#### **Cecilia Chong (LKK Auto)**

From: Cecilia Chong (LKK Auto)

Sent: Thursday, 4 July 2019 10:27 AM

'trine\_strandborg@hotmail.com'

Subject: >STANDARD NOTIFICATION LETTER> OUR REF: CC4/ASM19005536/gb3 \*\*\* ACCIDENT

INVOLVING SJV 5729P & GBF 3741U ON 26/03/2019 \*\*\*

04 JULY 2019

TRINE THERESE STRANDBORG

Dear Sir/ Mdm

OUR REF : CC4/ASM19005536/qb3

YOUR REF : SJV 5729P

ACCIDENT INVOLVING SJV 5729P AND GBF 3741U ALONG/AT PIE SLIP ROADTO PIONEER NORTH

**EXIT ON 26/03/2019** 

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 **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD** acting on behalf of the owner of GBF 3741U against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in our favour. 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 ceciliachong@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)
- Driver's Work Permit
- Employment Letter/ Authorisation letter from your company
- 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 6749 4274 or email us at ceciliachong@lkkauto.com.

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

"Please note that our proposal and correspondence with you is strictly on a without prejudice basis and should not be construed as an admission of liability on our part and/or that of our policyholder and/or the authorised driver. The terms of our without prejudice engagement should not be disclosed in any other related matter(s) in respect of this accident nor should it be binding in any other related claims."

Best Regards,

Cecilia Chong | Case Handler

#### LKK Auto Consultants Pte Ltd

Phone: 6749-4274 | email: CeciliaChong@lkkauto.com fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Save the Earth Print only when necessary



Vehicle No:

#### **AXA THIRD PARTY DIRECT SETTLEMENT**

SJV 5729P (Insd veh)

			GBF 3741U (TI	P veh)	Model: TOYOTA D'	YNA	
Date of Accident/ Time:			26/03/2019				
Repair Est	imate	;\$					
Final Repa	ir Cost	:\$					
Loss of Us	e	:\$				days at \$	per day
Rental (if a	any)	:\$			S. (S. (S. (S. (S. (S. (S. (S. (S. (S. (	days at \$	per day
LTA / GIA	Search Fee	:\$					
Others:		;\$					***
		:\$					
Final Settlement Sum		:\$		*	1400.00	(GLOBAL SUN	1)
Payee Nat	me: SNG AH 1	EE MOTOR 8	& PANEL SERVICE	PTE LTE	)	4	***************************************
Is Third Pa	arty Workshop GIA Reg	istered? [	X] YES [ ]	NO	(Kindly indicate below)		
A)	For Non GIA Regi	stered Worksl	hop:	Agreed	Liability(9	6)	
B) For GIA Registered		d Workshop:	orkshop:		oplicable: Yes/ <del>No</del> BOL	A Scenario No: 2	7
	BOLA Liability: 100 (%)			Assessed Liability (*):(%)			
	* Assessed Liabili	ty to be filled o	only for chain collisio	ons and fo	or cases where BOLA do	es not apply.	
Remarks:							

#### NOTE:

- 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 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.

FE MOZ

Signature of workshop representative workshop stamp

Date:

Signature of Witness / Workshop stamp (if applicable)
Name of Witness:

Date:

Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date:



# Re:<MANDATE IA> - S9M01IB0 {ACCIDENT INVOLVING SJV 5729P & GBF 3741U ON 26/03/2019}

Type

Question

Message

Hi, pls proceed as per mandate. TY.

Reply

#### 孫 亞 弟 汽 車 燒 焊 私 人 有 限 公 司

#### SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

Blk 3, Pioneer Road North, #01-18 Singapore 628457 Tel: 6268 6183 (4 Lines) Fax: 6268 1429

Email: sngahtee@singnet.com.sg

Website: www.sngahtee.com\_AX INVOICE NO. RCB. Reg. / GST Reg. No: 200810440N

I311609

DATE: AXA INSURANCE PTE LTD

ACCIDENT DATE : 26/03/2019

03/06/2020

8 Shenton Way #24-01

VEHICLE NO

: GBF3741U CHASSIS/ENG.NO: JTFAT35YX0K206885

AXA Tower (S) 068811

VEHICLE MODEL: TOYOTA DYNA

ATTENTION: CONTACT: -

SAM

CLAIM NO

FAX NO: 68804838

POLICY NO

: survey by LKK

REMARK

: 3741AXA TP AGST

SJY5729P

S/N. QTY UNIT DESCRIPTION

DISC % DISC/MARKUP TOTAL AMT PRICE

\*\* LIST PRICE \*\*

SUB-TOTAL:

0.00

\*\* WORK LABOUR \*\*

AS PER AGREED AUDATEX LUMP SUM

950.00

950.00

SUB-TOTAL

950.00

PAGE: 1 of 1

AFTER EXCESS S\$

950.00

SUB-TOTAL: S\$

950.00

ADD 7% GST. S\$

66.50

GRAND TOTAL: S\$

1,016.50

ON BEHALF OF SNG AH TEE MOTOR PANEL & SERVICE PTE L

YOUR RE	F	:		
ATTN: M	OTOR (	CLAIMS DE	EPT	
AXA	Ins	Surance	PIL	

RE:	THIRD PARTY CLAIM	FOR ACCID	ENT INV	OLVED	GB	F 3741	U	AND	SJV5729P	
	26/3/2020	ALONG	PIE	after	stip	road	from	DIN	Behar	

#### LETTER OF AUTHORITY

Dear Sir / Madam,

hereby authorize and appoint SNG AH TEE MOTOR & PANEL SERVICE PTE LTD of BLK 3

PIONEER ROAD NORTH #01-18 SPORE 628457 to claim on my behalf of the above mentioned matter against STV5729P.

I further authorize SNG AH TEE MOTOR & PANEL SERVICE PTE LTD to release my personal information to the third party such as the third party's insurance to direct the payer to make the cheque in favour of M/s SNG AH TEE MOTOR & PANEL SERVICE PTE LTD. In case of unsuccessful claim of the third party, Sng Ah Tee Motor & Panel Service Pte Ltd has the right to bill me the necessary cost and disbursements. I/We also acknowledge that the repair of my vehicle will be done in lumpsum as per what the insurer's surveyor has recommended. I hereby authorize my driver Muhamed to do necessary paperwork for the claim.

I further acknowledge that any settlement that the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Yours Faithfu

Signature of Owner



## 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-19-048295

Date of Request:

28/03/2019

Your Ref No:

Online Purchase

Sng Ah Tee Motor & Panel Service Pte Ltd Blk 3 Pioneer Road North #01-18 Singapore 628457

Dear Sir/Madam,

**Enquiry Date** 

28/03/2019

Enquiry By

Sharon Sng May Yuen

TP Vehicle No.

SJV5729P

Accident Date

26/03/2019

#### **Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJV5729P	AXA Insurance Pte Ltd	29/01/2019-28/01/2020	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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GST Registration No: M400017735

#### TAX INVOICE

Our Ref No:

GR-19-048295

Date of Request:

28/03/2019

Your Ref No:

Online Purchase

Sng Ah Tee Motor & Panel Service Pte Ltd Blk 3 Pioneer Road North #01-18

Singapore 628457

Dear Sir/Madam,

**Enquiry Date** 

28/03/2019

Enquiry By

Sharon Sng May Yuen

TP Vehicle No.

SJV5729P

Accident Date

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

### GBF 3741 U

Dr Nah & Lee Family Clinic
780 Woodlands Crescent #01-03 Singapore 730780

Tel: 6250 1528 Fax: 6250 1779

Gst Reg No. 201500144K

#### TAX INVOICE

MUHAMAD SHAHDINAR BIN SELAMAT Invoice No: PI/74547 Date: 26/03/2019 Attended By: DR NAH KWANG MENG Items: Amount CONSULTATION CONSULTATION (NORMAL HOURS) \$18.00 **MEDICATION** KEFENTECH PLASTER 8'S \$9.00 ANAREX TAB tabs \$8.00 REFERRAL \$8.00 **ADJUSTMENT** ADJUSTMENT FOR GST -\$0.01

# DUPLICATE

Paid By: \$46.00 Cash Sub Total: \$42.99 Dr Nah & Lee Family Clinic 780 Woodlands Crescent #01-03 \$3.01 7% GST: Grand Total: \$46.00 Singapore 730780 \$46.00 Amount paid: Tel: 6250 1528 Fax: 6250 1779 Amount outstanding: \$0.00

Dr Nah & Lee Family Clinic

PEACE FAMILY CLINIC (WL832) PTE LTD Block 832, Woodlands Street 83, #01-71 SINGAPORE 730832 Tel: 63634357

#### TAX INVOICE

MOHAMAD AMIN BIN ABDUL RAZAK

(S8434180J)

852 WOODLANDS STREET 83

05 - 250 SINGAPORE 730852

Invoice No. : GPC-015102

Invoice Date : 26 Mar 2019

ACRA No. : 200709973D

Doctor : Charity Low Cheng

Hong

ITEM NAME		QTY	ADJ	TOTAL
DEXAMETHASONE TABLET 0.5M	G	10.00 tab/s	\$0.00	\$1.50
FENAGESIC(MEFENAMIC ACID)50	00MG	15.00 tab/s	\$0.00	\$3.00
THERMALGESIC CREAM 50GM		1.00 tube	\$0.00	\$12.00
Consultation General Service			\$0.00	\$30.00
	Finai Bill			\$46.50
	Cash Rounding	***		\$0.00
<u>P</u>	ayment received by Cash - RE/015497			\$46.50
	Outstanding Balance			\$0.00