

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

05 DECEMBER 2019

POH YEW GHEE BLK 336A YISHUN STREET 31 #05-03 SINGAPORE 761336

Dear Sir/ Mdm

OUR REF : CC

: CC4/ASM19010022/Agb3

YOUR REF : SJN 6971R

ACCIDENT INVOLVING SJN 6971R & SJZ 5593S ALONG/AT WOODLAND CUSTOM TOWARDS SINGAPORE ON 04/06/2019

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 CHEW MOTOR PTE LTD acting on behalf of the owner of SJZ 5593S 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 from your company
- Authorisation letter
- Rental Agreement/ Leasing Agreement
- Coloured photographs of accident scene (if any)
- COUNTER CLAIM STATUS AGAINST THIRD PARTY
- Coloured photographs of damage to all vehicles involved (If anv)
- 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.

Yours sincerely

Cecilia Chong Case Handler

DID: 6749 4274 FAX: 6741 4108

EMAIL: ceciliachong@lkkauto.com

Cc AXA Insurance Pte Ltd (Motor Claims Dept)

LETTER OF AUTHORISATION

Chew Motor Pte Ltd Kaki Bukit Avenue 6

Blk 1 #01-11 Singapore 417883

Dear Sir, Accident on 04.06.19 @ 2115hrs
Accident on
Involving Vehicles SJ2 56935 A SJH 6971K
Along Woodlands Custom Towards Singapore
I/We, the registered owner/driver of vehicle registration no: \$\frac{31256935}{256935}\$ 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 solicitor,, 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: Hg Song Well Eugene
NRIC No.: S74 ITB14C
Date: 04-06-9



WITHIUT PREJUDICE

The Charge Section

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SUN 6971				
	\$12.5600		10:0H RMW230-		
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Figure Estimatic	:5	5 11,764.19			
Final Report Cost	5	5 2,140,00 (W			
Lorsof Use			# days at 5 8000 per day		
Rental Mary				days at 3 . Inc. stay	
LTA / DIA Search Fee	- 5				
Others:	1.5	15			
The Control of the Co	.5	(3)			
Final Settlement Sum	-5	2300.00			
Payee Name: CHEW M	OTOR PTE LTD				
is Third Party Workshop	GIA Registered? [] YES	[x] NO (00	dy indicate below:		
) For Non C	ItA Registered Workshop:	Agreed Oaki	Agreed Cability 50 (NC)		
For GIA B	egistered Warkshop:	BOLA Applicable: Yes/No. BOLA Economis No. 19			
	CALLAND TV		Assessed Liability (*)		
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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.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Drily applicable to restal 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 one claim. per the NIMA rates.

We/I confirmed that this is a full and final settlement that we and or our client have/halt/has against you JAXA 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

Sanatureoff workshop representative / Workshop stamp Name of Agresentative Sukyi Chona

Date: 27-12-19

Signature of Witness / Workshop stamp (# applicable) Name of Witness RPANA 40

Signature of AXA's surveyor/representative. Name of AXA's surveyor /Representative Date