



21 June, 2019

TAN TENG SEAH
3 PASIR RIS WAY
SINGAPORE 518519

Dear Sir/Mdm,

OUR REF : CC4/ASM19010187/Kpa3
YOUR REF : SFB6666H
**ACCIDENT INVOLVING SFB6666H & SLM9108D ALONG PASIR RIS DRIVE 3 ON
08/06/2019**

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 third-party claim(s) from **Esteem Performance Pte Ltd** acting on behalf of the owner of **SLM9108D** 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 vicalpeh@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.



Auto
Consultants
Pte Ltd

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

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 us at 6841 2928 or vicalpeh@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
Email: vicalpeh@lkkauto.com

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

LETTER OF AUTHORITY

To Whom It May Concern:

ACCIDENT INVOLVING SLM 9108D & SFB 6666H along Pisir
Pis Drive 3 Towards Drive 12 on 08/06/2019 @ 09:40

I, Grab Rentals Pte Ltd Nric No. 201617200G
of 18 Sin Ming Lane #01-08 Midview City Singapore 573960
Owner of motor vehicle no. SLM 9108D do hereby appoint M/S
ESTEEM PERFORMANCE PTE LTD as my authorized representation and
_____ as my solicitors to write, to negotiate and settle my claim against
the other party/parties involved in the above mentioned accident. M/S ESTEEM
PERFORMANCE PTE LTD shall have absolute discretion to settle the matter at the best
terms.

I also confirm and instruct that any agreed settlement sum in respect of my claim be paid to
M/S ESTEEM PERFORMANCE PTE LTD and such payment will constitute a full and final
discharge of my claims.

I further authorize M/S ESTEEM PERFORMANCE PTE LTD to execute the discharge
voucher on my behalf.


Signature of Owner



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SFB 666GH	(Insd veh)	Model: TOYOTA PRIUS HYBRID 1.8CVT
	SLM 9108D	(TP veh)	
Date of Accident/ Time:	08/06/2019		

Repair Estimate	: \$	13,026.28	
Final Repair Cost (WITH GST)	: \$	3,484.03	
Loss of Use	: \$	—	days at \$ per day
Rental (if any)	: \$	349.70	5 days at \$ 69.94 per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	3,841.18	
Payee Name : ESTEEM PERFORMANCE 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 100 (%)	
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/TORTEASOR 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: Carmen Lim

Date: 29.11.19



Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Enrique

Date: 29.11.19

Signature of AXA's surveyor/representative:

Name of AXA's surveyor/Representative:

Date:

29/11/19

*The contents of this document apply to vehicle damages only
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document

CONFIDENTIAL
SCHEDULE TO VEHICLE RENTAL AGREEMENT

Date:	02/05/2018	Vehicle Rental Agreement No.	12805
Renter Details		Additional Driver (if any)	
<input checked="" type="checkbox"/> Name	Teck Koon Ong	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Address	Blk 476A Pasir Ris Drive 6 #12-638	<input checked="" type="checkbox"/> Address	
<input checked="" type="checkbox"/> Date of Birth	02/23/1965	<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> NRIC/Passport No.		<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Driving License No.	317129301	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> Telephone No.	858608553	<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Mobile No.		<input checked="" type="checkbox"/> Mobile No.	
Vehicle Description		Additional Driver (if any)	
<input checked="" type="checkbox"/> Vehicle No.	SLM9108D	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Make/Model	TOYOTA Prius	<input checked="" type="checkbox"/> Address	
Rental Period		<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> Minimum Rental Period	377	<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Date/ Time Checked Out	02/05/2019	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> No. of Days	157	<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Expected Date/Time of Return	02/17/2020	<input checked="" type="checkbox"/> Mobile No.	
<input checked="" type="checkbox"/> Actual Date/Time of Return	07/12/2019		
Rental Charges* & Deposit			
<input checked="" type="checkbox"/> () RR Rental Charges/Day	Per day @ S\$85.00 Per week @ S\$595.00	Deposit Received	S \$1,500.00
<input checked="" type="checkbox"/> (X) ER Promotion Rental Charges/Day	Per day @ S \$69.34 Per week @ S\$485.35	Total Amount Received*	S \$10,952.83
<input checked="" type="checkbox"/> (X) CDW Charges/Day	Per day @ S\$4.28 Per week @ S\$29.96	* Inclusive GST	
Rental Period	377 days / 22 weeks	Total Rental Charges	S \$11,453.43

Insurance Matters (Accident/Theft)				
Liability Assessment / Nature of Incident	Non-Refundable Excess Payable by Renter*			Rental Charge / Replacement Vehicle
	Section 1 (Own Damage)*	Section 2 (3 rd Party Damage if applicable)*	Renter or authorised driver(s) is below 26 years of age	
3 rd Party Fault	S\$2,140.00	S\$2,140.00	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Own Fault (inclusive of accidents in Malaysia)	S\$2,140.00	S\$2,140.00	S\$1,605.00	No waiver of Rental Charges & no replacement vehicle provided
Act of God	S\$2,140.00	Not applicable	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Stolen Vehicle	S\$2,140.00	Not applicable	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Damage to Windscreen	S\$107.00	Not Applicable	Not Applicable	No waiver of Rental Charges & no replacement vehicle provided
Unreported or late reporting of accidents	Renter is liable for 3 rd parties & own vehicle repair costs associated with the accident			No waiver of Rental Charges & no replacement vehicle provided

* excess payable is accumulative & inclusive of GST

Payment Method			
<input checked="" type="checkbox"/> Driver Wallet		<input type="checkbox"/> Cash	S\$
<input type="checkbox"/> Credit Card		<input type="checkbox"/> Debit Account	
Type		Bank Name	
Card No.		Account No.	

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I, the Renter, agree that the Lessor may collect, use & disclose my personal data, as provided in this Schedule &/or pursuant to the Agreement from time to time, including my vehicle location information (through various channels and methods such as through the use of telematics technology), for the following purposes in accordance with the Personal Data Protection Act 2012 & the Lessor's group Privacy Policy (available at www.grab.com/sg/privacy/):

- (a) administration of the vehicle rental under the Agreement;
- (b) to help maintain the safety, security and integrity of the products and services of the Grab group;
- (c) to improve and enhance the products and services of the Grab group;
- (d) to administer the driver-partner relationship between the Grab group and myself;
- (e) for internal tracking, analysis and administrative purposes;
- (f) to communicate with me; &
- (g) for the Lessor to comply with its obligations under law.

☒ Further, I understand that my personal data may be used for marketing purposes by the Lessor, its affiliated companies or their partners; & I hereby consent to receive marketing & promotional materials by telephone, SMS or e-mail.

Additional Notes:

Where the Renter & all authorised drivers (each of which hold a valid PDVL or TDVL) are 26 years of age or older, the Renter shall enjoy the following Discount:

Renter shall only be liable to pay S\$535.00 in insurance excess (for each section) instead of the excess amount indicated in the Insurance Matters table above (Sections 1 & 2 ONLY) PROVIDED THAT the Renter fulfills all of the following:

- fulfilment of Minimum Rental Period
- timely payment of all Rental Charges at all times
- timely reporting of all accidents, thefts & other incidents in accordance with the Agreement
- there are no accidents, thefts or other incidents occurring within the first week of rental
- the Renter at all times is in full compliance with the Agreement & any other undertakings & arrangements entered into with Lessor or its affiliated entities

("Qualifying Incident").

The Lessor may at its sole discretion allow or disallow an incident to count as a Qualifying Incident.


The above Discount may be cancelled at any time at the Lessor's sole discretion. In the case of cancellation, the CDW Charges rate shall no longer apply & instead the ER Promotion Rental Charges rate (only) shall apply (subject to the relevant terms & conditions being continually fulfilled in order for the ER Promotion Rental Charges rate to apply), & the Lessor shall hold to the credit of the Renter the amount comprised in the CDW Charges (where paid) ("Credit Amount"). The Credit Amount may be applied by the Lessor to satisfy any & all costs & payments due to the Lessor under the Agreement.

Subject to Renter's fulfilment of Minimum Rental Period, Renter shall enjoy the following Discounts:

[insert description of promotion(s) &/or refer to relevant section above if already described above]

Agreement

The Renter has read, understood & agrees with all terms & conditions of this Agreement.



Renter's Signature/Stamp
Date:



Authorised Signatory/Stamp
Grab Rentals Pte Ltd

Land Transport Authority

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

Print Date/Time : 10 Jun 2019 / 10:03:19
Receipt Date/Time : 10 Jun 2019 / 10:03:18

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190610-000505

Previous Receipt No. :

S/N Item Description/
Business Transaction Reference
No.

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SFB666H
As at 08 Jun 2019/09:40:00
Insurance Co: AXA INSURANCE PTE LTD
1 Insurance Enquiry - SFB666H
Enquiry Fee
20190610100240893880

	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			
XXXXXXXXXXXX5823	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.