AUTOWORX HOUSE

176 Sin Ming Drive, #02-01 Sin Ming Autocare Singapore 575721
Email: claims.autoworxhouse@gmail.com

•TEL: 6452 8211 •FAX: 6451 7420

<u>Direct Settlement</u> THIRD PARTY CLAIM

Your ref:

Our ref: SGM 4983 K

AXA INSURANCE PTE LTD

Attn: Officer In Charge (Motor Claim Department)

12/11/2019

Dear Sir,

RE: ACCIDENT INVOLVING SGM4983K & SLP4343H ON 26/03/2019.

We have been authorized by AUGUSTINE SIEW HUANG YEOW, the registered owner of vehicle number SGM4983K, which was involved in the above accident and at the material time to make a 3rd party claims against vehicle number SLP4343H.

The accident was clearly caused by your insured's negligence. We, therefore seeking compensation from you for our client financial losses as itemized below: -

Repair cost	S\$	7,200.00
Loss of Rental (8days x \$110.00) 1 Sunday involved + GST	S\$	941.60
Search Fee	S\$	2.00
Total	S\$	8,143.60

We have enclosed copies of relevant documents to support our claims.

Please settle this matter within 7 days.

Your prompt settlement of our claim would be much appreciated.

Do contact us at 64528211 for any clarification.

Thank you.

Yours faithfully,

Autoworx House

AUTOWORK HOUSE

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AUTOWORX HOUSE

C/O.176 SIN MING DRIVE #02-01 SINGAPORE 575721 TEL: 64528211 FAX: 64517420 Registration No. 5296929B

INVOICE

5377

AXA INSURANCE PTE LTD

12/11/2019

QUANTITY	PARTICULARS		AMOUNT (\$)
	RE: SGM 4983 K / NISSAN LATIO		
	Lump sum repair for the above mentioned vehicle.		7,200.00
	TOWOR THE TOWN OF	Total	7,200.00



Mr Augustine Siew Huang Yeow

77 Nim Road

Singapore 807586

#03-03

友 立 旅 遊 服 務 私 人 有 限公司 UNIQUE TOURIST SERVICE (PTE) LTD

1, Rochor Road, #02-574, Rochor Centre Singapore 180001 Tel: 6292 7656 Fax: (65) 6293 97 E-mail: uniqtour@singnet.com.sg STB LIC TA/00076

Co. Reg. No.: 197401067R GST Reg. No.: M2-0019671-6

TAX INVOICE

NO. WP2017611

20, Sin Ming Lane, #08-51, Midview City Singapore 573968 04.04.2019

Tel: 6292 7656

UTHORISED SIGNATURE

	Singapore,		20
DATE	PARTICULARS	@	\$
	Rental of one unit Toyota Corolla Altis 1.6 Auto Registration no. SJJ 1469 D self driven as from 26.03.2019 to 03.04.2019.		
	8 days at \$110.00 per day	\$_	880.00 880.00
	Add GST at 7% Amount Due	\$_ \$_	61.60 941.60
	(SIN DOLLARS: NINE HUNDRED FORTY ONE AND SIXTY CENTS (ONLY)	
	Standard Rated Supplies:\$ Total Amount of GST:\$	880.00 61.60	



WP2017611

20, Sin Ming Lane,

#08-51, Midview City

Singapore 573968 Tel: 6292 7656

04.04.2019

77 Nim Road

Singapore 807586

03-03

Rental of one unit Toyota Corolla Altis 1.6 Auto Registration no. SJJ 1469 D self driven as from 26.03.2019 to 03.04.2019.

8 days at \$110.00 per day

Add GST at 7% Amount Due

Mr Augustine Siew Huang Yeow

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61.60

941.60

(SIN DOLLARS: NINE HUNDRED FORTY ONE AND SIXTY CENTS ONLY)

Standard Rated Supplies:\$ Total Amount of GST:S

00.088 61.60



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-19-047208

Date of Request:

26/03/2019

Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare Singapore 575721

Dear Sir/Madam,

Enquiry Date

26/03/2019

Enquiry By

Yuki Ho

TP Vehicle No. Accident Date

SLP4343H 26/03/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLP4343H	AXA Insurance Pte Ltd	15/04/2018-14/04/2019	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.



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TAX INVOICE

Our Ref No:

GR-19-047208

Date of Request: 26/03/2019 Your Ref No:

Online Purchase

Supreme Auto Service Pte Ltd 176 Sin Ming Drive #02-01 Sin Ming Autocare

Singapore 575721

Dear Sir/Madam,

Enquiry Date

26/03/2019

Enquiry By

Yuki Ho

TP Vehicle No. Accident Date

SLP4343H 26/03/2019

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

Letter of Authorisation

RE: ACCIDENT NVOLVING SAM 4983 K & SLP 4343 H ALONG/AT AND NO KIO AVE D
ON 16/03/3019.
1. I/We, Augustine Siew Huang Yeow (NRIC No. C1332684C owner/driver of motor vehicle no. GAH 4983 K, & residing
respectively in consideration of your workshop AMONDEX HOUSE repairing my/our vehicle, I/we hereby authorise you to claim on my/our behalf for the costs of repair and loss of use. I/We further confirm and authorise you to use my/our name/s to engage the said service of a solicitor to proceed with negotiation with the defaulting party's insurance company for payment of the same and in the event negotiation fails, to instruct the solicitor to issue Summons on my/our behalf and in my/our name/s to claim for the same. Irrespective whether the claim is successful or not, all legal costs incurred shall be borne by you, provided we rendered our assistance as per second paragraph stated herein below.
2. I/We understand that by signing this Letter of Authorisation, I/we has/have to render whatevereasonable assistance to you including signing all relevant Court's document and attendance is Court to give evidence to enable the claim to succeed. If I/we failed or neglected to do so despit request from you, you shall be entitled to claim from me/us the repair costs together with legal costs, other incidental costs and expenses pertaining the issuance of Summons in order to obtain payment from defaulting 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/our claim, you are authorised to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our full authority to collect all compensation monies pertaining to the above-mentioned accident from insurance company or any other party, directly to your workshop M/s #UNDNOW HOUSE
In the event the claim is settled or judgment is obtained against the defaulting party, payment after deducing all costs and disbursements incurred should be drawn in your name or my/our name/s (at your discretion) and will be forwarded to you.
This letter of Authorisation is irrevocable.
Signature: -> James Jame
Tame: Augustine Siew Huang Yeow
TRIC NO: 51332684C
20 19

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

foresaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	26/03/2019 15:21
Date Of Accident	26/03/2019 13:40
Exact Location Of Accident	ANG MO KIO AVE 5
Country/State of Loss	SINGAPORE
CHARLE OF THE PARTY OF THE PART	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SGM4983K
Insured/Policyholder	
Name Of Registered Owner	AUGUSTINE SIEW HUANG YEOW
NRIC No	S1332684C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91701705
Alternative Phone No	OFFICE-91701705
Vehicle Particulars	
Manufacturer	NISSAN
Model	LATIO-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	DIE LTD
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
- 010	THIRD PARTY FIRE AND/OR THEFT

THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

Fleet Policy

D18MPC0001688 Policy Number

Cover Note Number

Driver

AUGUSTINE SIEW HUANG YEOW Name of Driver

S1332684C NRIC No 28/05/1958 Date Of Birth INDOOR Occupation 18/06/1976 Date Of Driving Pass

42 YEARS AND 9 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-91701705 Mobile Number

Fax Number

OFFICE-91701705 Contact Number

NOEMAIL FMail Address

77 NIM ROAD Address

#03-03

807586 Postcode

Was driver an employee of the Insured's Company NO

OWNER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - CHANGE/CROSS LANE Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? YES

SLP4343H (PRIVATE CAR) Foreign Vehicle Registration Number

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Passenger 1

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

: NICOLE WONG NAME:

: FEMALE GENDER:

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

NO

YES

YES

NO

NO

2

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SLP4343H Vehicle Registration Number

MERCEDES / BLACK Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category NG SOK HUANG Name of Driver 578082561 NRIC/Passport Number

Contact Number

93679704

Address

Postcode

Insurance Company Name

Page 2 of 21

Nature Of Damage No. Of Passenger (Including Driver)