

INS. CASE OWNER:

KH

CC 4/ ASM 1900 7853 / Kga3/1/1

IDAC:

119364

Surveyor:

Kenneth

DOI:

10/6/19

Date / Time:

4/6/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHO 5431R

Claim No.:

59m01PB8

Name of Insured:

TLC SRS Pte

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

S1000.00

D.O.A.:

31/5/19

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLR3810y



INSRS:

WSP:

Tel:

Liability:

RMKS:

Hui Yang.



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

SLR3810y. x.

SHO 5431R - call LOR 170 losses / Kwaga? : 009. 31/5/19

18/6

Seek instruction from Richard to PS base on 50/50. Both party get no AVE.

23/6/19

50% settlement email send tp.

25/6/19

call mandate (pending approval) - approved.

31/7/19

offer GTS \$290.00 (pending acceptance)

Still at GTS \$290, Dr send (pending Dr in)

Dr in (the pass Admin to close).

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by: Kenneth.

Repair Cost: PIP

S\$ 480.00

(1 - days) Reduction: \$1500.80 % 76

Email

Call

FINAL SETTLEMENT

Date/Time: 31/7/19 12:30pm

Confirm with: bel

Email

Call

Final Liability:

%

50

(Agreed / Assessed) BOLA S/N No.:

19

If NO or B 28, Ass. Lin:

Repair Cost: \$517.00

S\$ 256.80

(w/ass)

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

25.00

(\$ 50 x 1 days)

Loss of Income (LOI):

S\$

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

7.45

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

Total:

S\$ 289.25

Global Sum S\$: \$290.00

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

TP

P350/-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

290.00

Name 1:

Hui Yang motor Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

ASS. REC. BY:

REF:

AKH/

9853/kg

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Rear

R/Bal.

L/Bal.

D.O.A.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

1

File pass to

Date/Time, File Pass to?

☐

: Prelf. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

Reg No. 201629438M

31/05/2019

Owner: SKYWAY MOTOR PTE LTD

ESTIMATE TO REPAIR HONDA VEZEL - SLR3810Y

1pc	front bumper	N S	927.50	X
1pc	front bumper RH side retainer	J L	28.50	X
1pc	front LH fender protector	M	195.00	X

less 20%

wiring
spray painting
labour charges
Total

\$ 1,151.00
\$ 230.20
\$ 920.80

m \$ 60.00 X
\$ 500.00 400
\$ 500.00 80
\$ 1,980.80

LIK Auto Consultants hereby notify the Repairer of the following:

- To rectify/replace/spray painting
- To display damaged part/during rectifying
- Parts prices are subject to cost inspection
- Third party survey is on a "Without Prejudice" basis
- No legal condition(s) is allowed
- Supplementary work(s) must be itemized and subject to final approval from Insurance Company

Acknowledged by Repairer:
Signature: _____
Date: _____



AKH
(LKK)
10/06/19
Monday
after 11am


Not withain
Penny After Pain
84802 1 day

◀ Service Request Details

Claim

S9M01PB8

Reference

None 

Loss Date

31 May 2019

Report Date

4 Jun 2019 8:52:00 AM

Request Date

4 June 2019

Due Date

12 June 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

P. Bel

T: 10.03 a.m

V: Out.

E ✓

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SLR3810Y

(FIGURE)

VEZEL HYBRID 1.5

Service Address

...

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD

No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

ANG Richard

richard.angbs@axa.com.sg

Additional Instructions

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)[New Message](#)

Catherine Chong (LKK Auto)

From: Hui Yang Motor <hui_yang_motor@hotmail.com>
Sent: Monday, 3 June, 2019 4:42 PM
To: SG AXA Insurance SM AXA SGP - Motor Survey
Subject: TP Claim for SLR3810Y against SHD5431R / DOA: 31/05/2019
Attachments: SKM_C28719060316520.pdf

Importance: High

Categories: Santosh

Dear Sir/Mdm,
Please refer to the attached Estimate and GIA Report.

Kindly advise us on the Date and Timing with regards to the Surveying of the Vehicle to be in our premises.

Thank you & Regards,
Bel
Tel: 6451 5752



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 25/7/2019

Survey Details:

Date of loss	31-May-19
Date of appointment	4-Jun-19
Date of survey	10-Jun-19
Location of survey	HUI YANG MOTOR PTE LTD

Vehicle Details:

Claim Type:	THIRD PARTY CLAIM
Vehicle number	SLR3810Y
Make and Model	HONDA VEZEL HYBRID 1.5X AUTO
Date of registration	14-Aug-17
Parf Rebate	
Market Value	\$ 76,000.00
Parf Rebate	\$ 46,718.00
Nett Loss	\$ 29,282.00

Repair details:

Initial Estimate	1,980.80
------------------	----------

Proposed/Revised repair cost:

Parts	\$ -
Check items (estimate)	\$ -
Labour	\$ 480.00
Total	\$ 480.00
Lump Sum(if applicable)	\$ -

Number of days for repair	1
---------------------------	---



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

--

Mandate:

Liability(TP)	50%	
Proposed repair cost	\$ 256.80	W/GST
Loss of use	\$ 40.48	1day x \$80.95
Loss of rental	\$ -	
Loss of income	\$ -	
LTA search fees	\$ 7.45	
Others	\$ -	
Proposed Total	\$ 304.73	



<MANDATE IA> - S9M01PB8 {ACCIDENT INVOLVING SHD 5431R (OI) & SLR 3810Y (TP) ON 31/05/2019}

Type

Question

Message

LIABILITY: 100% INFORMED OI ABOUT TP CLAIM AND NCD ISSUE. AGREED TO SETTLE AT BEST AT 50%. WE SEEK YOUR MANDATE AT \$304.73(CLAIMING LOU). MANDATE IA UPLOADED IN SMARTCLAIM. KINDLY LET US HAVE YOUR APPROVAL/INSTRUCTION. THANKS - CECILIA

Reply

<< **Re:<MANDATE IA> - S9M01PB8 {ACCIDENT INVOLVING
SHD 5431R (OI) & SLR 3810Y (TP) ON 31/05/2019}**

Type

🔗 Question

Message

Hi, pls proceed as per mandate. TY.

Reply

輝陽汽車有限公司
HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
Reg No. 201629438M

Date: 01/07/2019

AXA Insurance Singapore Pte Ltd
Motor Claims Department
8 Shenton Way
#27-01 AXA Tower
Singapore 068811

**RE: ACCIDENT INVOLVING SLR3810Y & SHD5431R ON 31/05/2019
ALONG SIN MING AVENUE TOWARDS BISHAN**

SETTLEMENT OF OUR CLAIM FOR SLR3810Y

Parts By Parts repair cost as recommended by surveyor (TP0644)	\$ 513.60
01 days Loss of Use	\$ 80.95
LTA Insurance Enquiry	\$ 7.45
Total	<u>\$ 602.00</u>

*The above claim applies only to vehicle damage and expressly exclude all personal injuries and other consequential loss.

Please let us have your reply soonest possible, thank you.

Best Regards,
Marco Neo
HUI YANG MOTOR PTE LTD
DID: 64515752
Fax: 64514658
email: hui_yang_motor@hotmail.com

LEASE AGREEMENT NO.: UB00387-01
DATE: 28/01/2019

Schedule

This is a Rental Agreement made between us, SKYWAY MOTOR PTE LTD (hereinafter referred to as "the Company" which shall include its successors-in-title and assigns), identified as the Lessor and having our registered address 400 Orchard Road #15-06 Singapore 238875 AND YOU, the person(s) identified as the Hirer below include (which shall include your successors-in-title and assigns):-

NAME OF HIRER(S) (IN FULL) : SHASHITRAREN SUPPIAH
NRIC/PASSPORT/RC/RB NO. : S7036037C
ADDRESS : BLK 104C CANBERRA STREET #15-517 S(753104)
TELEPHONE : 85727414
PERSON IN CHARGE :

NAME OF DRIVER 1 (IN FULL) :
NRIC/PASSPORT NO. :
DATE OF BIRTH :
DRIVING LICENCE NO :
ISSUE / EXPIRY DATE :
COUNTRY OF ISSUE :

NAME OF DRIVER 2 (IN FULL) :
NRIC/PASSPORT NO. :
DATE OF BIRTH :
DRIVING LICENCE NO :
ISSUE / EXPIRY DATE :
COUNTRY OF ISSUE :

NAME OF DRIVER 3 (IN FULL) :
NRIC/PASSPORT NO. :
DATE OF BIRTH :
DRIVING LICENCE NO :
ISSUE / EXPIRY DATE :
COUNTRY OF ISSUE :

1. DESCRIPTION OF VEHICLE ("THE VEHICLE")

REGISTRATION NO. : SLR3810Y
MAKE / MODEL : HONDA VEZEL 1.5 HYBRID X
COLOUR : BLACK
ENGINE NO. : LEB5954282
CHASSIS NO. : RU31254265

COE & PARF :

TYPE. : PASSENGER / COMMERCIAL*
(*delete where inapplicable)

Date, Time and Mileage for Collection: _____ (date) _____ (time) _____ (mileage)

Date, Time and Mileage for Return: _____ (date) _____ (time) _____ (mileage)

Petrol Out : Empty / ¼ tank / ½ tank / ¾ tank / Full*
(Vehicle must be returned with same level of petrol)

2. **PERIOD OF LEASE ("LEASE PERIOD")**

Daily/Weekly/Monthly/Yearly* Basis

From 01/02/2019 ("Commencement Date") to 31/07/2019 ("End Date")

Thereafter, this lease will be automatically renewed on the same terms and conditions as set out in this Agreement for further successive periods of one (1) day/week/month* each, on a daily/weekly/monthly* basis, unless terminated earlier in accordance with the terms of this Agreement.

* delete where not applicable

3. **LEASE CHARGES**

Amount S\$566.65 per day/week/month/year* inclusive of Goods and Services Tax ("GST") (collectively, "Lease Charges") payable in advance on the Friday of each day/week/month/year* ("Payment Date").

In the event the Payment Date falls on a non-Business Day, the Hirer shall effect payment of the Lease Charges on the Business Day falling immediately prior to the Payment Date. GST is chargeable separately and the Hirer shall pay the prevailing GST together with the Lease Charges. Time of payment shall be of the essence.

* delete where not applicable

4. **INCENTIVE**

\$500 Completion Bonus (Upon Total Fulfilment Of Contract)

Free Rental: 14 days

5. **DEPOSIT**

Amount: S\$1000.00 (exclusive of GST)

6. **INSURANCE, ROAD TAX AND MAINTENANCE**

The Company will be responsible for the road tax, maintenance and servicing of the Vehicle. You agree to pay the sum of S\$ NIL on Commencement Date for the Company to arrange the following insurance coverage for the Vehicle. The full details of the insurance policy will be provided to you and you undertake to strictly comply with the terms and conditions of the insurance policy.

Excess for Own Damage : S\$800.00 (exclusive of GST)

Excess for Third Party Injury, Death and Damage : S\$ NIL (exclusive of GST)

Windscreen Excess : S\$200.00 (exclusive of GST)

Damage or tampering of Vehicle decal : S\$100.00 (exclusive of GST)

For travel in Malaysia

Excess for Own Damage : S\$3,000.00 (exclusive of GST)

Excess for Third Party Injury, Death and Damage : S\$3,000.00 (exclusive of GST)

For drivers who do not satisfy any of the criteria under paragraph 7(k) of the Terms and Conditions

Additional Excess for Own Damage : S\$3,500.00 (exclusive of GST)

Additional Excess for Third Party Injury, Death and Damage : S\$3,500.00 (exclusive of GST)

7. **PURPOSE OF USE**

Personal social domestic use / Private hire eg. Uber or Grab Taxi / Others*

If others, please specify : _____

* delete where not applicable

8. **EARLY TERMINATION**

You shall be liable to the Company for early termination as provided under the Terms and Conditions annexed hereto.

9. **PAYMENT**

For cheque payments, please issue the cheque to the Company and indicate the vehicle number on the back of the cheque. The cheques must be delivered to the Company's registered address as stated above and any payment sent to the Company by post will be at your own risk.


The Agreement herein comprises the Schedule above and the Terms and Conditions annexed hereto. The Hirer confirms that he has read, understood and agreed to the terms of this Agreement.

IN WITNESS whereof the Parties hereto have set their hands the day and the year first above written.

Signed by the Hirer

Signed for and on behalf of
SKYWAY MOTOR PTE LTD


Name: **SHASHITRAREN SUPPLAH**
NRIC: **S7036037C**
Company Stamp:


Name: **Tan Eileen**
Designation:
Company Stamp:



Signed by the Additional Driver

Name:
NRIC:
Company Stamp:

Signed by the Additional Driver

Name:
NRIC:
Company Stamp:

Cecilia Chong (LKK Auto)

From: Cecilia Chong (LKK Auto)
Sent: Tuesday, 18 June 2019 4:11 PM
To: 'claims'
Cc: jasminetan@transcab.com.sg; Ng Wai Yin; alicelim@ava-ins.com; diskayao@ava-ins.com
Subject: Your ref: SHD 5431R (Our ref: CC4/ASM19009853/Kga3) *** ACCIDENT INVOLVING SHD 5431R & SLR 3810Y ON 31/05/2019 ***

18 JUNE 2019

Transcab Taxi
Singapore

Dear Sir,

OUR REF : CC4/ASM19009853/Kga3

YOUR REF : SHD 5431R

ACCIDENT INVOLVING SHD 5431R & SLR 3810Y ALONG/AT SIN MING AVE TWDS BISHAN ON 31/05/2019

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 HUI YANG MOTOR PTE LTD acting on behalf of the owner of SLR 3810Y against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your driver's favour as it is a head-to-rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of S\$5,000/- is attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim. The applicability of the excess is as follows:

- 1) Any settlement equal to or above the excess, you shall be liable to make the payment of \$5000/-; or
- 2) Any settlement below the excess, you shall be liable for the amount settled.

We shall keep you informed of the third party claim settlement and thereafter kindly let us have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by us for the above subject matter, we expressly reserve all our rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

As Insurers, 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 AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following 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. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to AXA immediately. You may email it to cst@axa.com.sg / ceciliachong@lkkauto.com or deliver it by hand to our 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), 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.

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

"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)

AUTHORIZATION LETTER

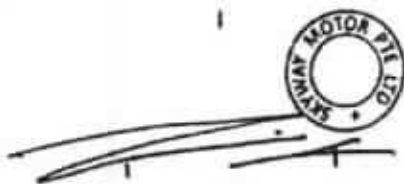
TO WHOM IT MAY CONCERN

I/We, Skyway Motor Pte Ltd hereby declare and agree to use the address of **Hui Yang Motor Pte Ltd**, that is at Blk 176 Sin Ming Drive, #04-02 Sin Ming Autocare Singapore 575721 in all our correspondences with any party in connection with our claim.

Arising from an accident involving our motor vehicle registration number SLR3810Y and other vehicles registration number SHD5431R along Sin Ming Avenue towards Bishan on 31/05/2019.

I/We, further grant authority to Messrs **Hui Yang Motor Pte Ltd** or any of their representatives to open all my/our letters and to negotiate my/our claim on my/our behalf.

I/We wish to inform you that you could issue the cheque payment in favour of my/our repairer Messrs **Hui Yang Motor Pte Ltd**.

A handwritten signature in black ink is written over a circular stamp. The stamp contains the text "SKYWAY MOTOR PTE LTD" around the perimeter and a small star in the center.

.....
Signature of registered owner and/or Company's stamp



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 5431R (Insd veh)	Model: HONDA VEZEL
	SLR 3810Y (TP veh)	
Date of Accident/ Time:	31/05/2019 / 13:35	

Repair Estimate	: \$	2,119.46	
Final Repair Cost (WGST)	: \$	250.80	
Loss of Use	: \$	25.00	1 days at \$ 25.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
Final Settlement Sum	: \$	290.00	(global sum)
Payee Name: HUIYANG MOTOR PTE LTD			
Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability: 50 (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____	
	BOLA Liability: _____ (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

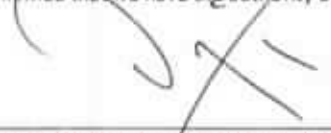



NOTE:

- 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		Signature of Witness / Workshop stamp (if applicable)	
Name of Representative: <u>MOHAMMAD EK</u>		Name of Witness: <u>Boi</u>	
Date: <u>31/07/19</u>		Date: <u>31/07/19</u>	
 <u>KSL</u>			
Signature of AXA's surveyor/representative:			
Name of AXA's surveyor /Representative:			
Date: <u>28/2019</u>			

HUI YANG MOTOR PTE LTD

Bill To:

AXA Insurance Singapore Pte Ltd
Motor Claims Department
8 Shenton Way
#27-01 AXA Tower
Singapore 068811

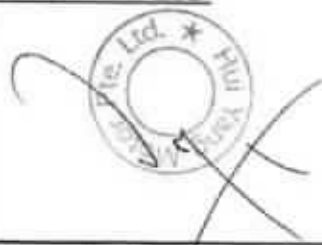
TAX INVOICE

TP Claim Invoice No: **TP0644**
Bill Date: **01/07/2019**

	Description	Amount
	Date of Accident : 31/05/2019 Owner : SKYWAY MOTOR PTE LTD Vehicle No : <u>SLR3810Y</u> Make & Model : <u>HONDA VEZEL HYBRID</u>	
	<u>Parts By Parts repair cost as recommended by surveyor</u>	\$ 480.00
	Sub-Total :	\$ 480.00
	Add 7% GST :	\$ 33.60
	Total Amount SGD :	\$ 513.60

Reg No.:201629438M

GST No:201629438M

HUI YANG MOTOR PTE LTD

Authorised Signature

Hui Yang Motor Pte Ltd

Sin Ming Autocare Blk 176 Sin Ming Drive

#04-02 Singapore 575721

Email: hui_yang_motor@hotmail.com

H/P: 98625891 Office: 64515752 Fax : 64514658

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 03 Jun 2019 / 16:35:06

Receipt Date/Time : 03 Jun 2019 / 16:35:06

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190603-002628

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 - SHD5431R As at 31 May 2019/13:35:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHD5431R Enquiry Fee 20190603163414003357	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				
	xxxxxxxxxxxx7046	Credit Card: Visa/MasterCard		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 may apply.



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
AXA INSURANCE PTE LTD		Ref : CC4/ASM19009853/Kga3q2	
8 SHENTON WAY #24-01		Date : 13-08-2019	
AXA TOWERSINGAPORE 068811		Code : ASM	
ATTN: RICHARD ANG			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHD 5431R	Veh. Inspected	SLR 3810Y
Policy No.	VPX/P1680520	Coverage (\$)	0.00
Claim No.	S9M01PB8	Excess (\$)	0.00
Assign From		Assign Date	04/06/2019
2. Vehicle Particulars & Condition			
Make & Model	HONDA VEZEL (A)	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	RU31254265	Colour	METALLIC BLACK
Odometer	167317	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	DAVANTI	8 mm
L/H Front Tyre	215/60 R16	DAVANTI	8 mm
R/H Rear Tyre	215/60 R16	DAVANTI	8 mm
L/H Rear Tyre	215/60 R16	DAVANTI	8 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	31/05/2019	Inspection Date	10/06/2019
Survey held at	HUI YANG MOTOR PTE LTD BLOCK 176 SIN MING DRIVE #04-02 SIN MING AUTOCARE SINGAPORE 575721		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		1 Working Days	



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TEL: 6256 3561 FAX: 6256 4315

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLR 3810Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER (CONSISTENT)	TO REPAIR SEE LABOUR	927.50	-
1	FRONT BUMPER RH SIDE RETAINER (CONSISTENT)	SERVICEABLE	28.50	-
1	FRONT LH FENDER PROTECTOR (CONSISTENT)	SERVICEABLE	195.00	-
	LESS 20% DISCOUNT		-230.20	-
			920.80	-
LABOUR				
	WIRING.	NOT NECESSARY	60.00	-
	SPRAY PAINTING.		500.00	400.00
	LABOUR CHARGES.INCLUSIVE OF THE REPAIR OF FRONT BUMPER .		500.00	80.00
			1,060.00	480.00
GRAND TOTAL			1,980.80	480.00
RECOMMENDED COST OF REPAIRS				480.00

Report Ref No. CC4/ASM19009853/Kga3q2

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Service Request Details

Claim	59401968
Reference	CC4/ASM19009853/K&Jz2 
Loss Date	21 May 2019
Report Date	4 Jun 2019 8:52:00 AM
Request Date	4 June 2019
Due Date	

Vendor Name	LKX AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions

Next Step

Wait for Aspire Invoice

Add Invoice

Vehicle Information	
Incident Vehicle Registration #	SLB3B10V
Make	TRUD HONDA
Model	VEZEL HYBRID 1.5
Service Address	

Primary Contact/Insured

Claim Handler	
ANG Richard	richard.ang@bsa.com.sg














Additional Instructions

Messages	Invoices	History	Documents	Assessment	Metrics	Notes
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Document Type	Document SubType	

+ (optional) Data provided

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LKX\Invoice 1 [1].pdf	Invoice	Surveyor/ Assessor expense	LINK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LTA SEARCH.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LKKInspection (2).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LKKAdjustment 1a (4).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 PAYMENT BREAKDOWN_EXPRESS SETTLEMENT FORM.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LTA SEARCH.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 AUTHORIZATION TO ACT FORM.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 WORKSHOP INVOICE.pdf	Invoice	Regulator	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LETTER TO OI.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LOD AND OTHER DOCUMENTS.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	25 July 2019
 PAIR CODE REBATE.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	25 July 2019
 MANDATE IA DID 25072019.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	25 July 2019
 TP EST LIST MARKED.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	25 July 2019
 TP ESTIMATE - MARKED.pdf	Reports & Statement	Estimate / Quotation	LKK AUTO CONSULTANTS PTE LTD (TP)	13 June 2019
 TP - IA.pdf	Forms / Claim Documents	Assessment	LKK AUTO CONSULTANTS PTE LTD (TP)	13 June 2019

NAME	TYPE	SUB TYPE	AUTHOR	DATE UPLOADED
 LKX SURVEY PHOTO.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANT'S PTE LTD (TP)	13 June 2019
 LKX RESURVEY PHOTO.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANT'S PTE LTD (TP)	13 June 2019
 EMAIL FROM WORKSHOP FOR TP REG.mhg	Letters and Correspondence	Others	NIKAM Santosh Pandurang	4 June 2019
 9403431R INSD GIA.PDF	Reports & Statement	GIA Report	NIKAM Santosh Pandurang	4 June 2019