AXA Swe Attn:	Throwince Sugjeptive Pte Ud Japore Motor Claims Dept	
Dear	Sir/ Madam	
ACC ALO	IDENT INVOLVING VEHICLE NO FOG 3380 NG Bedow North Ave 4 Cowards Upper Cham	34 of FB13125 Si Doad ON 30/04/2019
	nderstand that your are the insurer of FBN 3125	
I/We repair to cla	wish to inform you that my/our vehicle _F0G 3380 s to my/our satisfaction by M/s bantockfun & 10 m from your as follows:	have been completed The wal . I/We therefore propose
1.	Cost of Repairs	s\$ 2,461.00
2.	Loss of Use/Rental(S\$_7\(\bar{v}\) x \(\bar{4}\)_days)	s\$ 2,461.00 s\$
3.	LTA Search Fee/GIA Reports	S\$
	TOTAL	s\$ 2,543.00
Please	let us have your reply soonest possible	

Thank you.

Yours faithfully

AUTHORISATION TO ACT

I/We, Yeo Chin Heng (the third party claimant") of MK 206 Serangoo Contrate #11-164 Sungapore 550206 (address), owner of FBG 33804 (vehicle no.) hereby authorize Dan Hock this Co. Pte Utd ("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. FBG 3380Y that was damaged pursuant to the accident which occurred on 30/4/2019 (date) along Bedox North Ave 4 Towards where Change Road (location) involving vehicle no/s FBV 3125 ("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 (day) of (month) 20 (year)

Signed by "the third party claimant" (with company stamp if applicable)

Signed by "the workshop" (with company stamp)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBP 312S (Insd veh)			
	FBG 3380Y (TP veh)	Model:	SYM MAXSYM	(400cc)
Date of Accident/ Time:	30/04/2019			` '

Repair Estimate	:\$						
Final Repair Cost	:\$						
Loss of Use	:\$					days at \$	per day
Rental (if any)						days at \$	per day
LTA / GIA Search Fee	:\$						- 7.44
Others:	:\$		H T				
	:\$						
Final Settlement Sum (Global Sum)	:\$	2,500.00					
Payee Name: Ban Hock Hin Co	o. Pt	e Ltd		nds.		T. PAGE	
Is Third Party Workshop GIA Registered		X] YES []	NO	(Kindly inc	dicate below	1)	
A) For Non GIA Registered	Works	hop:	Agreed	Liability	(%)	
For GIA Registered Workshop:			BOLA Applicable: Yes/ NO BOLA Scenario No: 27				
BOLA Liability: 100	(%)		Assesse	ed Liability (*):	(%)	
* Assessed Liability to be	filled	only for chain collisi	ons and j	for cases wh	ere BOLA d	oes not apply.	
Remarks:							

NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT. 1.
- 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:

Name of Representative:

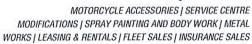
16/09/200

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

Name of Witness:

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

Date: 16/09/2020





Customer:

AXA INSURANCE SINGAPORE PTE LTD

TAX INVOICE

GST Reg No.: M2-0010542-7

Invoice No.

: DLCR40104901-I11329

Invoice Date

: 22/08/2020

Payment Due Date : 21/09/2020

MOTOR CLAIMS DEPT

CLAIM NO.

: 11329

POLICY NO.

VEHICLE NO.

: FBG3380Y

MAKE/MODEL

: SYM / MAXSYM 400I CVT

<u>Amount</u> **Description** <u>S/N</u> \$2,300.00 LUMPSUM REPAIR

\$2,300.00 SUB TOTAL

GST @ 7 %

\$161.00

GRAND TOTAL (SGD)

\$2,461.00

Validity: 30 days

For & on Behalf of

BAN HOCK HIN CO PTE LTD

Printed by: RAYMOND





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-19-068552

Date of Request:

02/05/2019

Your Ref No:

Online Purchase

Ban Hock Hin Co. Pte Ltd No. 6 Defu Lane 4 Singapore 539410

Dear Sir/Madam,

Enquiry Date

02/05/2019

Enquiry By

Tan Chok Lok

AXA Insurance Pte Ltd

TP Vehicle No. **Accident Date**

FBP312S 30/04/2019

Enc

Enquiry Result					
TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.		
FBP312S	AXA Insurance Pte Ltd	24/01/2019-23/01/2020	6338 7288		

24/01/2019-23/01/2020

Thank You.

FBP312S

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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Our Ref No:

GR-19-068552

Date of Request:

02/05/2019

Your Ref No:

Online Purchase

Ban Hock Hin Co. Pte Ltd No. 6 Defu Lane 4 Singapore 539410

Dear Sir/Madam,

Enquiry Date

02/05/2019

Enquiry By

Tan Chok Lok

TP Vehicle No. Accident Date

FBP312S 30/04/2019

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



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 67414108

01 July, 2019

LOW KHEE HENG BLK 100 BEDOK NORTH AVENUE 4 #10-1916 SINGAPORE 460100

Dear Sir/Mdm,

OUR REF : CC4/ASM19008197/Upa3

YOUR REF: FBP 312S

ACCIDENT INVOLVING FBP312S AND FBG3380Y ALONG BEDOK NORTH AVE 4

TOWARDS UPPER CHANGI ROAD ON 30/04/2019

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 third-party claim(s) from **Ban Hock Hin Co Pte Ltd** acting on behalf of the owner of **FBG3380Y** against your motor insurance policy.

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

As Insurers, they 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 intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 7 days from the date of this letter jimmychen@lkkauto.com within 1 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter jimmychen@lkkauto.com within 2 days from the date of this letter <a

- 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)
- Copy of the letter of authorization
- 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 cst@axa.com.sg or deliver it by hand to AXA Customer Care Centre.



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 67414108

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), we 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 as at 6841 2928 or jimmychen@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Jimmy

Case Handler DID: 6841 2928 FAX: 6741 4108

Email: jimmychen@lkkauto.com

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