



WITHOUT PREJUDICE

Our Ref: SKZ 2613B

Your Ref: SML 791H

21st November 2019

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AXA Insurance Pte Ltd

Dear Cecilia,

Accident Involving: SKZ 2613B and SML 791H

Date of Accident: 26 August 2019

Location of Accident: Along PIE towards Changi

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$	7,850.00	
TOTAL LOR/U DAYS	10 DAYS	3 Day PRS (27/28/29 Aug) + 1 Day Resurvey (30 Aug) + 5 Repair Days Agreed (31 Aug, 2/3/4/5 Sep) + 1 Sunday (1 Sep)	
Add Loss of Rental	\$	600.00	5 Days - Inv#RAP2613B-152/0394
Add Loss of Use	\$	500.00	5 Days
Total	\$	8,950.00	
Add Towing Fee	\$	45.00	
Add 3rd Party Report Fee	\$	29.00	
Add LTA Search Fee	\$	7.45	
GRAND TOTAL	\$	9,031.45	

Kindly pay the Grand Total Amount of **\$9,031.45** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.

Regards
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautoffice@gmail.com / teamautopl@gmail.com

To : Team AutoPro Pte Ltd
CRN : 201811621K
located at : 160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: SK22613B
and SML791H and
and and
@ PIE TWDS CHANTI
dated 26/08/19

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,


Owner Claimant Signature & Co's Stamp (if applicable)

Date: 26/08/2019



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SML 791H	(Insd veh)	Model: AUDI A3 SEDAN 1.0
	SKZ 2613B	(TP veh)	
Date of Accident/ Time:	26/08/2019 19:35		

Repair Estimate	: \$	18,966.35	
Final Repair Cost	: \$	7,850.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	700.00	7 days at \$ 100 per day
LTA / GIA Search Fee	: \$	36.45	
Others: Towing Fee	: \$	45.00	
Final Settlement Sum	: \$	8,631.45	
Payee Name :	TEAM AUTO PRC PTE LTD		
Is Third Party Workshop GIA Registered?	[]	YES [✓] NO	(Kindly indicate below)
A) For Non GIA Registered Workshop:	Agreed Liability		100 (%)
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:

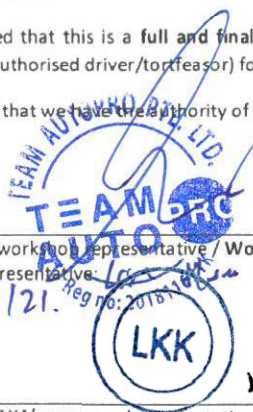
1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
3. AXA RESERVES THEIR RIGHTS UNDER THE POLICY 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 accident.

Signature of workshop representative / Workshop stamp
Name of Representative: *LKK*
Date: 8/1/21. Reg no: 201811621K

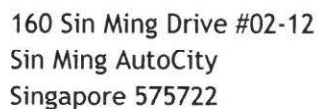


Signature of Witness / Workshop stamp (if applicable)
Name of Witness:
Date:



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

"My execution of this Discharge Voucher is solely for my claim for Property Damage & nonprejudicial to any other claims arising from the same accident."



Kindly remit payment to our office address stated. If you have any query pertaining to this invoice, please feel free to contact us.

Date Of Accident:	26/8/2019
-------------------	-----------

\$ 7,850.00

Signature & Stamp

Page 1 of 1



160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956
teamautoffice@gmail.com / teamautopl@gmail.com

THIS IS YOUR INVOICE

Kindly remit payment to our office address stated. If you have any query pertaining to this invoice, please feel free to contact us.

INVOICE DATE: 2-Sep-19

INVOICE NOS: TAP2613B-152/0394

Your Reference: SKZ 2613B

Our Reference: SME 5658P

Billed To: Heng Sok Koon

Address: 15 Pavilion Place S'658351

Invoice Type: Rental

INVOICE TOTAL IN SGD

\$ 600.00

DESCRIPTION	AMOUNT (\$\$)
Leasing of Vehicle Number: SME 5658P	\$ 600.00
Rental Rate Per Day: \$120.00	
Rental Duration: 5	
Commencement Date: 28/8/2019	
Ceasement Date: 2/9/2019	
* DRIVER: Ng Jun Rui of S9213951D	
Discount	\$ -
Amount Due	\$ 600.00

COMMENTS

1. Total payment due in 30 days.
2. All Cheques must be made payable to **TEAM AUTOPRO PTE LTD.**
3. Please include our invoice number at the back of your cheque.
 - Free Upgrade

For Team Auto Pro Pte Ltd

Signature & Stamp

PAYMENT DETAILS

THANK YOU FOR YOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms)
Page 1 of 1



RENTAL AGREEMENT

RA/2019 08/152

HIRER'S PARTICULAR		Vehicle No / Model		Rental Vehicle No / Model																	
Name: <u>Heng Sok Koon</u>		SKZ2613B Audi A3		SMES658P BMW 528i																	
NRIC/Passport No: <u>S1346352B</u>		Date / Time Out:		Date / Time In:																	
Driving Licence No: _____ Exp: _____		28/08/2019 11AM		02/09/2019 4pm																	
Address: <u>15 Pavilion Place S658351</u>		Fuel Tank Level 																			
Tel: _____																					
ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)		RENTAL CHARGES																			
Name: <u>Ng Jun Rui</u>		<table border="1"> <tr> <th>Hour</th> <th>@</th> <th>per hour</th> <th rowspan="5">TOTAL \$</th> </tr> <tr> <td>5</td> <td>Days @ \$120</td> <td>per days</td> <td>\$600</td> </tr> <tr> <td>Weeks @</td> <td>per week</td> <td></td> </tr> <tr> <td>Months @</td> <td>per month</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>			Hour	@	per hour	TOTAL \$	5	Days @ \$120	per days	\$600	Weeks @	per week		Months @	per month				
Hour	@				per hour	TOTAL \$															
5	Days @ \$120				per days		\$600														
Weeks @	per week																				
Months @	per month																				
NRIC/Passport No: <u>S92139510</u>																					
Driving Licence No: _____ Exp: _____																					
Address: <u>15 Pavilion Place S658351</u>																					
Tel: _____		Additional Payable: _____																			
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		SUBTOTAL Payable: <u>\$600</u>																			
		DEPOSIT AMOUNT PAID		DEPOSIT AMOUNT REFUNDED / Date																	
		Mode of Payment																			
		ADDITIONAL REMARKS																			
		Free upgrade!																			
Physical Damage Excess		Acknowledgement		HIRER'S DECLARATION: I/WE agree to the terms and conditions above and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.																	
Singapore - Own Damage		\$2,000																			
Singapore - 3rd Party Damage		\$2,000																			
Malaysia (If applicable)		\$8,000																			
For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age		\$3,000 (Additional)																			
IMPORTANT NOTE : 1. The person(s) signing this rental Agreement assumes full personal responsibility, jointly and severally with the firm, person or organization, the driver or all authorized driver in whose name he/they might sign. 2. Only persons above 23 years of age with more than 2years driving experience, authorised, licensed and signing this agreement may drive the vehicle. 3. Vehicle is strictly for use in Singapore only and may not be driven or taken out of Singapore without the prior written consent of TeamAutoPro Pte Ltd. 4. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling), commercial purposes (e.g. taxi, uber, grab car / car pool usage) is strictly prohibited. 5. In case of accident, the hirer shall report to TeamAutoPro Pte Ltd immediately. If there are bodily injuries, a police report must be made within 24 hours																					
				HIRER Signature / Date 																	
				Authorized Signatory On Behalf of TeamAutoPro Pte Ltd																	



24 HOUR RECOVERY SERVICES

Co.Reg No: 53333929D

24 HRS HOTLINE: 8455 5669 Fax: 6741 1981

8 Kaki Bukit Road 2 #02-04 Ruby Warehouse Complex Singapore 417841

Email: 24hoursrecovery@gmail.com



No. 19087

Date :

27/8/19

M/S

: TEAM AUTO

Vehicle No

: SKZ 2613 8

Model

: AUD1

From

: PAVILION PL.

Call Time

: 1840

To

: SIN MNR 01-14

Time Arrival

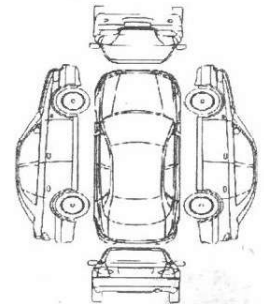
: 1910

Remarks

: A

Arrival Workshop :

1935



☐ Change Tyres / Patch Tyre

☒ Accident

☐ Use Car Carrier

☐ Loaded

☐ Basement / Multi Carpark

☐ Low Body Kit / Low Spoiler

☐ Open Door

☐ Jump Start

☐ Using King Dolly

☐ Dismantle Brake / Shaft

☐ Crane Up / Winch Out

AMOUNT S\$

~~90~~ 45/-

Received By

for 24 hour Recovery Services

Vehicle is transported at owner's risk. The company accepts no responsibility for damaged or other misdemeanour to your vehicle whilst being transported.



**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-19-141288
Date of Request: 29/08/2019

Your Ref No: WALK IN LEE

TEAM AUTOPRO PTE LTD - SIN MING
160 SIN MING DRIVE #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Your Vehicle No: SKZ2613B
Date of Accident: 26/08/2019
Place of Accident: PIE
Involving Vehicle No: SML791H

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-141289

Date of Request: 29/08/2019

Your Ref No: WALK IN LEE

TEAM AUTOPRO PTE LTD - SIN MING
160 SIN MING DRIVE #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Date of Accident: 26/08/2019

Vehicle No: SKZ2613B

Place of Accident: ALONG PIE TOWARDS CHANGI

Involving Vehicle No: SML791H

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SML791H	ALONG PIE TOWARDS CHANGI	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 27 Aug 2019 / 18:48:56

Receipt Date/Time : 27 Aug 2019 / 18:48:56

SKZ2613B (C)

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190827-002947

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 - SML791H As at 26 Aug 2019/19:00:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SML791H Enquiry Fee 20190827184757916531	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				
	xxxxxxxxxxxx1685	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.

Jasper Chua (LKK Auto)

From: Jasper Chua (LKK Auto)
Sent: Thursday, 13 August 2020 3:13 PM
To: 'merylgoth.my@gmail.com'
Subject: ACCIDENT INVOLVING SKZ 2613B & SML 791H ALONG PIE TOWARDS CHANGI BEFORE PAYA LEBAR EXIT ON 26/08/2019

13 AUGUST 2020

GOH MEI YAN

Dear Sir/ Madam,

OUR REF : CC4/ASM19015181/Bbb3
YOUR REF : SML 791H

ACCIDENT INVOLVING SKZ 2613B & SML 791H ALONG PIE TOWARDS CHANGI BEFORE PAYA LEBAR EXIT ON 26/08/2019

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 TEAM AUTOPRO PTE LTD acting on behalf of the owner of SKZ 2613B against your motor insurance policy.

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 jasperchua@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 6841 2928 or jasperchua@lkkauto.com . Please quote our claim reference when you contact us that we can assist you more effectively.

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2928 | email: jasperchua@lkkauto.com | fax: 6741-4108

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



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 25/11/2020

Survey Details:

Date of loss	26-Aug-19
Date of appointment	28-Aug-19
Date of survey	29-Aug-19
Location of survey	TEAM AUTOPRO PTE LTD

Vehicle Details:

Claim Type:	Third party
Vehicle number	SKZ 2613B
Make and Model	AUDI A3 SEDAN 1.0
Date of registration	19/3/2019
Excess	
Market Value	\$140,000
Parf Rebate	\$42,321
Nett Loss	\$97,679

Repair details:

Initial Estimate	\$ 18,966.35
------------------	--------------

Proposed/Revised repair cost:

Parts	\$ 8,012.65
Check items (estimate)	\$ -
Labour	\$ 1,850.00
Total	\$ 9,862.65
Lump Sum(if applicable)	\$ 7,850.00
Number of days for repair	5



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

Insured rear-ended third party.

Mandate:

Liability(TP)		%
Proposed repair cost	\$	7,850.00
Loss of rental (5 days x \$100)	\$	500.00
Towing Fee	\$	45.00
LTA & GIA search fees	\$	36.45
Proposed Total	\$	8,431.45



RE: <TP - MANDATE IA> S9M01YHL [ACCIDENT INVOLVING SML 791H(OI) & SKZ 2613B(TP) ON 26/08/2019]

Type

🔍 Question

Message

1. We confirm parts price is check and reasonable. 2. Noted that LOR be claimed only. 3. We sent email to notify OI on 13/08/2020, no reply till date. Liability: 100%. Insured rear-ended third party. We seek your mandate at \$8,431.45(ALL IN). Latest TP-Mandate IA had been uploaded in Smartclaims. Kindly let us have your approval/instruction. Jasper Chua – 25/11/2020

Reply

 **<TP - MANDATE IA> S9M01YHL [ACCIDENT INVOLVING
SML 791H(OI) & SKZ 2613B(TP) ON 26/08/2019]**

Type

 Question

Message

Hi Jasper, i will only agree to LOR @ 7 days (5 days repair + 1 sunday + 1 day PRS) full and final. Tks

Reply