



Auto
Consultants
Pte Ltd

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

Date: 25 MAY 2019

MARGARET CHOO LEE LIANG
BLK 412 COMMONWEALTH AVENUE WEST
#11-3039
SINGAPORE 120412

Dear Sir/ Mdm

OUR REF : CC4/ASM19007594/ha3
YOUR REF : SLU 6055A
**ACCIDENT INVOLVING SLU 6055A AND SBH 66U ALONG RD 1 ORCHARD RD
OUTSIDE CONCORDE HOTEL ON 06/04/2019**

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 Singapore Pte Ltd to deal with the third party claim against your policy.

We have received a claim from Cycle & Carriage Ind. Pte Ltd acting on behalf of the owner of SBH 66U against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. 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 jiale@lkkauto.com within 10 days 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)
- 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.

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 5792 or email us at jjale@lkkauto.com.

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

Yours sincerely,



Chan Jia Le
Case Handler
DID: 6749 5792
FAX: 6741 4108
EMAIL: jjale@lkkauto.com

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

LETTER OF AUTHORIZATION

To: AXA

Singapore _____

Attn.: Motor Claims Department

Dear Sir / Mdm,

MOTOR ACCIDENT INVOLVING SBH 664 (OWNER'S
VEHICLE NO.) AND SLU 655A (3RD PARTY'S VEHICLE NO.)
ON 06/04/19 (DATE) AT 23:15 (TIME)
AT/ALONG Outside Capella Hotel (Orchard Rd) (ROAD)

I am the registered owner of SBH 664 (Vehicle No.).

I hereby authorise CYCLE & CARRIAGE INDUSTRIES PTE LIMITED and its agents or any person(s) authorised by Cycle & Carriage Industries Pte Limited to do all or any of the following:-

- Submit, resolve and make any claims which I may have against the 3rd party insurers; and/or
- Execute and sign discharge voucher, indemnity forms and all necessary documents in connection with and arising from the above claim.

All payment towards settlement of my claim should be made in favour of CYCLE & CARRIAGE INDUSTRIES PTE LIMITED.



Registered Owner's Signature

(Company stamp & authorized signature if it is a company-registered vehicle)

Name : Wong Zong Hin
NRIC No. : S15575235
Date : 16/7/2019



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLU 6055A (Insd veh)	Model: Mercedes Benz E200(1991cc)
	SBH 66U (TP veh)	
Date of Accident/ Time:	06/04/2019	

Repair Estimate	:\$	6,681.20	
Final Repair Cost (w/GST)	:\$	4,937.58 /	
Loss of Use	:\$	-	days at \$ per day
Rental (if any)	:\$	320.00 /	2 days at \$160.00 per day
LTA / GIA Search Fee	:\$	2.00 /	
Others:	:\$	-	
Final Settlement Sum	:\$	5,259.58 /	

Payee Name: **CYCLE & CARRIAGE INDUSTRIES 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>27</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.

Signature of workshop representative / Workshop stamp
 Name of Representative: **Vincent Seah**
 Date: 20.11.19
LKK
 Cycle & Carriage Industries Pte Ltd
 Body Care & Repair Center
 DID: 6771 4401 HP: 8332 0042 Fax: 6872 1272
 Email: vincent.seah@cycleariages.com.sg

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


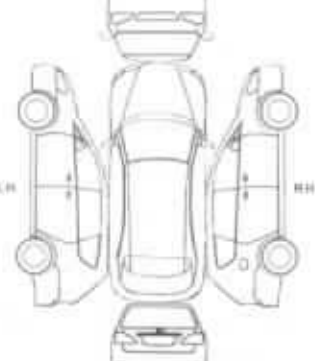
AMANDA ANG
 OFFICER - ADMIN
 BODY CARE & REPAIR CENTER
 DID: 6771 4304
 FAX: 6779 5383
 EMAIL: amanda.ang@cycleariages.com.sg

FLEXI-DRIVE ENTERPRISE

Blk 8 Kaki Bukit Avenue 4 Premier@kaki bukit gate 2 #06-33 lobby C Singapore 415875
 Tel: (65) 6292 5455 Fax: (65) 6292 2866 e-mail: sales@wellscope.com.sg
 H/Phone : 9667 5455 (24 Hrs)

INVOICE

RA : 08864

V. A. No.	Vehicle Regn. No. SBH 664	Model Type Carry	Renting Location 22C VINCENT.
Reference 2KV 9674A.		Agreed Return Date	
\$160/day x 20 Day per Day \$ per per Week \$ per per Month Cts. per Kilometre		5 Hours = 1 Day Rental (1 Day Rental ÷ 5 = 1 Hour Extension)	
Hirer's Name Wong Toot Hin		Time / Date In 18/07/15 14:20 Time / Date Out 16/07/15 10:00 Total / Time Chargeable	
Address 5359 249		Rental Charges Total 2 Days Rental \$160/day x 20 day	
U/C No. 515975236			
Reference Contact		Tel. No. 9-6381955	
Driver's Name		Passport / IC No. / Country	
Address		Petrol Out E 1/4 1/2 3/4 F Petrol In E 1/4 1/2 3/4 F Outstanding Petrol will charge in every 1/4, 1/2, 3/4, F @\$ _____ per 1/4	
Driving Licence No.		Expiry Issued by	
Additional Driver		Tel. No. (Home)	
Address		Passport / IC No. / Country	
Driving Licence No.		Expiry Issued by	
Method of Payment BILL TO: CYCLE R. MARRIAGE. IND FEE LTD 188 RANDAN LWP.		Sub-Total Others Grand Total 2320.00	
- RATES QUOTED ARE FOR USE IN SINGAPORE ONLY. - THE HIRER IS SOLELY RESPONSIBLE FOR BREACH OF TRAFFIC LAWS AND ANY PARKING FINES OR SURCHARGES DURING PERIOD OF HIRE. Hirer's signature signifies acceptance of agreement		Prepayment Received \$	
		By: (Name in Block Letters) CASH CHEQUE	
		Amount Due / Refundable	
Refund Received \$ _____ by receiver X Out by 2. In by 2.		FRONT  REAR CAR	
		FRONT  REAR MPV	
Remarks: SBH 664 A2A			

NB: Please notify our office should there be any accident involving this hired vehicle as soon as possible.



RECORDS MANAGEMENT CENTRE

**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-19-056565

Date of Request: 10/04/2019

Your Ref No: Online Purchase

Cycle & Carriage Industries Pte Ltd
188 Pandan Loop
Singapore 128378

Dear Sir/Madam,

Enquiry Date 10/04/2019

Enquiry By Lim Xin Yi

TP Vehicle No. SLU6055A

Accident Date 06/04/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLU6055A	AXA Insurance Pte Ltd	08/12/2018-07/12/2019	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-19-056565
Date of Request: 10/04/2019

Your Ref No: Online Purchase

Cycle & Carriage Industries Pte Ltd
188 Pandan Loop
Singapore 128378

Dear Sir/Madam,

Enquiry Date 10/04/2019
Enquiry By Lim Xin Yi
TP Vehicle No. SLU6055A
Accident Date 06/04/2019

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