

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

02 JULY 2019

TAN POH HENG JUSTINA 314A PUNGGOL WAY #16-617 SINGAPORE 821314

Dear Sir/ Mdm

OUR REF

: CC4/ASM19008748/Apa3 // S9M01NIQ

: SKJ 4079P YOUR REF

ACCIDENT INVOLVING SKJ 4079P/ SCU 1918A AND OTHERS ALONG/AT ALONG KPE

TOWARDS MCE (4.9KM) ON 15/05/2019

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 third party claim(s) from CHEW MOTOR PTE LTD acting on behalf of the owner of SCU 1918A against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

Please be informed that your No Claim Discount (NCD) may be affected as a result 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. You 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 chewht@lkkauto.com within 7 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)
- 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.

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 Ms Chew Hsiao Tong(LKK Handler) 6742 3197 or chewht@lkkauto.com Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Chew Hsiao Tong Case Handler

DID: 6742 3197 FAX: 6741 4108

EMAIL: chewht@lkkauto.com

cc AXA INSURANCE PTE LTD

LETTER OF AUTHORISATION

Chew Motor Pte Ltd Kaki Bukit Avenue 6

NRIC No.:

Date:

Blk 1 #01-11 Singapore 417883 Dear Sir. SCUIGIBA I/We, the registered owner/driver of vehicle registration no: have involved in the above accident. I/We hereby authorize **Chew Motor Pte Ltd** to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our , to act on my/our behalf in respect of the above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis. I/We undertake to co-operate fully with you and our solicitors to ensure that claim is successful. I/We also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence. Your kind co-operation in this matter will be much appreciated. Yours truly, Owner's Signature (Company's stamp if applicable) Name:



Vehicle No

WITHOUT PREJUDICE to

Note: This Notice supersedes any inconsistencies found in this Discharge Vouchar]

AXA THIRD PARTY DIRECT SETTLEMENT

SKJ 4079P

(Insd veh)

	SCU 1918A		Model: B.M.VV.	520I LED NAV	ILEU NAV	
Date of Accident/ Time:	15/05/2019					
		1100000				
Repair Estimate	\$ 4	0,488.59				
Final Repair Cost	\$			& days at 5 90	> per day	
cass of Use				days at 5	per day	
Rental (if any)				3.7		
LTA / GIA Search Fee	S					
Others						
Final Settlement Sum (Glo		50.00				
Payee Name : CHEW MO Is Third Party Workshop G	IA Registered? []	YES [X] NO	(Kindly Indicate b	elow)	,	
Eer Non G	A Registered Workshop:		Liability 100	(%)		
For GIA Re	gistered Workshop:	BOLA A	Applicable: Yes/ No	BOLA Scenario No:		
BOLA Liab			ed Liability (*):			
† Assessed	Liability to be filled only fo	or chain collisions and	for cases where BO	LA does not apply		
Remarks:						

NOTE:

- 1. 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) a/sing from this accident.

e confirmenthat we have the authority of our client to act for and on their behalf

Chona

Signature of workshop representative / Workshop stamp

Name of Pepresentative: GUM

Signature of

Name of A) Date

Name of Witness: Sulay. Chola

accident.

Signature of Witness / Workshop stamp (if applicable)

> Back to OneMotoring

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

15 May 2019 / 13:02:32

Receipt Date/Time: 15 May 2019 / 13:02:32

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190515-001689

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SKJ4079P As at 15 May 2019/09:15:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SKJ4079P				
Enquiry Fee 20190515130133661342		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20190515130143625	Direct Debit: eNE (Internet Banking		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee

Print Receipt

OK

Save as PDF