

INS CASE OWNER

Yale

CCY AXA1900

6485, K 663/9

LJK
IDAC

Surveyor:

Kenneth

DOI:

ASSIGNMENT

114/1A

Date/Time:

11/4/14

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SME 3996B

Name of Insured:

um shou wei

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

1/4/14

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

S9m02jw8 / 110008

Policy No.:

Make / Model:

Place of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

Final ? Yes / No

Smb 9609u

INSRS:
WSP:
Tel:
Liability:
RMKS:WAF
Ward damINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/Time

Smb 9609u - 4

SME 3996B - 4

STAGE

DATE / PIC

Non-Reporting hr (1st):

Non-Reporting hr (2nd):

Non-Reporting hr (Final):

Notification hr (if non-pickup):

Call OI:

After call hr to OI:

Documentation Check List: Handler Typist

Notification hr (if non-pickup):

After call hr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD:

Payment Breakdown Form:

Post-Repair Photos:

Others:

08/05

OI GIA Report hr.

Spoke to OI, mentioned accident details (UII called to report vehicle OI want to know claim amount as the owner private settlement.

OI want private settlement as pending timeline for LOD. Lodged to check LOR.

29/10

Call back # and 5pm. OI driving. Follow up on the P.S. of survey fee to be paid by OI. Offer TP \$629.50 (pending acceptance).

21/10

File pass sub send DV.

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PIP

\$5 250.00

(1 days) Reduction:

\$750.00 = 74

FINAL SETTLEMENT

Date/Time:

21/10/14 2:00pm

Confirm with:

Kenneth

Email:

Call:

Final Liability:

100

(\$5 262.50)

(Agreed / Assessed)

BOLA S/N No.:

22

If NO or B 28, Ass. Fee:

Repair Cost:

W/LGAT

\$5 262.50

Loss of Rental (LOR):

\$5 360.00

(3 days) x \$120

Loss of Use (LOU):

\$5 -

(5 x days)

Loss of Income (LOI):

\$5 -

(5 x days)

LOR only ☒ LOU only ☐LOR + LOU ☐LOR + LO ☐

(Tick only one)

GIA/LTA Search

\$5 2.00

Medical

\$5 -

Disbursement

\$5 -

(e.g. Tow/Independent)

Legal Cost

\$5 -

Total:

\$5

629.50

Global Sum \$5:

FINAL PAYMENT

Date/Time:

Confirm with:

Email:

Call:

Payee 1:

\$5

629.50

Name 1:

Comfort Delgro Engineering Pte Ltd

Payee 2: (Strike if N.A.)

\$5

Name 2:

Payee 3: (Strike if N.A.)

\$5

Name 3:

[✓ Gm]

ASS. REC. BY:

REF:

HWA/

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

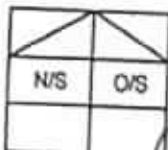
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD / Rlm or

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Rear

R/Bal.

L/Bal.

D.O.I.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

File pass to

P/P = \$500/- (Red = \$700/747)

* 1 repair days + 2 PRS = 3 days.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐

: Prell. Report

☐

: Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

\$ - RS. \$

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format :

Lump Sum / I.B.I. (\$

COMFORTDELGRO ENGINEERING PTE LTD
205 BRADDELL ROAD
SINGAPORE 579701

TEL: 63837466/7730/7656/7362 FAX: 62815767



ATTENTION : _____ ADDRESS : _____
 TEL : _____
 FAX : _____
 VEHICLE NO : **SMG9609U** CHASSIS NO. : _____
 MAKE / MODEL : _____ ENGINE NO : _____
 DAYS OF REPAIR : _____ YEAR OF MANUF : _____
 PREPARED BY / DATE : _____ SALES ORDER : _____

CASH DAMAGED REPAIR QUOTATION

S/N	DESCRIPTION OF REPAIR SCOPE	PROPOSED (S\$)
	REAR REVERSE SENSOR	\$ 320.00
	LABOR TO INSTALL REVERSE SENSOR	\$ 50.00
	TO CHECK WIRING FUNCTIONS	\$ 50.00
	LABOR TO PANEL BEAT AND REPAIR REAR BUMPER	\$ 280.00
	TO PUTTY AND SPRAY PAINT REAR BUMPER	\$ 250.00
<p><i>Not Authorized</i> <i>Repair After Paint</i> <i>1 day</i></p>		
<div style="border: 1px solid black; padding: 5px;"> <p>LKK Auto Care Centre hereby Dis Repairs of the following:</p> <ul style="list-style-type: none"> • To include: (after spray painting) • To include: (after wiring & wiring) • Parts prices include: (with 1 month warranty) • Total price include: (with 1 month warranty) • To include: (with 1 month warranty) • To include: (with 1 month warranty) <p>Additional cost by: _____</p> <p>Signature: _____</p> <p>Date: _____</p> </div>		
		TOTAL \$950.00
		GST 7% \$66.50
		TOTAL WITH GST% \$1,016.50

Note: Quotation for Cash Repairs/not for Insurance Claims (Valid for 1 month only)

Please sign below if you agree with our quotation and fax to us @ 62815767

Signature : _____
 Name : _____

Company Stamp : _____
 Date : _____

Service Request Details

Claim

59M01JWJ

Reference

None 

Loss Date

1 April 2019

Report Date

11 Apr 2019 12:36:57 PM

Request Date

11 April 2019

Due Date

11 April 2020

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Service

Pending verification - Direct Settlement

Actions

Next Step

Finish the work

Complete Work

Cancel

Vehicle Information

Incident Vehicle Registration #

SMG9609U

Make

TPVD TOYOTA

Model

PREVIA AERAS 2.4

Primary Contact/Insured

LIM SHEOW LEI

6A TANJONG RHU ROAD, 14-01, 436884, Singapore

sheowlei@yahoo.co.uk

Claim Handler

OH Vale

6568804897

vale.oh@axa.com.sg

Additional Instructions:

NON REPORTED

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)[Print to PDF \(2018\)](#)



Auto
Consultants
Pte Ltd

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

16 April, 2019

LIM SHEOW LEI
6A TANJONG RHU ROAD 14-01,
Singapore 436884

Dear Sir,

OUR REF : CC4/ASM19006485/K1b3
YOUR REF : SME 3996B
ACCIDENT INVOLVING SME 3996B & SMG 9609U on 01/04/2019 ALONG/AT
GLENEAGLES HOSPITAL OPEN CARPARK

We write to inform you that we are the appointed loss adjuster by your motor insurer, AXA insurance Pte Ltd to deal with the third party claim against your motor policy.

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We highlight that this accident has not been reported to your insurer. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you. We would appreciate it if you could urgently file a report at our approved reporting centre.

The report has to be lodged at any of AXA Premium Workshops or reporting centres (subject to your policy). For the list of AXA Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit <https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting>.

Your full co-operation is required. Kindly submit the following when lodging the report which list 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)

- 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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to pohkin@lkkauto.com or deliver it by hand to 51 Ubi Avenue 1, #01-25 Paya Ubi Ind. Park S(408933).

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition, your insurer shall have full discretion in the process and settlement of the said third party claim subject to the merits of the case and according to the rights afforded under the policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, your insurer reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact us at 6841 2132 if you have any further enquiries.

Yours sincerely,
Poh Kin
Claim Department

This is a computer generated letter and no signature is required.

CC : AXA INSURANCE PTE LTD
Motor Claim Department



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 31/08/2019

Survey Details:

Date of loss	1-Apr-19
Date of appointment	11-Apr-19
Date of survey	11-Apr-19
Location of survey	COMFORTDELGRO ENGINEERING PTE LTD

Vehicle Details:

Claim Type:	Third party
Vehicle number	SMG 9609U
Make and Model	TOYOTA PREVIA AERAS 2.4 CVT MR
Date of registration	7/1/2019
Excess	
Market Value	\$180,000
Parf Rebate	\$61,776
Nett Loss	\$118,224

Repair details:

Initial Estimate	\$ 950.00
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Proposed/Revised repair cost:

Parts	\$ -
Check items (estimate)	\$ -
Labour	\$ 250.00
Total	\$ 250.00
Lump Sum(if applicable)	\$ -

Number of days for repair	1
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Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

01 RECOMMENDED REPAIR DAY + 2PRS = 3 DAYS

Mandate:

Liability(TP)	100%	
Proposed repair cost	\$ 267.50	W/GST
Loss of use	\$ -	
Loss of rental	\$ 540.00	3days x \$180
Loss of income	\$ -	
LTA search fees	\$ 2.00	
Others	\$ -	
Proposed Total	\$ 809.50	



<MANDATE IA> -S9M01JWJ {ACCIDENT INVOLVING SME 3996B (OI) & SMG 9609U (TP) ON 01/04/2019}

Type

🔗 Question

Message

LIABILITY: 100% BOLA S22: INFORMED OI ABOUT TP CLAIM AND NCD ISSUE. AGREED TO SETTLE AT BEST. WE SEEK YOUR MANDATE AT \$809.50 (CLAIMING LOR). MANDATE IA HAS BEEN UPLOADED, KINDLY LET US HAVE YOUR APPROVAL/INSTRUCTION. THANKS - CECILIA

Reply



ComfortDelGro Engineering

Our Ref: PTE/SMG9609U/20190401/OD_COR_CASH-CL

02/05/2019

AXA Insurance Singapore Pte Ltd
C/o LKK Auto Consultants Pte Ltd
51 Ubi Avenue 1, #02-25
Singapore 408933
Attn: Motor Claims Department

Without Prejudice

Dear Sirs

**ACCIDENT ON 01/04/2019 INVOLVING SMG9609U & SME3996B ALONG
GLENEAGLES HOSPITAL OPEN CARPARK**

We are the authorised repair workshop for the owner of vehicle, SMG9609U, which was involved in the captioned accident with your insured's vehicle. The vehicle owner has requested and authorized us to assist him/her in presenting his claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured, SME3996B, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Cost of Repairs	267.50
2. Car Rental	-
3. 3.0 days Loss of Rental Income @ \$188	564.00
4. Surveyor Fee	-
5. LTA Fee	-
6. TP/GIA Fee	2.00
7. Medical	-
8. Others	-
	<hr/>
(E&OE)	833.50

We enclose the following documents to support the claims: -

- | | |
|--|--|
| <input checked="" type="checkbox"/> Repair/Excess Bill | <input type="checkbox"/> Insurance Certificate |
| <input type="checkbox"/> Surveyor Report | <input type="checkbox"/> Power of Attorney |
| <input type="checkbox"/> Coloured Photographs | <input type="checkbox"/> Car Rental Agreement |
| <input checked="" type="checkbox"/> GIA/Police Report(s) | <input type="checkbox"/> Vehicle Replacement Voucher |
| <input checked="" type="checkbox"/> GIA/TP Search | <input type="checkbox"/> Witness Statement |
| <input type="checkbox"/> Others: _____ | |

Kindly look into the matter and let us hear from you on the settlement of our client's claim as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/driver/claimant.

Yours faithfully
Cecilia Lee
CDGE Claims Department
DID: 6214 8354 FAX: 6214 1843 Email: cecilialee@sparkcarcare.com

ComfortDelGro Engineering Pte Ltd

Corporate Office
205 Braddell Road Singapore 579701
Mainline +65 6383 8280
Facsimile +65 6280 8755

Company Registration No: 190508640R

Car Care Centres

Braddell
205 Braddell Road
Singapore 579701
Tel 6383 8110

Loyang
59 Loyang Drive
Singapore 508889
Tel 6214 8300

Pandan
45 Pandan Road
Singapore 609286
Tel 6338 8778

Senoko
24 Senoko Loop
Singapore 758156
Tel 6757 8760

Sin Ming
383 Sin Ming Drive
Singapore 575717
Tel 6553 0400

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791
Tel 6369 7369

Ubi
320 Ubi Road 3
Singapore 408649
Tel 6848 5721

www.SPARKcarcare.com

A member of
COMFORTDELGRO



ComfortDelGro Engineering Pte Ltd

Corporate Office
205 Braddell Road
Singapore 579701
Mainline : + 65 6383 6280
Facsimile : + 65 6283 9755
www.cdge.com.sg

Car Care Centres
205 Braddell Road Singapore 579701
59 Layang Drive Singapore 508989
45 Pandan Road Singapore 609286
383 Sin Ming Drive Singapore 571717
7 Sungei Kadut Way Singapore 728791
520 Ubi Road 3 Singapore 408640
www.SPARKcarcare.com

Tel: 6581 8110
Tel: 6214 8300
Tel: 6538 8728
Tel: 6553 0400
Tel: 6369 7369
Tel: 6848 5721



ComfortDelGro Engineering
COMPANY REG. NO: 199506048W
GST REG. NO. M2-0921817

TAX INVOICE

7010088

COMFORTDELGRO RENT-A-CAR PTE LTD
ATTN: MOHMD. SAFFRI & POO CHAI LI

205 BRADDELL ROAD
SINGAPORE SG 579701

CONTACT NO: 68820810

VEHICLE NO
SMG9609U

MAKE
TOYOTA

MODEL
PREVIA AERAS

DATE OF REG

CHASSIS CODE
JTBGD56M607166424

INVOICE NO./DATE
91440304 25.04.2019

JOB NO.
305286394

ODOMETER READING

Description : GR-CASH REPAIR W/REC (AXA)

S/No	Part No. Description	Qty	Unit Price	Net
01	20-501 TO PUTTY AND SPRAY PAINT REAR BUMPER	1 EAC	250.00 SGD	250.00
Items total				250.00
Add GST @				17.50
Invoice amount				267.50

Issued by : SIEWHWA 25.04.2019 16:29:49
Repair type : CES0/52/5C
Payment Type/Term: /Credit 30 days

- WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY (NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR PERIOD OF DEFAULT.
- PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCY WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE CORRECT AND BINDING.

Cheque should be crossed and made payable to "ComfortDelGro Engineering Pte Ltd"

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Blk C Ext 1 Level 2
Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N
7010088	91440304	267.50	



Re:<MANDATE IA> -S9M01JWJ {ACCIDENT INVOLVING SME 3996B (OI) & SMG 9609U (TP) ON 01/04/2019}

Type

🔗 Question

Message

Hi Pls proceed as per IA-VO

Reply

Cecilia Chong (LKK Auto)

From: Cecilia Chong (LKK Auto)
Sent: Monday, 2 September 2019 2:48 PM
To: sheowlei@yahoo.co.uk
Subject: OUR REF: CC4/ASM19006485/Kgb3 *** ACCIDENT INVOLVING SME 3996B & SMG 9609U ON 01/04/2019 *** (NO ACTION REQUIRED)

02 SEPTEMBER 2019

LIM SHEOW LEI

Dear Sir/ Mdm

OUR REF : CC4/ASM19006485/Kgb3
YOUR REF : SME 3996B
ACCIDENT INVOLVING SME 3996B AND SMG 9609U ALONG/AT GLENEAGLES HOSPITAL OPEN CARPARK ON 01/04/2019

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 **COMFORTDELGRO ENGINEERING PTE LTD** acting on behalf of the owner of SMG 9609U 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.

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)

COMFORTDELGRO ENGINEERING PTE LTD

A member of COMFORTDELGRO

POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) 8MG 9609U and (Third Party's Vehicle No.)
8ME 3996B on 11/4/19 along GLENEAGLES HOSPITAL
OPEN CAR PARK

Policy Nos: _____

BY THIS POWER OF ATTORNEY, *I/We, ComfortDelGro Rent A Car Pte Ltd *NRIC/Passport

No. _____ (Address)* _____

_____ a company

incorporate in Singapore and having its registered office at (Address)* _____

_____ owner of Vehicle Registered No. 8MG 9609U

_____ hereby irrevocably appoint ComfortDelGro Engineering Pte Ltd (CDGE), a

☐ company incorporated in Singapore and having its registered office at _____

its agents or any person authorized by CDGE to be *my/our Attorney and in *my/our name(s) and on *my/our behalf to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we may have against the other *party/parties to the Accident and under the Insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy No. M4608VY taken up by *me/us in respect of the cost of repairs, loss of use and at all other costs and expenses, etc. suffered by *me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as *my/our Attorney shall in his absolute discretion, deem fit.
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of ComfortDelGro Engineering Pte Ltd, CDGE and to give a valid receipt and discharge therefor.
- ☐ 4. For any of the purposes aforesaid, to execute, sign, seal and deliver all documents whatsoever in relation thereto.
5. Generally do all such acts as it shall deem necessary for the purpose of settling such claim(s) and
6. To agree to any settlement at the absolute discretion of CDGE.

*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/our behalf by the Attorney, its agents or any person authorized by CDGE in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by *me/us in *my/our own proper person(s) and *I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that the powers and authority hereby conferred shall remain irrevocable.

*I/We further confirm that the acceptance by CDGE of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

*IN WITNESS WHEREOF, *I/We have hereunto to set *my/our hand and seal this day 11 of the month of 04, Year Two Thousand 19 (2019)

Signed, Sealed & Delivered By

Customers Name: _____
NRIC No.: _____
Co's rubber Stamp

delete as appropriate. Insurance



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SME 3996B	(Insd veh)	Model: TOYOTA PREVIA AERAS 2.4
	SMG 9609U	(TP veh)	
Date of Accident/ Time:	01/04/2019		

Repair Estimate	\$	1,016.50	
Final Repair Cost (WITH GST)	\$	267.50	
Loss of Use	\$	-	days at \$ per day
Rental (if any)	\$	360.00	3 days at \$120.00 per day
LTA / GIA Search Fee	\$	2.00	
Others:	\$		
	\$		
Final Settlement Sum	\$	629.50	

Payee Name : COMFORTDELGRO ENGINEERING PTE LTD

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: <u>22</u>
	BOLA Liability: <u>100</u> (%)	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.

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
Signature of Witness / Workshop stamp
Name of Representative: SINGAPORE 579701
Date: - 4 OCT 2019

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
Signature of Witness / Workshop stamp (if applicable)
Name of Witness: 205 BRADDELL ROAD
Date: SINGAPORE 579701

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

"The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document."

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

COMFORTDELGRO
RENT-A-CAR

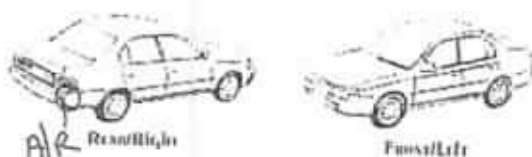
COMFORTDELGRO RENT-A-CAR PTE LTD
(Rental)

Vehicle Replacement Voucher

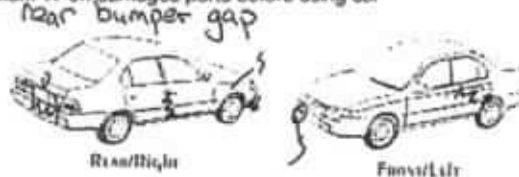
RV91094

Customer's Name Epson Singapore Pte Ltd			
Hirer's Name Mr Toshimitsu Tanaka		Station	
Ref. Contact Mr Adaha Bin Atan		Tel 9452 2276	
Exchange Location Call before go		Tel	
Org. Veh. Nr. SMG9609U	IU Nr. 1129031364	Repl. Veh. Nr. SKM9527P	IU Nr. 1125296590
Org. Veh. Make TOYOTA PREVIA 2.4 A	K / R / RK 1	Repl. Veh. Make LEXUS-TOYOTA GS 350 3.5 A	K / R / RK 1

Mark 'X' on damaged parts before using car



Mark 'X' on damaged parts before using car



Km In	5411	Date / Time In	2404/	Km In	78576	Date / Time In	
Km Out	5354	Date / Time Out	8/4/15 0905	Km Out	78239	Date / Time Out	8/4/15 0905
KM Drvn	57			KM Drvn			

Petrol Level	Indicates petrol level when vehicle was replaced.
E F	Indicates petrol level when vehicle was returned.

Petrol Level	Petrol Amt \$
E F	

Remarks / Miscellaneous
- Cashcard (Yes \$ No) **PM 95**
- Decals (Yes / Expired) **1 Bar 22°C**

Remarks **clear the num on wind screen**
BRING ALONG INSURE WHEN ATM

Hirer's acknowledgement for the remarks :-

[Signature]

Hirer's Signature : *[Signature]* Date: **8/4/15**
By your signature, Hirer accepts the new vehicle in replacement of original vehicle according to the terms & conditions of the original rental agreement

Checked Out By JASON CHUA	Checked In By
Signature <i>[Signature]</i>	Signature



Printed Date
05-Apr-2019 16:26

COMFORTDELGRO

COMFORTDELGRO RENT-A-CAR

Contract No. : N180736DEN
GST Reg No. : M2-0044678-0
Date : 12 December 2018

ComfortDelGro Rent-A-Car Pte Ltd
205 Braddell Road Singapore 578701
Hotline +65 6882 0888
Facsimile +65 6665 1818
www.cdgrentacar.com.sg
Company Registration No. : 19810575H

Epson Singapore Pte Ltd
1 HarbourFront Place
#03-02 HarbourFront Tower One Singapore 098633

Attention : Ms Elicia Lim

Rental Agreement - Schedule

Owner	: ComfortDelGro Rent-A-Car Pte Ltd
Hirer	: Epson Singapore Pte Ltd
Driver	: Mr Toshimitsu Tanaka
Period of Hire	: 24 months
Commencement Date	: 14 December 2018 to 13 December 2020
Vehicle Make/Model/No.	: Toyota Previa 2.4 A - <i>sm49609u</i>
Monthly Hire Charge	: S\$
Monthly CDR	: Inclusive
Monthly PAI	: S\$
GST	: S\$
Total Charges inclusive GST	: S\$
Deposit Amount	: S\$
Deposit B/F from R170297DEN	: (S\$)
Total Payable	: S\$
Due Date for Total Charges	: Payable in advance on 14th December 2018 and 1st day of every subsequent month till expiry of period
Excess/NWE	: S\$
Malaysia Usage	: Inclusive
Termination by Hirer	: No Termination Allowed

- Standard Terms and conditions apply
- In the event of an accident, the Hirer shall be liable for the excess amount regardless of any fault be any party/parties
- All above rates/excess are subjected to Prevailing Goods & Services Tax (GST)

COMFORTDELGRO



Contract No. : N180736DEN
Driver : Mr Toshimitsu Tanaka

INDIA INTERNATIONAL INSURANCE PTE LTD
 64 CECIL STREET #04-05 IOB BUILDING SINGAPORE 049711
 TEL: 6347 6100 FAX: 6224 4174 • 6225 7743
 POSTAL ADDRESS: ROBINSON ROAD P O BOX NO: 738 SINGAPORE 901438

ORIGINAL

R1

Motor Dept: 5th Level

This cover note is valid for
 Singapore Registered Vehicles only.

Cover Note No. 101424

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1987
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1980 (MALAYSIA)

Cover note not valid if issued on or after

Date: 03 January 2019

COMFORTDELQRO RENT-A-CAR PTE LTD

..... having proposed for insurance in
 respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in
 the terms of the Company's usual form of comprehensive
 Policy applicable thereto for the period from 07 JAN 2019 a.m./p.m.
 to midnight on 06 JAN 2020 unless the cover be terminated by the Company by notice
 in writing in which case the insurance will thereupon cease and a proportionate part of the
 annual premium otherwise payable for such insurance will be charged for the time the Company
 has been on risk and provided that an insurance covering the aforesaid liability has not been
 effected with other authorised insurers.

SCHEDULE

Make and Type of Body	Year of Manufacture	Cubic Capacity/ Carrying Capacity/ Tonnage	Proposer's estimate of present value including accessories	TYPE	Power/Catal Eng.
TOYOTA PREVIA 3.7 AUTO	2018	2362 07	\$160,000	Private Car Commercial Vehicle Motor Cycle	PETROL Registration No: X
Engine No: 2A21A87656		Chassis No: JTEGD56M607166424			
Use		Authorised Driver			Excess

CERTIFICATE OF INSURANCE

I/WE HEREBY CERTIFY that this cover note 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).

Here Purchase:

Approved Insurers

for INDIA INTERNATIONAL INSURANCE PTE LTD

Authorised Signatory

IMPORTANT NOTE:

Please Note that Cover Note issued by us is not valid as a Certificate of Insurance
 as per the Road Transport Act.



**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-19-056714
Date of Request: 11/04/2019

Your Ref No: Online Purchase

ComfortDelGro Engineering Pte Ltd
205 Braddell Road
Singapore 579701

Dear Sir/Madam,

Enquiry Date 11/04/2019
Enquiry By Kristy Tay Siew Hwa
TP Vehicle No. SME3996B
Accident Date 01/04/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SME3996B	AXA Insurance Pte Ltd	28/09/2018-27/09/2019	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.

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**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-19-056714

Date of Request: 11/04/2019

Your Ref No: Online Purchase

ComfortDelGro Engineering Pte Ltd
205 Braddell Road
Singapore 579701

Dear Sir/Madam,

Enquiry Date 11/04/2019
Enquiry By Kristy Tay Siew Hwa
TP Vehicle No. SME3996B
Accident Date 01/04/2019

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:

☒ GIRO ☐ Cash ☐ Cheque

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No: 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM19006485/Kgb3q2

8 SHENTON WAY #24-01

Date : 14-10-2019

AXA TOWERSINGAPORE 068811



ATTN:VALE OH

Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SME 3996B	Veh. Inspected	SMG 9609U
Policy No.	GA403847	Coverage (\$)	0.00
Claim No.	S9M01JWJ	Excess (\$)	0.00
Assign From		Assign Date	11/04/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PREVIA (A)	c.c	2362
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	JTEGD56M607166424	Colour	METALLIC BLUE
Odometer	5368	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/55 R17	YOKOHAMA	9 mm
L/H Front Tyre	215/55 R17	YOKOHAMA	9 mm
R/H Rear Tyre	215/55 R17	YOKOHAMA	9 mm
L/H Rear Tyre	215/55 R17	YOKOHAMA	9 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	01/04/2019	Inspection Date	11/04/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 205 BRADDELL ROAD BLK C, 3RD FLOOR SINGAPORE 579701.		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	1 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMG 9609U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REPLACEMENT OF PARTS			
	REAR REVERSE SENSOR (SN) (CONSISTENT)	SERVICEABLE	320.00	-
			320.00	-
	LABOUR			
	LABOUR TO INSTALL REVERSE SENSOR .	NOT NECESSARY	50.00	-
	TO CHECK WIRING FUNCTIONS.	NOT NECESSARY	50.00	-
	LABOR TO PANEL BEAT AND REPAIR REAR BUMPER.	NOT NECESSARY	280.00	-
	TO PUTTY AND SPRAY PAINT REAR BUMPER.		250.00	250.00
			630.00	250.00
GRAND TOTAL			950.00	250.00
RECOMMENDED COST OF REPAIRS				250.00

Report Ref No. CC4/ASM19006485/Kgb3q2

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Service Request Details

Actions

Next Step: Wait for Approve Invoice

Approve Invoice

Claim:	59H0LJWJ
Reference:	CC4/A5M19006485/Kgb342
Loss Date:	3 April 2019
Report Date:	11 Apr 2019 12:36:37 PM
Request Date:	11 April 2019
Due Date:	
Vendor Name:	LK& AUTO CONSULTANTS PTE LTD (TP)
Type of Loss:	Third Party Vehicle Damage
Services:	Pending verification - Direct Settlement

Vehicle Information

Incident Vehicle Registration #

SMC29609U

Make:

TPVO TOYOTA

Model:

PREVIA AERAS 2.4

Service Address:

...

Primary Contact/Insured:

LIM SHEOW LEI
6A TAN JONG RHU ROAD, 14-01, 436884, Singapore
sheowlei@yahoo.co.uk

Claim Handler:

OH Vale
6568804897
vale.oh@axa.com.sg

Additional Instructions

NON-REPORTED

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

Document Type

Document SubType

+ Upload Document

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
Accident Statement	Reports & Statement		Merimen	

NAME LINK	TYPE Invoice	SUB-TYPE Surveyor/ Assessor expense	AMOUNT TO CONSULTANTS PTE LTD (TP)	DATE 17 October 2019
LINK RENTAL RECEIPT.pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK Inspection (7).pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK Adjustment 1a (6).pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK GIA SEARCH.pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK PAYMENT BREAKDOWN EXPRESS SETTLEMENT FORM.pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK AUTHORISATION TO ACT FORM.pdf		Forms / Claim Documents	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK LETTER TO OI.pdf		Letters and Correspondence	LINK AUTO CONSULTANTS PTE LTD (TP)	17 October 2019
LINK PASF COE REBATE.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	31 August 2019
LINK TP EST LIST MARKED.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	31 August 2019
LINK MANDATE IA DO 31082019.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	31 August 2019
LINK LOO AND OTHER DOCUMENTS.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	31 August 2019
LINK SURVEY PHOTO.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	31 August 2019
LINK VA.pdf		Reports & Statement	LINK AUTO CONSULTANTS PTE LTD (TP)	12 April 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 PMSF_COE Release Enquiry.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	12 April 2019
 GA403847-Policy Schedule.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	OH Vale	11 April 2019
 GA403847-Certificate of Insurance.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	OH Vale	11 April 2019
 PRI EMAIL RECEIVED FROM WORKSHOP WITH TP GIA REPORT.mg	Letters and Correspondence	Workshop	BATAN BHD/SALE Pragati	11 April 2019