

AXA INSURANCE SINGAPORE PTE LTD

AXA Tower

8 Shenton Way

#27-01/02

Singapore 068811

MOTOR CLAIMS DEPT

Date: 19-05-2020

Our Ref: PA4314Z

Your Ref: SGP6222U

Dear Sir/Madam,

ACCIDENT INVOLVING PA4314Z AND SGP6222U ON 01-08-2019 AT 17:35 ALONG LOYANG AVEUNE

LETTER OF CLAIM

We claim on behalf of **RAFFLES BUS SERVICES PTE LTD** owner of the vehicle No. **PA4314Z**. Your driver's negligent driving has caused the above accident. As a result, my client has suffered the following losses: -

- | | | |
|---|---|-------------|
| 1. Cost of Repair (Invoice 21185) | : | \$ 4,654.50 |
| 2. Loss of Use for 6 days @ S\$ 200.00 /day | : | \$ 1200.00 |
| 3. Loss of Rental for @ S\$ /day | : | \$ 0.00 |
| 4. Loss of Income for ____ days @ S\$ ____ /day | : | \$ 0.00 |
| 5. Police Report/ SAS Report/ LTA Search Fee | : | \$ 7.49 |
| 6. Survey Fee | : | - |

Total Claims: : \$ 5,861.99

We enclose the following documents:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Repair Invoice | <input checked="" type="checkbox"/> Letter of Authorisation |
| <input type="checkbox"/> Survey Report | <input checked="" type="checkbox"/> LTA Search result |
| <input type="checkbox"/> Photographs _____ pcs | <input type="checkbox"/> Others : |
| <input type="checkbox"/> Investigation results | 1. <input type="text"/> |
| <input type="checkbox"/> Proof of Loss of Use/Rental/Income | 2. <input type="text"/> |

We look forward to your confirmation to settle our claims within 15 days from the date of this letter. Payment by cheque shall be crossed and made payable to YONG SING MOTOR WORKS for amount of **\$ 5,861.99.**

Yours sincerely,
PHUA ZHI YANG

Operation Supervisor,
YONG SING MOTOR WORKS



LETTER OF AUTHORITY & WARRANT TO ACT

To: Messrs Yong Sing Motor Works
No. 53 Defu Lane 12, Singapore 539144

ACCIDENT INVOLVING PA4314Z AND SGP6222U ON 01-08-2019 AT 17:35 ALONG LOYANG AVEUNE

1. I/We, **RAFFLES BUS SERVICES PTE LTD** the owner of vehicle no. **PA4314Z** hereby appoint you to act for me/us to recover damages sustained in the above accident from the third party driver and/or his insurers.
2. In this respect, I/we have authorised my/our motor repairers, namely, **Messrs Yong Sing Motor Works** to act on my/our behalf with regard to the conduct of my/our claim including instructions to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable), and instructions to accept a settlement on such terms as my/our motor repairers **Messrs Yong Sing Motor Works** deem fit.
3. **Messrs Yong Sing Motor Works** may proceed to act as if the instructions are given by me/us and I/we agree and undertake to ratify all instructions given to you and I/we further agree and undertake to be bound by all acts performed or carried out by **Messrs Yong Sing Motor Works** pursuant to such instructions.
4. In the event that legal proceedings are commenced in my name, I shall render my full co-operation to attend Court in order to bring the abovementioned accident to a closure/settlement. I understand that should I fail or neglect to render all co-operation to you as a result of which legal costs is ordered against me/us by the Court, I shall be personally liable to bear the said costs failing which I may open myself to execution proceedings by the other party. I also understand and agree that if for any reason, my/our claim is unsuccessful and/or my suit against the third party is dismissed by the Court, I shall be personally liable to bear my legal costs incurred as well as the legal costs incurred by the third party as well as the repair costs to my vehicle.
5. Please accept my/our instructions to direct all correspondence including supporting documents of my/our claim and Court documents to my/our motor repairers so as to facilitate their giving of instructions to you on my/our behalf. If I/we wish to know of the progress or outcome of my/our claim, I/we will liaise directly with my/our motor repairers.

Dated this day of 06-08-2019

RAFFLES BUS SERVICES PTE LTD

Signature: _____



Name: RAFFLES BUS SERVICES PTE LTD

NRIC No. / Entity No.: 199906025N

Address: 33A JALAN TARI PUYONG
SINGAPORE 799283

LETTER OF AUTHORITY & WARRANT TO ACT

To: Messrs Yong Sing Motor Works
No. 53 Defu Lane 12, Singapore 539144

ACCIDENT INVOLVING PA4314Z AND SGP6222U ON 01-08-2019 AT 17:35 ALONG LOYANG AVEUNE

1. I/We, **RAFFLES BUS SERVICES PTE LTD** the owner of vehicle no. **PA4314Z** hereby appoint you, Messrs Yong Sing Motor Works., as my repairer,
 - a. To proceed with my/our authorisation with the repairs to my vehicle sustained as a result of the abovementioned accident, and to assist me/us to recover damages (sustained in the above accident from the third party driver and/or his insurers) as follows:
 - i. Costs of Repair;
 - ii. Loss of use/Rental charges; and
 - iii. Survey report fee.
 - b. In the event that legal proceedings are commenced in my name, I shall render my full co-operation with my appointed solicitors in order to bring this claim to a closure and/or settlement.

Dated this day of 06-08-2019

Signature: _____

RAFFLES BUS SERVICES PTE LTD

Name: RAFFLES BUS SERVICES PTE LTD

NRIC No. / Entity No.: 199906025N

Address: 33A JALAN TARI PUYONG
SINGAPORE 799283



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SGP 6222U (Insd veh)	Model: TOYOTA COASTER HR D- 4104cc
Date of Accident/ Time:	PA 4314Z (TP veh) 01/08/2019	

Repair Estimate	: \$	
Final Repair Cost (w/GST)	: \$	4,450.00
Loss of Use	: \$	900.00
Rental (if any)	: \$	6 days at \$150.00 per day
LTA / GIA Search Fee	: \$	7.45
Others:	: \$	
Final Settlement Sum	: \$	5,357.45
Payee Name : Yong Sing Motor Works		
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)		
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)
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:		

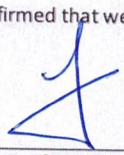

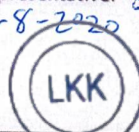
NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. 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.
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 Name of Representative: <u>Sam</u> Date: <u>25-8-2020</u>	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Phua Hai Yang</u> Date: <u>25-8-2020</u>
 Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>26/08/2020</u>	

BILL TO: AXA INSURANCE SINGAPORE PTE LTD
AXA Tower, 8 Shenton Way, #27-01/02
Singapore 068811

TAX INVOICE

NO: 21185

DATE: 19-May-20

SALESPERSON	VEHICLE/EQPT NO.	MAKE/MODEL	PO NO.	OUR REF. NO.
ZHIYANG	PA 4314 Z	TOYOTA COASTER	-	-

DESCRIPTION	\$ AMOUNT
TO PROVIDE LABOUR AND MATERIAL FOR REPAIR TO ACCIDENT VEHICLE AS APPROVED BY SURVEYOR	4,350.00

NOTE:
 All cheques should be crossed and made payable to Yong Sing Motor Works
 For bank transfer, please indicate our invoice number:
 Current a/c no.: 556-743532-001
 Bank code: 7339 Branch code: 556

NET: \$	4,350.00
GST 7%: \$	304.50
GRAND TOTAL: \$	4,654.50

Customer's Acceptance & Satisfaction

Signature

Yong Sing Motor Works

Authorised Signature



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 06 Aug 2019 / 13:16:11

Receipt Date/Time : 06 Aug 2019 / 13:15:59

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190806-001480

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 - SGP6222U As at 01 Aug 2019/17:35:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SGP6222U Enquiry Fee 20190806131438492918	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				
	xxxxxxxxxxxx9392	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.

ACCIDENT INVOLVING SGP 6222U(AXA) /PA 4314Z/ OTHERS ALONG/AT LOYANG AVE TWDS TPE ON 01/08/2019

Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Mon 14/10/2019 4:49 PM

To: peter.teo1957@gmail.com <peter.teo1957@gmail.com>

14 Oct 2019

Mr Teo Wui Beng

Dear Sirs/ Mdm

OUR REF : CC4/ASM19014034/Gpa3 // S9M01WDN

YOUR REF : SGP6222U

ACCIDENT INVOLVING SGP 6222U(AXA) /PA 4314Z/ OTHERS ALONG/AT LOYANG AVE TWDS TPE ON 01/08/2019

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 YONG SING MOTOR WORKS acting on behalf of the owner of PA 4314Z 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. 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 chewht@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 to confirm that the driver is allow to drive the vehicle.
- 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 us at 6742 3197 or email us at chewht@lkkauto.com.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)