

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

23 JULY 2019

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.
111 SOMERSET ROAD,
#14-05 TRIPLEONE SOMERSET,
SINGAPORE 238164

Dear Sir/ Mdm

OUR REF

: CC4/ASM19012230/Awb3 // S9M01TFU

YOUR REF

: SLN 1050H

ACCIDENT INVOLVING SLN 1050H / SLG 7449P AND OTHERS ALONG/AT FARRER RD

TWDS QUEEN WAY ON 08/07/2019

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 MG SOLUTION PTE LTD acting on behalf of the owner of SLG 7449P 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 wivianlau@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. Vivian Lau (LKK Handler) 6841 8625 or wivianlau@lkkauto.com Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Vivian Lau
Case Handler

DID: 6841 8625 FAX: 6741 4108

EMAIL: vivianlau@lkkauto.com

cc AXA INSURANCE PTE LTD

Provided always that this discharge of my claim for damages relating to the damage it my vehicle shall not prejudice or affect my further claim for general and specis damages for my personal injuries sustained in the same accident.

AUTHORIZATION TO ACT

I, ((ARELIMO ("the third party
OF 676 UPPER THOWSON ROAD #63-24 MEADONS @ PEIECE S(787136
owner of SLG 1449f (vehicle no.) hereby authorize MG SOLUTION PTE UTD
("The workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my Vehicle No. $\frac{SLG}{744}$ that was damaged pursuant to the
FROM HOLLAND PARK TOWARPS QUEENSWAY (location)
involving Vehicle No/s(LN (050H
("The accident").
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.
Dated this 10 day of (month) 20 (9 (year)
Me Me Se Sund
Signed by "the third party claimant" Signed by "the workshop" ICaroLino ELST United Thremson Road AUGUST Safe of No. 7 No. 787100

HP. 9683 1318

LETTER OF AUTHORITY

Name	: I CARELIMO
Address	: 626 UPPER THOMSON ROAD #03-24
	MEADOWS @ PEIRCE S(787130)
Contact No	:
то: АхА	insurance Pte Ltd
Dear Sirs,	
ACCIDENT IN	Slip Road from Holland Park towards Queensway
AT/ ALONG_	Slip Road from Holland Park towards Queensway
	
1/ <i>yy</i> e,	i (altimo, am/are the registered owner of
motor car no.	SLG 7449P
Please note th	at I have assigned all compensations monies due to me/us in the above said accident
accident to MI	suthorize you to release all compensation monies pertaining to the above-mentioned S MG SOLUTION PTE LTD and forward your settlement cheque to M/S MG SOLUTION I had authorized to collect the said compensation monies.
Thank you	
J	
Signature of Cla	vimant Witness By

iCareLimo 626 Upper Thomson Road #03-24. Singapore 787130 HP: 9688 1318



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLN 1050H (Insd veh)	
	SLG 7449P (TP veh)	Model: MITSUBISHI OUTLANDER
Date of Accident/ Time:	08/07/2019	

Repair Estimate	; \$	22,711.94		
Final Repair Cost	15	10,165.00	(W/GST)	
Loss of Use		900.00	10 days at \$ 90.00 per	
Rental (if any)	1.5		days at \$	per day
LTA / GIA Search Fee	1.5	7.45		
Others:	: \$			
W	: \$			
Final Settlement Sum	:\$	11,072,45		
Payee Name: MG SOLUTION PTI Is Third Party Workshop GIA Regist		YES [X] NO (Kindly indicate below)		
A) For Non GIA Registr	ered Workshop	: Agreed Liability 100 (%)		
		: Agreed Liability 100 (%) BOLA Applicable: Yes/ NO BOLA		
	Workshop:		Scenario No:	
For GIA Registered BOLA Liability:	Workshop:	BOLA Applicable: Yes/ NO BOLA	Scenario No:	

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.
- 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 accide

Signature of workshop stamp Name of Representative MONTH ON HOM

Date:

Signature of AXA's surveyor/representative

Date:

Name of AXA's surveyor /Representative

Signature of Wi

Wookshop stamp (if applicable)

Previded always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained

in the same accident.



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

08 Jul 2019 / 16:48:25

Receipt Date/Time :

08 Jul 2019 / 16:48:24

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190708-002596

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 - SLN1050H As at 08 Jul 2019/14:46:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SLN1050H		33. (54)	(04)	(04)
Enquiry Fee 20190708164736923572	ī.	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			
	20190708164743608 ¹	Direct Debit: eN (Internet Ba	ETS Debit nking)	7.45
	Total		σ,	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.