC No. : S0005797E

Address : 35 Jalan Songket  
Singapore 537406

Vehicle No : SGH461C

Date of Accident : 20/02/2019

Model : Toyota Altis

**Re: Third Party Claim Against SFL1109E**

No.	Item Descriptions	Amount
1	FINALIZED SETTLEMENT SUM	
	COR	\$ 1,000.00
	Rental Fee (5 days @ \$100/day)	\$ 500.00
	LTA Seach Fee	\$ 7.45
TOTAL AMOUNT DUE		\$ 1,507.45

(Singapore Dollars One Thousand Five Hundred Seven and Cents Forty Five only)

Yours faithfully



**Premium Carz Services Pte Ltd**

\* All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SFL 1109E (Insd veh)	Model: TOYOTA ALTIS
	SGH 461C (TP veh)	
Date of Accident/ Time:	20/02/2019	

Repair Estimate	: \$	4,977.88	
Final Repair Cost	: \$	1,000.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	500.00	5 days at \$ 100.00 per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	1,507.45	

Payee Name : PREMIUM CARZ SERVICES PTE LTD

Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability 100 (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <del>No</del> 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:

- 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.



LWP

Signature of workshop representative / Workshop stamp

Name of Representative:

Date: 16/04/2020



**PREMIUM CARZ SERVICES PTE LTD**

Co Reg No: 201416720C

1 Kaki Bukit Avenue 6 #01-90

Autobay@Kaki Bukit Singapore 417883

Tel: 6636 9100 Fax: 6636 9113

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date: 16/04/2020



Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: 17/04/2020



**Re:RE: <MANDATE IA> - S9M01ENL {ACCIDENT INVOLVING SFL 1109E (OI) & SGH 461C (TP) ON 20/02/2019}**

Type

🔗 Question

Message

Dear CCL, proceed. Thanks

Reply