

Cecilia Chong (LKK Auto)

From: Cecilia Chong (LKK Auto)
Sent: Monday, 10 June 2019 11:16 AM
To: kaltransport@tts.edu.sg
Subject: <Standard Notification Letter> Your ref: PC 3305X (Our ref: CC4/ASM19007602/T1ga3)
*** ACCIDENT INVOLVING PC 3305X & SJV 5042L ON 29/04/2019 ***

KAL T & T SERVICES

ATTN: MR MICHAEL
Dear Sir/ Mdm

OUR REF : CC4/ASM19007602/T1ga3
YOUR REF : PC 3305X
ACCIDENT INVOLVING PC 3305X & SJV 5042L ALONG/AT PIE ON 29/04/2019

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 Mova Automotive Pte Ltd acting on behalf of the owner of SJV 5042L 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)



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

AUTHORIZATION TO ACT

I, Hq Son Tung ("the third party claimant")
of 60 CHESTNUT AVENUE #15.03 TREE HOUSE S (679517) (address),
owner of SJV 50421 (vehicle no.) hereby authorize
MOVA AUTOMOTIVE PTE LTD
("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. SJV 50421 that was damaged pursuant to the
accident which occurred on 24/04/19 (date) along Lornie
highway underpass (location)
involving vehicle no/s PC 3305X
("the accident").

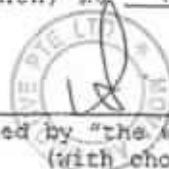
I further authorize the workshop to settle my above mentioned
claim in a manner that they deem fit and the workshop is further
authorized to receive payment further to settlement of my claim
with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement 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.

Dated this 07 day of 05 (month) 20 19 (year)

X

Signed by "the third party claimant"



Signed by "the workshop"
(with chop)



The acceptance of this offer is without prejudice to any personal injury claim/insure's claim/expenses

AXA THIRD PARTY DIRECT SETTLEMENT

| | | | |
|-------------------------|------------|------------|---------------------|
| Vehicle No: | PC 3305X | (Insd veh) | Model: NISSAN TEANA |
| | BJV 5042L | (TP veh) | |
| Date of Accident/ Time: | 20/04/2019 | | |

| | | | |
|---|----------------------------------|--|-----------------------------|
| Repair Estimate | : \$ | | |
| Final Repair Cost: | : \$ | \$ 885.00 | (WGST) |
| Loss of Use | : \$ | | days at \$ per day |
| Rental (if any) (WGST) | : \$ | 963.00 | 9 days at \$ 107.00 per day |
| LTA / GIA Search Fee | : \$ | 2.00 | |
| Others: | : \$ | | |
| | : \$ | | |
| Final Settlement Sum | : \$ | \$ 800.00 | (global sum) |
| Payee Name : MOVA AUTOMOTIVE PTE LTD | | | |
| Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below) | | | |
| A) | For Non GIA Registered Workshop: | Agreed Liability _____ (%) | |
| B) | For GIA Registered Workshop: | BOLA Applicable: Yes/No BOLA Scenario No: 27 | |
| | BOLA Liability: 100 (%) | 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: Date: 20/12/19 |  Signature of Witness / Workshop stamp (if applicable) Name of Witness: Date: 20/12/19 | MOVA AUTOMOTIVE PTE LTD Blok 1008, BUKIT MERAH LANE 3 #01-04 (S) 159722 Tel: 62723892 Fax: 62706314 GST Reg No : M2-0088864-2 |
|  Signature of AXA's surveyor/representative Name of AXA's surveyor / Representative: Date: 23/1/19 | | |

| RENTAL DETAILS | | | INSURANCE EXCESS AMOUNT | | |
|-------------------------|--|-------------|---|--------------|-------------|
| Vehicle Make/Model: | T. ALC | Vehicle No. | Singapore | Malaysia | Signature |
| Date/Time Out: | 29/4/19 @ 10.20 | | SS \$2500 | SS | [Signature] |
| Petrol Level Out: | E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F | | Per Accident | Per Accident | |
| Date/Time In: | 7/5/19 @ 1626hrs | | 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: SA6400S | Date: 2/5/19 Initial: [Signature] | | 1 Weeks @ \$ 840.00 | Per Week | 840.00 |
| Change Over 2: SKY 497T | Date: 3/5/19 Initial: [Signature] | | 2 Days @ \$ 120.00 | Per Day | 240.00 |
| KM Out: | 13674 | KM In: | Hours @ \$ | Per Hour | |
| HIRER DETAILS | | | Sub-Total | | |
| Named Hirer: | HA SON TUNG | | Less Discount % | | |
| Address: | 60 Chestnut Avenue #15-03 TREE HOUSE S(679517) | | Rental Charges | | |
| Identity Card No: | G 1310390P | | CDW @ \$ per day / week / month | | |
| Date of Birth: | 04/04/1985 | | PAI @ \$ per day / week / month | | |
| Driving License: | 01/01/2010 | | Petrol Top-Up | | |
| Country of Issue: | | | Misc Charges | | |
| Tel: | (HP) 9489 0912 (O) | | GST 7% | | |
| Nationality: | | | Total | | |
| Effective Date: | | | 75.60 | | |
| Additional Hirer: | | | VISA / MASTER CARD / AMEX CASH / COMPANY BILLING / OTHERS | | |
| Name: | | | Pre-Payment | | |
| Idress: | | | Downpayment and Deposit | | |
| Identity Card No: | | | Amount Refunded/ Due | | |
| Date of Birth: | | | Signature of Refund | | |
| Driving License: | | | Remarks: | | |
| Country of Issue: | | | STV 5042L / Camy / Chan | | |
| Tel: | | | Invoice No. | | |
| Nationality: | | | Ref. No. | | |
| Effective Date: | | | Checked Out By: | | |
| | | | Checked In By: | | |
| | | | Checked By: | | |
| | | | Sales-In Charge: | | |
| | | | Past 3 years accidents YES <input type="checkbox"/> NO <input type="checkbox"/> | | |

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.

Hirer's Signatory / Company Stamp (if corporate hirer)

Authorised Manager Signature

Date & Time

IMPORTANT

- Only authorized drivers with valid driving license of minimum 2 years may drive the rental vehicle.
- All rental vehicles are strictly for Singapore use only, and may not be driven outside Singapore without prior approval of MOVA Automobile.
- 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 PAI. Late return of more than 4 hours will be considered as a day rental.
- All traffic infringements and summons (if any) are the responsibility of the Hirer.



Automotive Pte Ltd

Performa Invoice

14th May 2019

MOVA AUTOMOTIVE PTE LTD

BLOCK 1008 BUKIT MERAH LANE 3

#01-04

SINGAPORE 159722

Veh : SKX497T

Prof : RK506834

RA : I12285

From : 29/4/2019

To : 7/5/2019

Main Office:
Mova Building
No. 22, Jalan Klang,
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

Attention : Mova - claims Dept

| Description | Qty | U.Price | Amount S\$ |
|---|--------|---------|------------|
| Rental Charges | | | |
| FROM 29/4/2019 to 2/5/2019 TOYOTA ALTIS : SKZ5124B | 4 DAYS | \$120 | \$480.00 |
| FROM 2/5/2019 TO 3/5/2019 MIT. LANCER : SLA6400S | 1 DAY | \$120 | \$120.00 |
| FROM 3/5/2019 TO 7/5/2019 MAZDA 3 : SKX497T | 4 DAYS | \$120 | \$480.00 |

RENTAL AGREEMENT : I12285

Driven by : HA SON TUNG

Your ref : SJV5042L

Mova Automotive Pte Ltd

Non - GST amount \$1,080.00
GST 7% \$75.60
Total Amount \$1,155.60



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-19-066633

Date of Request: 29/04/2019

Your Ref No:

Online Purchase

Mova Automotive Pte Ltd
Blk 1008, #01-04/06/08/94
Bukit Merah Lane 3
Singapore 159722

Dear Sir/Madam,

Enquiry Date 29/04/2019

Enquiry By Enny

TP Vehicle No. PC3305X

Accident Date 29/04/2019

Enquiry Result

| TP Vehicle No. | Insurer | Period of Insurance | Insurer Tel. No. |
|----------------|-----------------------|-----------------------|------------------|
| PC3305X | AXA Insurance Pte Ltd | 01/08/2018-31/07/2019 | 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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RECORDS MANAGEMENT CENTRE

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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-19-066633

Date of Request: 29/04/2019

Your Ref No: Online Purchase

Mova Automotive Pte Ltd
Blk 1008, #01-04/06/08/94
Bukit Merah Lane 3
Singapore 159722

Dear Sir/Madam,

Enquiry Date 29/04/2019

Enquiry By Enny

TP Vehicle No. PC3305X

Accident Date 29/04/2019

| 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