



Auto
Consultants
Pte Ltd

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

18 October 2019

LEE CHUAN SHUENN DERRICK
2 TAI HWAN CLOSE
SINGAPORE 555638

Dear Sir/ Mdm

OUR REF : CC4/ASM19015102/K1pb3 // S9M01YH5

YOUR REF : SCV 4949K

**ACCIDENT INVOLVING SCV 4949K & SHA 4875R ON 25/08/2019 ALONG/AT BEACH
ROAD TOWARDS LAVENDER ST BEFORE NEAR FOOD COURT**

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 COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SHA 4875R against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your driver's favour as your vehicle changed lane and collided with third party. Under Motor Accident Guide, vehicles should keep in the proper lane and change lane only when it is safe. 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.

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
- 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 Chew Hsiao Tong(LKK Handler) 6742 3197 or chewht@lkkauto.com Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Chew Hsiao Tong
Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

cc AXA INSURANCE PTE LTD

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG**

I 40 SHA4875R , SCV4949K

ON 25-Aug-19 17:20

BEACH RD TWDS LAVENDER ST B4 NEAR FOOD COURT

I / We

TEY TECK PING

(Hirer) NRIC No.: **SXXXX321G**

and/or

(Relief) NRIC No.: **SXXXX321G**

Taxi Number

SHA4875R

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of **"ComfortDelGro Engineering Pte Ltd"**.

Date

26-Aug-2019

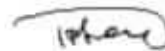
Name of Hirer

TEY TECK PING

Hirer NRIC

SXXXX321G

Signature :



Address

**409A FERNVALE ROAD #07-46
791409**

Contact No.

96549483



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SCV4948K	(Insd veh)	Model: HYUNDAI I40
	SHA4875R	(TP veh)	
Date of Accident/ Time:	25/06/2019		

Repair Estimate	: \$	2,000.00	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	1,290.00	

Payee Name : COMFORTDELGRO ENGINEERING 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No BOLA Scenario No: 15
	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: COMFORTDELGRO ENGINEERING PTE LTD
Date: 18/11/19
18 LOYANG DRIVE
SINGAPORE 508881



PWK

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date:

Signature of Witness / Workshop stamp (if applicable)
Name of Witness:
Date:

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
18 LOYANG DRIVE
SINGAPORE 508881

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

Our Ref: CT19080638

Date: 29 August 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	25/08/2019 @ 17:20 hrs
ALONG	BEACH RD TWDS LAVENDER ST B4 NEAR FOOD COURT
INVOLVING	SCV4949K

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA4875R** (the "Taxi"). The Taxi was hired to **TEY TECK PING IC NO SXXXX321G** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$123.93** per day (inclusive of GST).

Please be advised that the Taxi was insured with **India International Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Manager, Fleet Safety

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

MILE.

[illegible]

Enquire Vehicle Insurance Details

Vehicle No.	Enquiry Time	Enquiry Status	Insurance Company	Insurance Company Name
SCV4949K	25 Aug 2019 / 17:20:00	Successful	A12	AXA INSURANCE PTE LTD

[Previous](#)

[OK](#)

Sum 4875R



POSTING RECEIPT FOR REGISTERED ARTICLE(S)

Singapore Post Limited
(Reg. No. 198201027M)
10 Eunos Road 8
#01-20 Singapore Post Centre
Singapore 408600

Tel : 1605
Fax : 6842 5114
To check delivery status or to raise an enquiry
on your registered article(s), please visit
www.singpost.com

NOTES:

- Separate forms are to be used for Insured and Non-Insured Registered Article.
- Please provide all information required and produce this receipt for all enquiries.
- Please tick where applicable. It shall be assumed no Advice of Receipt (AOR) is required or delivery by air is requested if relevant * is left blank.
- Please indicate the return address on this form(s) to ensure prompt return in event of non-delivery to the addressee(s).
- Please post item(s) at the post office counter according to the sequence stated below.

1. Name & Address of Addressee

LEE CHUAN SHUEN DERRICK
6A JALAN AIR
SINGAPORE 548796 (SCV4949K)

2. Name & Address of Addressee

A/R: () Y () N		B/R: () AIR () SUR	
Insurance: () Y SS () N			
Contents:			
A/R: () Y () N		B/R: () AIR () SUR	
Insurance: () Y SS () N			
Contents:			

For Official Use Only
(These numbers are printed in order of posting at counter)

Sender's Acknowledgment

I have read, understood and agreed to the terms and conditions of posting overseas. I accept the maximum liability payable for Registered Mail Service and certify that all information provided by me is true and the item(s) does not contain any hazardous or prohibited item(s).

P110

Name & Signature

Date

09/2014



MPR-02119268005392



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Singapore Post Centre
Singapore 408600
GST Reg. No.: M2-0105651-9
Customer Service Hotline: 1605

Date/Time 25/9/2019 10:41

No. Description Amount(\$)

1	Accept Registered Article Item	0.00
	1. Ref: RC2825828895G Ctry: SG	
	Transaction No.: 8135192680042	
2	Sale of Postage Label	2.54
	(Domestic)	
	Quantity: 1	
	Unit price: 2.54	
	Total GST: 0.17	
	Ref.: RC2825828895G	
	Insurance: 0.00	
	Postage paid: 2.54	
	Transaction No.: 8135192680043	
	Total GST	0.17
	Total Amount	2.54
	Cash	2.54

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(SINGAPORE) ①