



Auto  
Consultants  
Pte Ltd

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

16 AUGUST 2019

**CHIN WEI YOUNG**  
7 JURONG EAST STREET 32  
#07-07  
SINGAPORE 609480

Dear Sir/ Mdm

**OUR REF : CC4/ASM19008111/T1gb3**  
**YOUR REF : SJV 8786D**  
**ACCIDENT INVOLVING SJV 8786D AND SJY 7751U ALONG/AT CLMENTI ROAD**  
**OUTSIDE MAJU CAMP ON 06/05/2019**

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 **SHU FATT AUTO WORKS** acting on behalf of the owner of SJY 7751U 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](mailto: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](mailto:ceciliachong@lkkauto.com).

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

Yours sincerely



Cecilia Chong  
Case Handler  
DID: 6749 4274  
FAX: 6741 4108  
EMAIL: [ceciliachong@lkkauto.com](mailto:ceciliachong@lkkauto.com)

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

## LETTER OF AUTHORISATION

VEHICLE NO. 8JY 7751 U

Name of owner Tee Zhen Shou Daniel NRIC No. S8025419 H

Address BK 1009 Bukit Merah Lane 3 #01-90, Singapore 159723

Name of driver at above NRIC No. \_\_\_\_\_

Address \_\_\_\_\_

ACCIDENT INVOLVING 8JY 7751 U AND 8JY 8786 D

ON 06/05/2019 ALONG Clementi Road towards PIE

In consideration of M/S. SHU FATT AUTO WORKS repairing my/our vehicle no. 8JY 7751 U at my/our request, I/we, the abovenamed owner/driver of the said vehicle hereby Irrevocably instruct and authorize SHU FATT AUTO WORKS to demand/claim/settle/receive whatever amount settled/payable by the insurance company and/or third party insurance company and all amount claimed and/or settled shall belong to SHU FATT AUTO WORKS to give an absolute discharge on my/our behalf. The settlement cheque should be made in favour of SHU FATT AUTO WORKS directly.

Dated this 16<sup>th</sup> day of May 2019

Signature: Tee Zhen Shou

Name : Tee Zhen Shou Daniel

Car No. : 8JY 7751 U



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJV8786D (Insd veh)	Model: VOLKSWAGEN JETTA 1.4 TSI
	SJY7751U (TP veh)	
Date of Accident/ Time:	06/05/2019	

Repair Estimate	: \$	13,719.56	
Final Repair Cost (WGST)	: \$	5,350.00	
Loss of Use	: \$	400.00	8 days at \$ 50.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	5,752.00	

Payee Name : SHU FATT AUTO WORKS

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: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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:



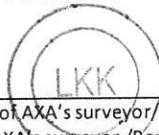
#### NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. 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.
3. 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: Julia Wong Date: 21 October 2019	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: Lim Date: 21 October 2019
 Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date:	



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-19-070698

Date of Request: 06/05/2019

Your Ref No: Online Purchase

Shu Fatt Auto Works  
Block 1009 Bukit Merah Lane 3  
#01-90  
Singapore 159723

Dear Sir/Madam,

Enquiry Date 06/05/2019  
Enquiry By PATRICIA KOH LING CHIAN  
TP Vehicle No. SJV8786D  
Accident Date 06/05/2019

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJV8786D	AXA Insurance Pte Ltd	12/11/2018-11/11/2019	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.

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ASSOCIATION**

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**TAX INVOICE**

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Date of Request: 06/05/2019

Your Ref No: Online Purchase

Shu Fatt Auto Works  
Block 1009 Bukit Merah Lane 3  
#01-90  
Singapore 159723

Dear Sir/Madam,

Enquiry Date 06/05/2019  
Enquiry By PATRICIA KOH LING CHIAN  
TP Vehicle No. SJV8786D  
Accident Date 06/05/2019

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