



DING AUTOMOTIVE PTE LTD
 Blk 10 #01-20 Sin Ming
 Industrial Est Sec C
 Singapore 575645

Without Prejudice
 to our driver's Injury claim

OUR REF: 50111535/TP/ SHB3561Y/AD/31/03/2019/DD HASHIM
 YOUR REF: YP1978S/--
 18 June 2019

To: MOTOR CLAIMS DEPARTMENT
 AXA INSURANCE
 8 SHENTON WAY, #24-01
 AXA TOWER, 068811 SINGAPORE

ACCIDENT INVOLVING : SHB3561Y AGAINST YP1978S ON 31/03/2019
 LOCATION ALONG : BLK 1045 EUNOS AVE 4
 We refer to the above matter:

	Rate per day	Repair/ Claim days	AMOUNT BEFORE GST	GST 7%	AMOUNT AFTER GST
Cost of Repair	\$ -	1	\$ 959.04	\$ 67.13	\$ 1,026.17
Loss Of Rental	\$ 105.30	1	\$ 105.30	\$ -	\$ 105.30
Loss Of Income	\$ 80.00	1	\$ 80.00	\$ -	\$ 80.00
LTA/GIA Search Fee	\$ -	0	\$ 1.87	\$ 0.13	\$ 2.00
Towing Fee	\$ -	0	\$ -	\$ -	\$ -
Surveyor Fee	\$ -	0	\$ -	\$ -	\$ -
Total	\$ 185.30	1	\$ 1,146.21	\$ 67.26	\$ 1,213.47

The accident was caused solely by the negligence of your insured and as a results ,We had incurred the following costs of repair and losses of our insurer:

Enclosed are copies of the following documents for your perusal:

☺	Repair Estimate	☺	Discharge Voucher
☺	GIA Report/Accident Police Report	☺	Certificate Of Insurance
☺	LTA 3 rd Party Search Fee	☺	Final Bill/Repair Tax Invoice
☺	Mileage Record	☺	Confirmation Finalize/Liability Email Copy
☺	Rental Invoice	☺	Letter Of Demand
☺	Letter Of Authority	☺	

Our insurer has authorized DING AUTOMOTIVE PTE LTD to deal with the claim in this accident case and also to receive and deal/negotiate with all payment as stated above.
 Please look into our client's claim and revert soonest as possible.

Your Sincerely,
 DD HASHIM
 DING AUTOMOTIVE PTE LTD
 HP:81160811
 FAX:64520614

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

02/04/2019 15:44

JOB-NO: 50111535

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE
SINGAPORE 575717 0

64739522

VEHICLE DETAILS

LICENSE NO: SHB3561Y

TRANS: AUTO

CHASSIS: KMHLB41UMGU074918

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4FDFU527899

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
LABOUR							
1 TO STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	500.00	0.00	500.00		Y	
2 RESPRAY FRONT BUMPER	1.00	250.00	0.00	250.00		Y	
3 TO STRAIGHTEN AND PANEL BEAT ON ACCIDENT AFFECTED AREAS	1.00	250.00	0.00	250.00		Y	
TOTAL:		1,000.00	0.00	1,000.00			
MATERIALS							
1 FRONT BUMPER	1.00	699.58	139.92	559.66	L	Y	
2 FRONT GRILLE	1.00	389.20	77.84	311.36	L	Y	
3 FRONT GRILLE LOGO	1.00	97.10	19.42	77.68	L	Y	
4 FRONT BUMPER SPONGE	1.00	89.80	17.96	71.84	L	Y	
5 FRONT BUMPER RETAINER LH	1.00	42.98	8.60	34.38	L	Y	
6 FRONT BUMPER RETAINER RH	1.00	42.98	8.60	34.38	L	Y	
7 FRONT NUMBER PLATE WITH CASING	1.00	45.00	0.00	45.00	S	Y	
8 FRONT GRILLE CLIPS SET	1.00	35.00	0.00	35.00	S	Y	
9 FRONT BUMPER ADS STICKER	1.00	180.00	0.00	180.00	S	Y	
10 FRONT BUMPER CLIPS SET	1.00	35.00	0.00	35.00	S	Y	
TOTAL:		1,656.64	272.34	1,384.30			
TOTAL PARTS & LABOUR:		2,656.64	272.34	2,384.30			

EXCESS/LOADING: S\$ 0.00

No. Of Day:

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM S\$

DATE OF SURVEY:

SURVEYED BY:

CONTACT NO:

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

Ding Auto User 1

ESTIMATOR

STA AUTOCENTRE

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

**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-19-050433
Date of Request: 01/04/2019

Your Ref No: Online Purchase

Ding Auto Pte Ltd
Blk 10, #01-20
Sin Ming Industrial Estate Sector C
Singapore 575645

Dear Sir/Madam,

Enquiry Date 01/04/2019
Enquiry By You Jing Feng
P Vehicle No. YP1978S
Accident Date 31/03/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YP1978S	AXA Insurance Pte Ltd	04/04/2018-03/04/2019	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.

Satisfaction Voucher



Date: 03/04/2019

MS First Capital Insurance Limited

3 APR '19 10:04

Attention: MOTOR CLAIMS DEPT

Dear Sir/Madam

WONG CHIN SIN

I/We hereby acknowledge having received from Singapore Technologies Kinetics

Ltd., 249 Jalan Boon Lay, Singapore 619523, my/our vehicle number SHB3561Y

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 upon the corporation under the policy number D-18088937MFSH

reference claim number 50111535 in respect of the damage caused to the

said vehicle in an accident that occurred thereto or about the 01/04/2019

at AT BLK 1045 EUNOS AVE 4

Dated this day of _____, 201 _____

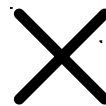
Signature: [Signature]

NRIC No: 50775266 I

Name: CityCab PTE LTD (Fleet)

Address: 383 SIN MING DRIVE
SINGAPORE 575717 0

Company Stamp if applicable



Date Issued : 12/10/2017

CERTIFICATE REF : MZ400A

CERTIFICATE OF INSURANCE (MASTER)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE NO. : D-18088937MFSH

Index Mark and Registration Number of Vehicle : All CityCab taxis operating in the Republic of Singapore.

Name of Insured : CityCab Pte Ltd

Coverage : Third Party Fire and Theft

Effective date of the Commencement of Insurance for the purpose of the Act : 01/01/2018

Date of Expiry of Insurance : 31/12/2020

Persons or Classes of Persons entitled to drive

- a) Any licensed taxi driver driving on the Insured's order or with their permission.
- b) Any person provided he is in the Insured's employ and is driving on their order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitations as to use :

- Use as a taxi.
- Use for social, domestic and pleasure purposes.

The Policy does not cover

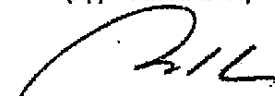
- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

Excess : All Claims \$2,000.00 each and every accident

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

First Capital Insurance Limited
(Approved Insurers)



Authorised Signature

A/C NO. : B0101

DING AUTOMOTIVE PTE LTD
BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645
Tel : 6452 1208 Fax : 6452 0614

FINAL BILL

M/S: AXA INSURANCE

ACCIDENT DATE: 31/03/2019

REF:--

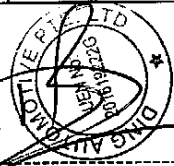
OIC:--

OUR REF : SHB3561Y

DATE : 18/6/2019

ITEM NO.	DESCRIPTION	UNIT PRICE	AMOUNT
1	Repair Cost	\$ 959.04	\$ 959.04
2	LTA/Merimen Search Fee	\$ 1.87	\$ 1.87
3	Loss of Rental (w/o GST) [105.30X01]	\$ 105.30	\$ 105.30
4	Loss of Income (w/o GST) [80X01]	\$ 80.00	\$ 80.00
5	Towing Fee	\$ -	\$ -
6	Surveyor Fee	\$ -	\$ -
REMARKS :		SUB TOTAL :	\$ 1,146.21
		7% GST	\$ 67.26
		GRAND TOTAL :	\$ 1,213.47

Yours faithfully,



Authorise Signature of Ding Automotive Pte Lte

« Re:<MANDATE IA> - S9M01IR3 {ACCIDENT INVOLVING
YP 1978S (OI) & SHB 3561Y (TP) ON 31/03/2019}

Type

🔗 Question

Message

pls proceed

Reply

DING AUTOMOTIVE PTE LTD

Business Reg. No : 201619222G

BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645

Tel: 6452 1208 Fax: 6452 0614

TAX INVOICE**AXA INSURANCE PTE LTD**8 SHENTON WAY #27-01, AXA TOWER
SINGAPORE 068811

ATTN : MOTOR CLAIMS DEPT

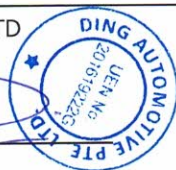
TEL : FAX :

INVOICE : I-001008**DATE** : 05/05/2020**GST REG NO** : 201619222G**TERMS** : C.O.D.**PO NO** : YP1978S**OUR REF** : SHB3561Y**PAGE** : 1 of 1

ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1.	Cost of repair-SHB3561Y	1	959.04	959.04
2.	Gia search fee	1	1.87	1.87
3.	Loss of rental (w/o gst)	1	105.30	105.30
4.	Loss of income (w/o gst)	1	50.00	50.00
REMARKS : Job card:50111535 Your ref:YP1978S Oic:Ms Cecilia LkK Doa:31/03/2019		SUB TOTAL	:	1,116.21
		GST	:	67.26
		TOTAL SGD	:	1,183.47
		DEPOSIT	:	
		O/S BALANCE	:	

FOR DING AUTOMOTIVE PTE LTD

Authorised Signature



Customer Signature

I have inspected and hereby confirmed that
the job done and the amount due herein
are entire to my satisfaction



Without Prejudice
to our driver's Injury claim

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	YP 1978S (Insd veh)	Model: HYUNDAI I40
	SHB 3561Y (TP veh)	
Date of Accident/ Time:	31/03/2019	

Repair Estimate	: \$	2,551.21	
Final Repair Cost	: \$	1,026.17	(W/GST)
Loss of Use / INCOME	: \$	50.00	1 days at \$50.00 per day
Rental (if any)	: \$	105.30	1 days at \$105.30 per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	1,183.47	

Payee Name : DING AUTOMOTIVE 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/ No	BOLA Scenario No: 22
	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: Kelly Png
Date: 6/5/20



Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Dd Hashim
Date: 6/5/2020



Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: 08/05/2020



Cecilia Chong (LKK Auto)

From: Cecilia Chong (LKK Auto)
Sent: Thursday, 5 December 2019 5:48 PM
To: raju_sukgroups@yahoo.com
Subject: <STANDARD LETTER> OUR REF: CC4/ASM19005800/R1gb3) *** ACCIDENT INVOLVING YP 1978S & SHB 3561Y ON 31/03/2019 ***

05 DECEMBER 2019

SUK STEEL PTE LTD

Dear Sir/ Mdm

OUR REF : CC4/ASM19005800/R1gb3
YOUR REF : YP 1978S
ACCIDENT INVOLVING YP 1978S & SHB 3561Y ALONG/AT EUNOS AVE 4 ON 31/03/2019

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 **DING AUTOMOTIVE PTE LTD** acting on behalf of the owner of **SHB 3561Y** 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 from your company
- Authorisation letter
- Rental Agreement/ Leasing Agreement
- Coloured photographs of accident scene (if any)
- COUNTER CLAIM STATUS AGAINST THIRD PARTY
- 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](tel:67494274) or email us at ceciliachong@lkkauto.com.

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

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

"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.

LETTER OF AUTHORITY

Accident involving SAB 35614 & YP19785 on 31/03/2014 along
A1 BLK 1045 EUNOS AVE 4.

I/We, City Cab Pte Ltd NRIC/ Co.Reg Number 199502839G registered owner
of vehicle No. SAB 35614 which was rented to Hirer/Driver
Mr/Ms Jan Siew Yong NRIC S1696139P, hereby
authorize Ding Automotive Pte Ltd on this date 1/4/2014 to submit,
correspond, negotiate and settle my/our claim for cost of repair and
uninsured losses arising from the above accident and without prejudice of our
driver's injury claim.

I/We further authorize that agreed settlement sum for cost of repair, loss of
income and rental, survey report fee or any legal fee, third party vehicle
insurance particulars enquiry fee etc., be made in favour of Ding Automotive
Pte Ltd and that the said payment be forwarded to them as full and final
discharge of my/our claims.

Owner Signature/Co.Chop



[Handwritten signature]

Hirer/Driver Signature

Jan Siew Yong