



16 July 2019

ROY EDWARD DAVID
19 NASSIM HILL
#02-04
NASSIM WOODS
SINGAPORE 258482

Dear Sir/Mdm,

OUR REF : CC4/ASM19012339/pa3
YOUR REF : SJN 3681Y
ACCIDENT INVOLVING SJN3681Y AND SMK6558G AT TURF CITY CARPARK ON
09/07/2019

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 **Wearnes Automotive Pte Ltd** acting on behalf of the owner of **SMK6558G** against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. 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 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 jimmychen@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.



Auto
Consultants
Pte Ltd

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

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 authorized 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 us at 6841 2928 or jimmychen@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
FAX: 6741 4108
Email: jimmychen@lkkauto.com

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

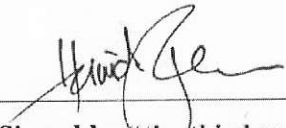
AUTHORIZATION TO ACT

I, Jessen Johann Heinrich ("the third party claimant")
of 9A Swiss Club Road (288146) (address),
owner of SUK6558G (vehicle no.) hereby authorize
WEARNES AUTOMOTIVE PTE LTD
("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. SUK6558G that was
damaged pursuant to the accident which occurred on 09/07/2019 (date) along
Turf City South Carpark (location)
involving vehicle no SJN3681Y ("the accident").

I further authorize the workshop to sign the discharge voucher on my behalf 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 30 day of 08 (month) 20 19 (year)


Signed by "the third party claimant"
Policyholder's Signature only
& Company Chop – (if registered under a company)


Signed by "the workshop"





AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJN 3681Y (Insd veh)	Model: Jaguar I-Pace (294.0KW)
	SMK 6558G (TP veh)	
Date of Accident/ Time:	09/07/2019	

Repair Estimate	: \$	31,516.53	
Final Repair Cost (W/GST)	: \$	22,058.01	
Loss of Use	: \$	-	days at \$ per day
Rental (if any)	: \$	1,112.80	8 days at \$ 130 per day
LTA / GIA Search Fee	: \$	-	
Others:	: \$	-	
	: \$		
Final Settlement Sum	: \$	23,170.81	

Payee Name : Wearnes Automotive Pte Ltd

Is Third Party Workshop GIA Registered? [X] YES [] NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes No BOLA Scenario No: 24
	BOLA Liability: 100 (%)	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.

<p>Signature of workshop representative: _____ Name of Representative: _____ Date: 20/11/19</p> <p>Signature of AXA's surveyor/representative: _____ Name of AXA's surveyor /Representative: _____ Date: 20.11.19</p>	<p>Signature of Witness: _____ Name of Witness: _____ Date: 20/11/19</p>
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(Circular stamps: WEARNES AUTOMOTIVE PTE. LTD. and LKK)



Wearnes Automotive Pte. Ltd.

Co Reg No 199501400R / GST Reg No M28920628X
28 Leng Kee Road, Singapore 159105
Telephone +65 6876 5063
www.wearnesleasing.com

AXA INSURANCE PTE LTD
8 SHENTON WAY
#27-01 AXA TOWER
Singapore 068811

Tax Invoice

Inv No. : R1901403
Inv Date : 22 Aug 2019
Ref :
Terms : 90 Days

Rental Information

Agreement No. : RA19/00782
Billing Period : 31/07/2019 09:00 - 08/08/2019 09:00
Driver Name : Jessen Johann Heinrich

Car Information

Registration No. : SLV4689D
Make : JAGUAR
Model : F-PACE R-SPORT 2.0
I4D

#	Description	Qty	UOM	Unit Price	Amt
1	Being Rental Payment for the Period Stated Above	8.00	Days	130.00	1,040.00

Remarks:

SMK6558G_AXA_Patricia

Payment method:

Interbank Giro: deduction will take place between 9th to 13th of the month.
Credit Card payments: deduction will take place between 5th to 10th of the month.

Cheque payments: all cheques should be crossed and made payable to "Wearnes Automotive Pte Ltd".

Bank Transfers:

Oversea-Chinese Banking Corporation Limited

Bank Code: 7339

Branch Code: 501

Bank Account Name: Wearnes Automotive Pte Ltd

Bank Account: 296727-001

SWIFT CODE: OCBCSGSG

Subtotal : S\$ 1,040.00
GST 7.0% : S\$ 72.80
Total : S\$ 1,112.80

Please note that late payment interest will be imposed at a rate of 2% per month commencing from the date the payment is due, compounded daily, plus an administrative fee of \$50 each time.

This is a computer generated document. No signature is required.