



Auto
Consultants
Pte Ltd

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

06 AUGUST 2019

NEO LIM HOE
550 BEDOK NORTH AVE 1
#11-528
SINGAPORE 460550

Dear Sir/ Mdm

OUR REF : CC4/ASM19013363/ga3
YOUR REF : SLA 9836Z
ACCIDENT INVOLVING SLA 9836Z AND SLV 9472D ALONG/AT BEDOK NORTH AVE 3 ON 27/07/2019

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 claim from **CYCLE & CARRIAGE AUTOMOTIVE PTE LTD** acting on behalf of the owner of SLV 9472D 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/ Authorisation letter from your company
- 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)
- 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)*



Exceptional Journeys

To:
Cycle & Carriage Automotive Pte Limited /
209 Pandan Gardens,
Singapore 609339

Attention: [Motor Claims Department]

Date: 29/07/2019

LETTER OF AUTHORIZATION TO ACT

Dear Sirs,

1. I/We, the undersigned, am the registered owner of vehicle no. SLV9472D (*vehicle no.*) (the "**Vehicle**").
2. As a result of a motor incident occurring on 27/07/2019 (*date and time of accident*) on/along BEDOK NORTH AVE 3 (*location*) between the Vehicle and SLA9836Z (*3rd party vehicle(s) number, if any*) (the "**Accident**"), the Vehicle was damaged and has been sent in for repairs to be conducted at Cycle & Carriage's workshop.
3. I/We hereby authorize Cycle & Carriage to act for and on my/our behalf in respect of the following:
 - (a) to submit, make, settle and/or resolve any claims (the "**Claims**") which I/we may have against third party insurers and/or any other parties ("**Third Parties**") arising out of the Accident, in any manner as it deems fit;
 - (b) to receive payment from any Third Parties as settlement for the Claims (including accepting cheques made out in favour of Cycle & Carriage); and
 - (c) to generally do or cause to be done all acts or things (including signing any forms or documents or giving instructions to any Third Parties) which it deems necessary or expedient for the foregoing purposes.
4. In addition to the above, I/We hereby further authorize Cycle & Carriage, for and on our behalf, to **execute and sign any discharge vouchers, indemnity forms and/or any other forms or documents** in relation to or arising from the Claims.

For the avoidance of doubt, all payments towards settlement of the Claims should be made in favour of Cycle & Carriage.



Exceptional Journeys

5. I/We further acknowledge and recognize that any settlement which Cycle & Carriage may make for and on my/our behalf in respect of any Claims may be on a without prejudice basis and without any admission of liability in so far as any other Third Parties are concerned.

Thank you.

Yours faithfully,

A handwritten signature in dark ink, appearing to read "NG SAN SAN". The signature is written over a horizontal line.

x

Name: NG SAN SAN

NRIC / Passport No. / Company Registration No.: 412D



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLA 9836Z (Insd veh)	Model: MITSUBISHI ATTRAAGE
	SLV 9472D (TP veh)	
Date of Accident/ Time:	27/07/2019	

Repair Estimate	: \$	6,865.12	
Final Repair Cost	: \$	4,187.98	(WGST)
Loss of Use	: \$	350.00	7 days at \$ 50.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$		
Final Settlement Sum	: \$	4,539.98	

Payee Name: CYCLE & CARRIAGE AUTOMOTIVE PTE LTD

Is Third Party Workshop GIA Registered? ☒ 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: 27
	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/TORTFEASOR 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: Lo An Tong
 Date: 17/12/19

Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: Coco Lu Ting
 Date: 17/12/19

Signature of AXA's surveyor/representative
 Name of AXA's surveyor / Representative: WTH LICK
 Date: 17/12/19

SIGNED WITHOUT PREJUDICE FOR
ANY PERSONAL INJURY CLAIM

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles 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-19-121765
Date of Request: 29/07/2019

Your Ref No: Online Purchase

Cycle & Carriage Automotive Pte Ltd
241 Alexandra Road
Singapore 159931

Dear Sir/Madam,

Enquiry Date 29/07/2019
Enquiry By Coco Lu Ting
TP Vehicle No. SLA9836Z
Accident Date 27/07/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque