

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

20 JUNE 2019

20

TAN SHIN KIONG TEORY Blk 348C Yishun Avenue 11 #12-583 Singapore 763348

Dear Sir/Madam,

OUR REF

: CC4/ASM19010757/wb3

YOUR REF

: SLQ 4086U

ACCIDENT INVOLVING SLQ 4086U AND SLU 8753E ALONG CTE TOA PAYOH TO PIE TUAS ON 22/02/2019

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 Team AutoPro Pte Ltd, acting on behalf of the owner of SLU 8753E against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided to the Third-Party vehicle SLU 8753E. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected because 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to <a href="mailto:vicalpeh@lkkauto.com">vicalpeh@lkkauto.com</a> within 7 days from the date of this letter <a href="mailto:if not provided at AXA's reporting centre">if not provided at AXA's reporting centre</a>. 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)



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 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 6841 2928 or email us at vicalpeh@lkkauto.com.

Please quote the 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: vicalpeh@lkkauto.com

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

Team AutoPro Pte Ltd

CRN

201811621K

located at

385 Sin Ming Drive #01-02 Vicom Inspection Centre Singapore 575718

## Letter of Authorization & Undertaking

lri	Respect	of	Accident	Involving	my/	our	Vehicle	No:	SLUE753E
and			SLGH	08PM			and		
and							and		
@_		1	Macphei	son sh	1 6	8 8	o Ph	ET	2.00
date	d	2	2/02/2	019					

- I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
- I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
- I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and
  /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated
  amount directly to you in the form of payment cheque made in favor to
  Team AutoPro Pte Ltd.

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

- 4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
- Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
- This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

Claimant Signature & Co's Stamp (if applicable)

....

18/00



#### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLQ4086U	(Insd veh)			
	SLU8753E	(TP veh)	Model: NISSAN X-TRAIL 2.0 CVT		
Date of Accident/ Time:	22/02/2019 @ 17	30HRS			

Remarks:	*My for r	resecution my claim for w other clair	of this Discharge Vood Property Durnage & n ma arising from the sa	her is solely copyrigated me accident."			
	* Assessed Liability 1	o be filled	only for chain collisi	ons and for cases	where BOLA	foes not apply.	
	BOLA Liability:	[94]		Assessed Liabilit	y (*):	(14)	
B)	For GIA Registered V	Vorkshop:		BOLA Applicable	Yes/No B	OLA Scenario No	
A)	For Non GIA Registe	(%)					
	ty Workshop GIA Registe		1 YES 1	NO (Kindly	indicate belo	w)	
14.117.417.417.41	e : TEAM AUTOPR		5,860.00				
Final Settle	ment Sum	15	F 000 00				
Others:		- 5					
LTA / GIA Search Fee		5	21.45				
Loss of Use Rental (if any)			840.00			7 days at 5120	
Final Repair	to consent	- 5	5,000.00			days at 5	per day
Repair Estir	***************************************	5	8,965.58				

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.
- 3. 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 Witness Pearly And

09/03/2010

TGL

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

Date: 69/-3/670

Date:

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22 Telephone: +65 6860 4888 - axa.com.sg

# TEAM

160 Sin Ming Drive #01-14 Sin Ming AutoCity Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956

teamautoffice@gmail.com / teamautopl@gmail.com

## THIS IS YOUR INVOICE

INVOICE DATE:

24-Jun-19

INVOICE NOS:

TAP8753E-113/0281

Your Reference:

SLU 8753E

Our Reference:

SMJ 548E, SKK 2185Z

Billed To:

Andy Yeong Inn Loong

INVOICE TOTAL IN SGD

Address:

685A Choa Chu Kang Crescent #10-274 S'68168

1.260.00

Invoice Type:

Rental

DESCRIPTION

SMJ 548E, SKK 2185Z

AMOUNT (S\$)

1,260.00

Rental Rate Per Day:

Leasing of Vehicle Number:

\$180.00

Rental Duration:

7

Commencement Date:

17/6/2019

Ceasement Date:

24/6/2019

Discount

\$

Amount Due

1,260.00

#### COMMENTS

- 1. Total payment due in 30 days.
- 2. All Cheques must be made payable to TEAM AUTOPRO PTE LTD.
- 3. Please include our invoice number at the back of your cheque.
- Free Upgrade

For Team AutoPro Pte Ltd

Signature & Stamp

PAYMENT DETAILS

THANKYOUFORYOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms) Page 1 of 1



## RENTAL AGREEMENT

RA/201906/ 112

HIRER'S PARTICULAR		Vehicle No / Model Rental Vehicle No / Model					
Name: Andy Seon	u bur Leong	SLM8753E NIXTON SMISHER HICRY					
NRIC/Passport No: ST 70	19897	Date / Time Out: Date / Time In:					
Driving Licence No:	Exp	17/06/14 11 50AM 18/06/19 10 20am					
Address: 68 PA China	The state of the s	Fuel Tank Level OUT IN					
#1c-274 S		K to S					
Tel: 8157 6066		1/2					
ADDITONAL DRIVER'S PARTICULAR	(AUTHORIZED DRIVER)						
Name: NRIC/Passport No:		RENTAL CHARGES TOTAL SS					
Driving Licence No:	Exp:	Days @ 180 per days \$ 180					
Address:		Weeks @ per week					
		Months @ per month					
Tel: (A) - ACCIDENTS (D) - D		Additional Payable: \$180					
		DEPOSIT AMOUNT PAID DEPOSIT AMOUNT REFUNDED / Date  Mode of Payment					
		ADDITIONAL REMARKS					
Physical Damage Excess		nent HIRER'S DECLARATION: I/WE agree to the terms and conditions above					
Singapore - Own Damage Singapore - 3rd Party Damage Malaysia ( If applicable)  For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$2,000 \$2,000 \$8,000 \$3,000 ( Additional )	and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.					
IMPORTANT NOTE:  1. The person(s) signing this rental Agreement as severally with the firm, person or organization, the name he/they might sign.		x fry 17th Jun 2019					
Only persons above 23 years of age with more licensed and signing this agreement may drive tr		HIRER Signature / Date					
<ol> <li>Vehicle is strictly for use in Singapore only and without the pior written consent of TeamAutoPr</li> <li>Use of vehicle for illegal purposes (e.g. in contrafficking, smuggling), commercial purposes (e.g. strictly prohibited.</li> </ol>	o Pte Ltd. nection with theft, drug pedalling or g. taxi, uber, grab car / car pool usage) is	TEAM S					
<ol><li>In case of accident, the hirer shall report to Te bodily injuries, a police report must be made wit</li></ol>		Authorized Signatory On Behalf of TeamAutoPro Pte Ltd					



## RENTAL AGREEMENT

RA/201966/113

HIRER'S PARTICULAR	Vehicle No / Model Rental Vehicle No / Model								
Name: Andy Yeary Inn Loony				SLU 8753E N-L			SKK 2/852 CHU		
NRIC/Passport No: S77027895				Date / Time Out:			Date / Time In:		
Driving Licence No: Exp.			18	18/06/14 10.20 84			24/6/19 10-30am		
Address: 685 A Chan Chin Keng Wessent							ank Level		
#10-274 5(681	685)				OUT			IN	
Tel: \$1576066				35	1/2	×	1	1/2	
ADDITONAL DRIVER'S PARTICU	ADDITONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)			E	F		E	F	
Name:	and the same of th		REN	TAL CHA	RGES	5		TOTALSS	
NRIC/Passport No:				Hour	@		per hour	TOTAL 33	
Driving Licence No:	alliana disensili	Exp:	6	Days	@	180	NO.ESCALATATA	\$1080	
Address:			1 -			180	per days	31000	
			-	Weeks	@		per week		
Tel:			+	Months	@		per month		
	AND ROLL OF THE		Additional Payable:						
(A) - ACCIDENTS (E	)) - DENTS (S) - SC	RATCHES				SUBTO	TAL Payable:	41080	
				DEPOSIT AMOUNT PAID DEPOSIT AMOUNT REFUNDED / Date  Mode of Payment					
Physical Damage Excess		Acknowledgement	MIDEO,	DECLARAT	non u	***			
Singapore - Own Damage	\$2,000	Actionicagement	and as	et overleaf	and de	we agree to clare that all	information give	ven on this form	
Singapore - 3rd Party Damage Malaysia ( If applicable)	\$2,000 \$8,000	1 ~ 1	are true	and accura	ite. My	Our driving	licence(s) is/are	current and	
For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 ( Additional )	the state of		tal to my/o			charge all amou	ints due on	
MPORTANT NOTE:  The person(s) signing this rental Agreeme everally with the firm, person or organization ame he/they might sign.	nt assumes full person on, the driver or all au	nal responsibility, jointly and otherized driver in whose			1	~	27		
Only persons above 23 years of age with more than 2 years driving experience, authorised, consed and signing this agreement may drive the vehicle.			HIRER Signature / Date						
Vehicle is strictly for use in Singapore only ithout the pior written consent of TeamAu	and may not be drive	en or taken out of Singapore				NA WOOD	TE SE		
Use of vehicle for illegal purposes (e.g. in a rafficking, smuggling), commercial purposes trictly prohibited.	connection with theft.	drug pedalling or car / car pool usage) is				TEA	M Pile		
in case of accident, the hirer shall report to TeamAutoPro Pte Ltd immediately. If there are				Authorized Signatory On Behalf of TeamAutoPro Pte Ltd					



RECORDS MANAGEMENT CENTRE

## GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffies 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

## TAX INVOICE

Our Ref No.

GR-19-038204

Date of Request:

11/03/2019

Your Ref No:

WALK IN NEE

TEAM AUTOPRO PTE LTD

385 SIN MING DRIVE, #01-02 VICOM INSPECTION CENTRE

SINGAPORE 575718

Dear Sir/Madam,

Your Vehicle No:

SLU8753E

Date of Accident:

22/02/2019

Place of Accident: MACPHERSON SLIP RD

Involving Vehicle No: SLQ4086U (NO REPORT) VALID TILL 12-20/3

DESCRIPTION				
E-File Search Fee (Public)	AMOUNT (S\$)			
GST Amount	14.02			
Total Amount Due (GST Inclusive)	0.98			
Total Pariodili Dibe (GST Inclusive)	15.00			

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque

### > Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

SLU 8753E Cm

Print Date/Time :

29 Mar 2019 / 18:53:59

Receipt Date/Time: 29 Mar 2019 / 18:53:59

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190329-004440 Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before	GST Amount	Amount After GST
Result of Insurance Enquiry - SLQ4086U		GST (S\$)	(5\$)	(S\$)
As at 22 Feb 2019/17:30:00				
Insurance Co: AXA INSURANCE PTE LTD				
1 Insurance Enquiry - SLQ4086U				
Enquiry Fee 20190329185314653905		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	Rounding Difference		1000	0.04
	<b>Total Amount Payable</b>			7.45
	Paid By			
	xxxxxxxxxxxxx5916	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.