

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

09 MAY 2019

TAY KAI TZE **68 FLORA ROAD** #02-15 SINGAPORE 506913

Dear Sir/Madam,

OUR REF

: CC4/ASM19007076/Efa3

YOUR REF : SJM 1804D

ACCIDENT INVOLVING SJM 1804D AND SKH 8830X ALONG/AT PASIR RIS **FLYOVER ON 16/04/2019**

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 VOLKSWAGEN CENTRE SINGAPORE, acting on behalf of the owner of SKH 8830X 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 SKH 8830X. As such, liability is down against us.

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 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 pohkin@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 6256 3561 or email us at pohkin@lkkauto.com

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

Yours sincerely,

Poh kin, Chong Case Handler DID: 6841 2132 FAX: 6741 4108

Email: pohkin@lkkauto.com

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

Volkswagen Centre Singapore



Biz Reg. No. 53103069E GST No. M20098505-2

LETTER OF AUTHORITY

	ACCIDENT INVOLVING SkH8830 x and SJM 1804D on 16/4/19 along 7PF (SCE) Own vehicle's number of Elias Rel Exit
	along TPF (SCF) @ Own vehicle's number and SJM 1804D on 16/4/19 Other vehicle's number Other vehicle's number Date of accident
	Accident location
	BY THE LETTER OF AUTHORITY, I/we, Wong kim Lan Name of Policy Holder & IC / Passport number
	of Name of Policy Holder & IC / Passport number owner of Vehicle Registration
	owner or vehicle registration
	Number Sk + 883 ox hereby irrevocable appoint Volkswagen Centre Singapore (hereinafter refer to VGS), a company incorporated in Singapore and having its registered office at 247
	(hereinafter refer to VGS), a company incorporated in Singapore and having its registered office at 247 Alexandra Road, Singapore 159934 , its agents of any person authorized by VGS to be *my / our Attorney and in * my / our name(s) 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 numbertaken up by *me/us and pay the compulsory excess in respect of the cost repairs suffered by *me/us arising from the Accident (loss and damage)/.
2.	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 favour of Volkswagen Centre Singapore and give a valid receipt and discharge therefore.
8.	For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
	Generally do all such acts as it shall deem necessary for the purpose of settling such claim.
	*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on *my/our behalf by the Attorney, its agents or any person authorized by VGS 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 letter of authority hereby conferred shall remain irrevocable.
	*I/We further confirm that the acceptance by VGS 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 sign this of the month Year
	Signed & Delivered By:
	Witness By: VOLKSWAGEN SING SING 81030002



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJM 1804D (Insd veh)	
	SKH 8830X (TP veh)	Model: VOLKSWAGEN TOURAN 1.4
Date of Accident/Time:	16/04/2019	
	1 1 1 1 1 1 1 1	

Repair Es	timate	:\$	7,297.72	
Final Rep	air Cost	:\$	3,853.02 (w/gst) (\$3,6	500.95 + 7%gst)
Loss of U	se	:\$	Nil day	ys at \$ per day
Rental (if	any)	:\$	321.00 (w/gst) 3 day	/s at \$ 107.00 per day
LTA / GIA	Search Fee	;\$	2.00	
Others:		:\$	Nil	
		:\$	Nil	
Final Sett	lement Sum	:\$	4,176.02	
Payee Na				
Is Third P	arty Workshop GIA Registe	red?	YES [] NO (Kindly indicate below)	
A)	For Non GIA Register	red Work	shop: Agreed Liability(%)	
В)	For GIA Registered V	/orkshop	BOLA Applicable: Yes/ No BOLA Scenar	rio No: 21
BOLA Liability: 100 (%) * Assessed Liability to be filled a)(%)		
		be filled	only for chain collisions and for cases where BOLA does not ap	oply.

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.

GROUP SINGAPORE

Signature of workshop representative

030002

Signature of Witness / Workshop stamp # 4p(0) 3b(6) 0 0 2

VOLKSWAGEN

GROUP SINGAPORE

Name of Witness:

Date: 19/1/2019

Date: 19/7/2014

Name of Representative:

Signature of AXA's surveyor representative: Name of AXA's survey Representative: Date: 19/1/2014

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811

AXA Customer Centre #01-21/22 Telephone: +65 6880 4888 - axa.com.sg

VOLKSWAGEN CENTRE SINGAPORE

9 Tuas Avenue Singapore 639176

Biz. Reg. No.: 199101494Z GST No.: M200985052







Tax invoice

Company AXA Insurance Pte Ltd 8 SHENTON WAY #27-01 AXA TOWER Singapore 068811

Customer Details:

Ms. WONG KIM LAN

582 PASIR RIS STREET 53

#11-17

Singapore 510582

Page

1/2

Document no. Document date Customer no. Customer GST-ID

23-05-2019 5211000859 196900406D

12333900298

Dealer

39999

Job order number Job order date

2019000322/1

24-04-2019

Service Advisor

TIOW CHUAN CHEE

License plate SKH8830X

Model code 1T32B4

First registration 25-01-2013

VIN

WVGZZZ1TZDW038605

Model

Touran 1.4 Trend 103 TSID7F

Mileage 106,681

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
	B&P REVERSE SENSOR B&P MECH LABOUR B&P Diagnostic and Programming SPRAY PAINT	1 1 1 1 1.5	pcs. pcs. pcs.	400.00 200.00 580.00 360.00	#1 #1 #1 #1	400.00 200.00 580.00 360.00 750.00	428.00 214.00 620.60 385.20 802.50
1T0807421K GRU	Cover For Bumper Primed REAR BUMPER*XR-240419	1.5	pcs. pcs.	500.00 1,242.02	#1 #1	1,242.02	1,328.96
1T0945106C	Reflector RH*AO-240419 AXA DIRECT SETTLEMENT, DOA: 16/04/2019, TP VEH: SJM1804D, SURVE' BY: STEVE (LKK).	1 Y	pcs.	68.93	#1	68.93	73.76

Tax Code	Labour	Material	GST%	GST	Total amount excl. GST	Total amount incl. GST
#1	400.00	3,200.95	7%	252.07	3,600.95	3,853.02
Total	400.00	3,200.95		252.07	3,600.95	3,853.02

Customer

Service Advisor

Please inspect your vehicle prior to leaving our premises; we seek your understanding that we are not able to honour claims on scratches, dents etc. after your car has left our premises.

-----VISIT OUR WEBSITE: aftersales.vw.com.sg (for online service appointments) and volkswagen.com.sg and www.skoda.com.sg (for additional services, products and promotions) .----

All fund transfer payments should be made payable to Volkswagen Group Singapore Pte Ltd; Bank Name: Deutsche Bank AG (Singapore Branch), Bank Account: 2528214002, Swift Code: DEUTSGSG, Please indicate Customer Number (eg. 521XXXXXXX), Customer Name and Invoice Number in the payments.

Until payment of all goods (parts, accessories etc.) has been made in full to and received by Volkswagen Group Singapore (VGS), the goods remain in legal possession of VGS, irrespective if they have already been installed into your vehicle. However, the warranty of the goods (where applicable) starts with the issuance of the invoice or the collection of your car, whichever is earlier.



Main Office:

Mova Building No. 22, Jalan Kilang,

Singapore 159419
Tel: **(65) 6476 3333**Fax: **(65)** 6271 5891
www.mova.com.sg

Workshop Dept:

Block/1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Tax Invoice

7th May 2019

SNG WAI LEONG **BLK 582 PASIR RIS STREET 53** #11-17

SINGAPORE 510582

Attention :- SNG WAI LEONG

Veh# :- SLL3690H RK144668 :- RK733547 Inv# RA# :- B13804 0/0 From 06/05/2019 To 09/05/2019

Remarks :- MICHELLE-VW

C.O.D

U.Price

112.15

Amounts S\$

336.45

Terms

Qty

3 DAY

Description

RENTAL CHARGES FROM 06/05/2019 TO 09/05/2019

VW JETTA: SLL3690H

RENTAL AGREEMENT: B13804 DRIVEN BY: SNG WAI LEONG YOUR REF: VW/KA-SKH8830X

BY: WSA-Batch: 1384 436010.

Singapore Dollars:

Three Hundred Sixty Only

AMOUNT S\$

336.45

GST @ 7 %

23.55

Thank you for your continuous support.

AMOUNT DUE S\$

360.00

MOVA AUTOMOTIVE PTE LTD



AUTOMOTIVE Website: www.mova.com.sg

Co. Reg. No.: 198904033G

Automotive Pte Ltd

Wain Office: No. 22 Jalan Kilang, Singapore 159419 Rukit Merah Branch:

Blk 122 Bukit Merah Lane 1 #01-50, Singapore 150122 Fan Yoong Branch: No. 15 Fan Yoong Road, Singapore 629792 Tel: (65) 6476 3333 Fax: (65) 6270 8314

24 Hours Breakdown Service: (65) 9799 8888 24 Hours Breakdown Service: **(65) 9799 8888 Bedok Branch**: 219 Bedok Central #01-138, Singapore 460219 R E C E I V E D 1 3 MAY 2019

RENTAL AGREEMENT

RANO.: B 13804

RENTAL DETAILS **INSURANCE EXCESS AMOUNT** Jetta Vehicle No: SI_L3691H Singapore Vehicle Make/Model: Malaysia Signature Date/Time Out: 2019 2.00 Pm 3500 2500 22 Petrol Level Out: È 1/8 1/4 3/8 1/2 5/8 3/4 7/8 Per Accident Per Accident Date/ Time In: Charges Petrol Level In: E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F Months @\$ Per Month Change Over 1: Date Initial Weeks @\$ Per Week @\$ 1/2.10 \$336.46 Change Over 2: Date Initial: Days Per Day 24442 24592 Hours @\$ Per Hour KM Out KM In: HIRER DETAILS Sub-Total Named Hirer Less Discount SNG WALLEON Name: Rental Charges 51 33 CDW @\$ Address: per day / week / month PAI @\$ per day / week / month 11-17 Petrol Top-Up SC SIO SAV Misc Charges S1601912 G Identity Card No: GST \$23.00 27010-Date of Rirth: Total VISA / MASTER CARD / AMEX | CASH / COMPANY BILLING / OTHERS Driving License: Country of Issue: Pre-Payment Tel: 81846K3. (0) MA Downpayment and Deposit Nationality: Amount Refunded/ Due Signature of Refund Effective Date: Additional Hirer Remarks: Name: SKH8830X pord Address Invoice No: Ref. No: Checked Out By: Checked In By: Checked By: Identity Card No: Date of Birth: muchell Driving License: Sales-In Charge: Past 3 years accidents YES NO Country of Issue: (HP) (0) Tel: Nationality: Effective Date: I fully understand and agreed to the terms and condition appended on both sides of this Vehicle Rental Agreement. I also agreed that if there is any outstanding amount payable after the conclusion of my rental not restricted to parking or traffic infringements during my period of hire, I will agreed that these outstanding payment be billed to my charge/credit card voucher given above. All above information given by me are true in connection to this agreement. Date & Time Hirer's Signatory / Company Stamp (if corporate hirer) Authorised Manager Signature

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle
- 2. All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.

 3. In any accident, the Hirer must report to MOVA Automobile immediately. The Hirer shall endeavor to assist in all manners possible.
- The Hirer shall be liable for all excess charges (if any) for late return at the hourly rate shown, inclusive of CDW and PAL Late return of more than 4 hours will be considered as a day rental.
- 5. All traffic infringements and summons (if any) are the responsibility of the Hirer.



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-19-061112

Date of Request:

18/04/2019

Your Ref No:

Online Purchase

Volkswagen Centre Singapore 247 Alexandra Road Singapore 159934

Dear Sir/Madam.

Enquiry Date

18/04/2019

Enquiry By

Chee Tiow Chuan

TP Vehicle No.

SJM1804D

Accident Date

16/04/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJM1804D	AXA Insurance Pte Ltd	11/11/2017-10/11/2019	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.



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-19-061112

Date of Request:

18/04/2019

Your Ref No:

Online Purchase

Volkswagen Centre Singapore 247 Alexandra Road Singapore 159934

Dear Sir/Madam,

Enquiry Date

18/04/2019

Enquiry By

Chee Tiow Chuan

TP Vehicle No.

SJM1804D

Accident Date

16/04/2019

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:

[X] GIRO [] Cash [] Cheque