LKK Auto Consultants Pte Ltd

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

05 SEPTEMBER 2019

ONG KENG HAI FRANCIS
7 RIVERVALE CRESCENT
#09-20
SINGAPORE 545085

Dear Sir/ Mdm

OUR REF : CC4/ASM19015212/ga3
YOUR REF : SJQ 6446A
ACCIDENT INVOLVING SJQ 6446A AND SLV 9370P ALONG/AT SLIP RD FROM CLAYMORE HILL & CLAYMORE DRIVE 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 claim from **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD** acting on behalf of the owner of SLV 9370P 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)

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJQ6446A (Insd veh)	Model: VOLKSWAGEN CADDY
	SLV9370P (TP veh)	
Date of Accident/ Time:	26/08/2019	

Repair Estimate	: $		
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	: $	4,300.00	(GLOBAL SUM)

Payee Name : SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

Is Third Party Workshop GIA Registered? [ ] YES [X] 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:

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.

SNG AH TEE MOTOR & PANEL SERVICE PTE LTD
BLK 3 PIONEER ROAD NORTH #01-18
SINGAPORE 628457
TEL : 6268 6183 FAX : 6268 1429

Janice

Signature of workshop representative / **Workshop stamp**
Name of Representative:
Date:

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

LKK

MPB

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: 11/08/2020

GENERAL INSURANCE ASSOCIATION
RECORDS MANAGEMENT CENTRE

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-19-139248
Date of Request: 27/08/2019 Your Ref No: Online Purchase

Sng Ah Tee Motor & Panel Service Pte Ltd
Blk 3 Pioneer Road North
#01-18
Singapore 628457

Dear Sir/Madam,

Enquiry Date 27/08/2019
Enquiry By Sharon Sng May Yuen
TP Vehicle No. SJQ6446A
Accident Date 26/08/2019

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:
[X] GIRO [ ] Cash [ ] Cheque

total $1820.95

Patient's Copy

TAX INVOICE

National University Polyclinics
GST Reg No: 200910555Z
Reg No: 53358682L

Name: PATRICK LOH CHUN LEONG (LIU JUNLONG)
NRIC: SXXXX497A
Reference No: CCK_SPK_001-190827153953

BILL 1 (New)
Bill No: OC19290034
Visit Date: 27/08/2019 11:31
Clinic: Choa Chu Kang

	Nett Payable After Govt Subsidy
CONSULTATION	
Consultation	$ 13.20
PRESCRIPTION	
Ketoprofen 2.5% Gel 30G (Fastum)	$ 1.35
Orphenadrine 35Mg/Paracet 450Mg Tab	$ 1.40
Amount Payable Before Tax	$ 15.95
7% GST	$ 1.12
Amount Payable After Tax	$ 17.07
GST Subsidy	-$ 1.12
Total Amount Payable	$ 15.95
Payment By Credit Card	$ 15.95

Government subsidy already included in the bill is $ 37.85

Total Payment By Credit Card **$ 15.95**

Terminal Id: 47905023
Merchant Id: 168168343866
Approval Code: 003792
Date/Time: 27/08/2019 03:40:23PM
R Reference No: 923907017006
Invoice No: 017006
Batch No: 001314

Card Label: VISA
Card No: XXXXXXXXXXXX7156
Expiry Date: XX/XX

Entry Type: P
AID: A0000000031010O0
TVR: 0000000000
TC: 0BC79877491240A8

NO SIGNATURE REQUIRED

Type text he

National University Polyclinics

Choa Chu Kang Polyclinic

National University Polyclinics
A member of the NUHS

2 Teck Whye Crescent
Singapore 688846

MEDICAL CERTIFICATE **ORIGINAL** **CCK19078001**

Name : PATRICK LOW CHUN LEONG (LIU JUNLONG) **NRIC :** S7619497A

Type of Medical Leave granted : **OUTPATIENT SICK LEAVE**

The above name is unfit for duty for a period of **2** day(s) from **27/08/2019** to **28/08/2019** inclusive.

The certificate is not valid for absence from court attendance.

The above named attended Examination/Treatment from **11:31 AM** to --

Remarks :

For enquiries, please call 63553000

27/08/2019	Dr. NG HUIWEN CHRISTINE (17536F)	Choa Chu Kang	
Date	Issued By	Location	Signature

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013227
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码; 工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 腹泻

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿 (TCM)

服务费用:
- Service Charges (Treatment Fee): $75-

服务日期:
- Service Date (Date of Treatment): 9/9/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013184
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码; 工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: (腹泻)

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

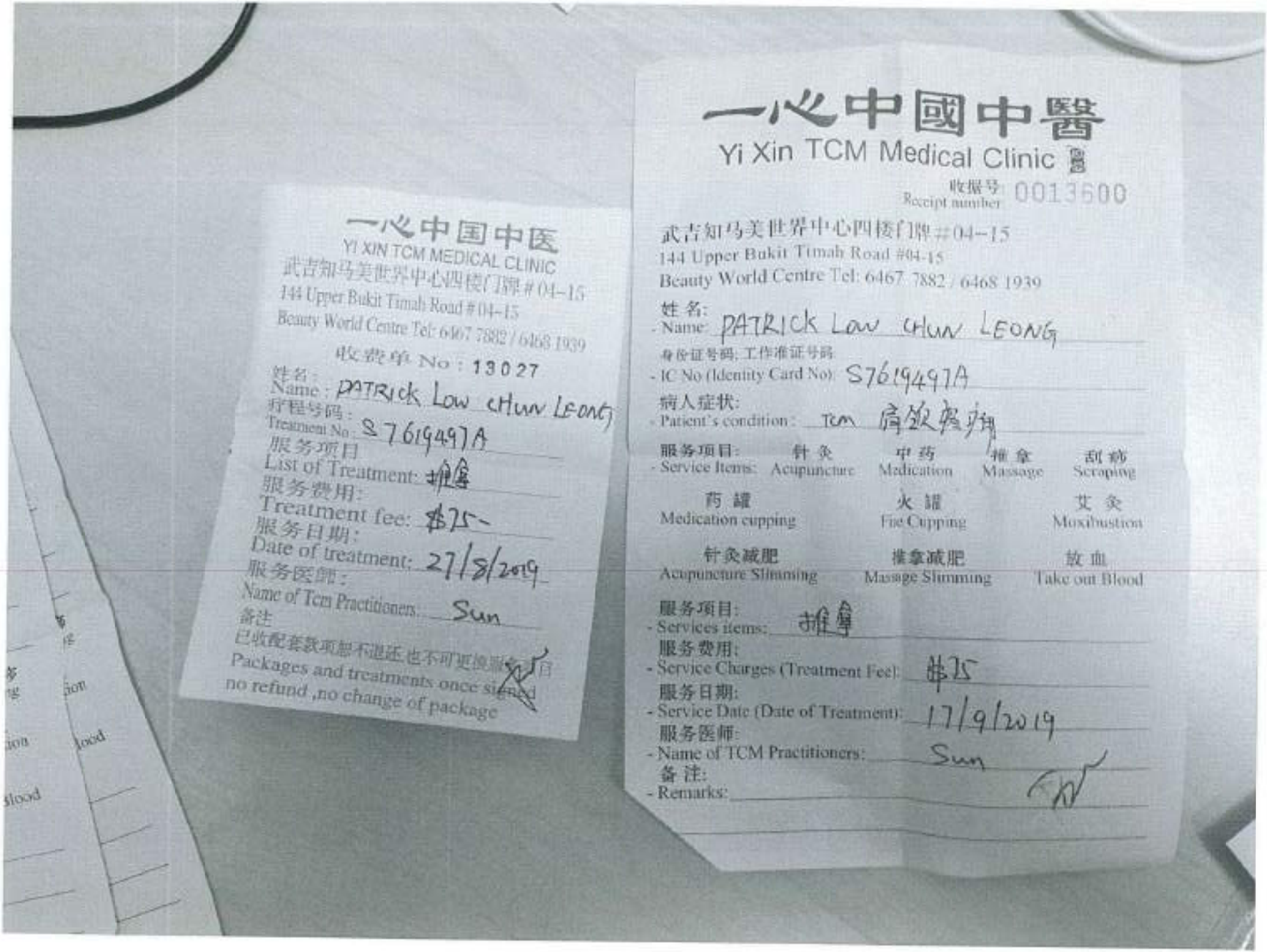
服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $75-

服务日期:
- Service Date (Date of Treatment): 2/9/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:



一心中国中医
YI XIN TCM MEDICAL CLINIC
武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

收费单 No：13027

姓名：
Name：PATRICK Low chun LEONG

疗程号码：
Treatment No：S7619497A

服务项目
List of Treatment：推拿

服务费用：
Treatment fee：$75-

服务日期：
Date of treatment：27/8/2019

服务医师：
Name of Tcm Practitioners：Sun

备注
已收配套款项恕不退还也不可更换配套项目
Packages and treatments once signed
no refund ,no change of package

一心中國中醫
Yi Xin TCM Medical Clinic

收据号 Receipt number：0013600

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名：
- Name：PATRICK Low chun LEONG

身份证号码; 工作准证号码
- IC No (Identity Card No)：S7619497A

病人症状：
- Patient's condition：Tcm 肩颈疼痛

服务项目：
- Service Items：针灸 Acupuncture　中药 Medication　推拿 Massage　刮痧 Scraping
药罐 Medication cupping　火罐 Fire Cupping　艾灸 Moxibustion
针灸减肥 Acupuncture Slimming　推拿减肥 Massage Slimming　放血 Take out Blood

服务项目：
- Services items：推拿

服务费用：
- Service Charges (Treatment Fee)：$75

服务日期：
- Service Date (Date of Treatment)：17/9/2019

服务医师：
- Name of TCM Practitioners：Sun

备注：
- Remarks：

一心中國中醫
Yi Xin TCM Medical Clinic

收据号 Receipt number: 0013284

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK low CHUN LEONG

身份证号码/工作准证号码
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 肩背痛

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100.

服务日期:
- Service Date (Date of Treatment): 23/9/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号 Receipt number: 0013331

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK Low CHUN LEONG

身份证号码/工作准证号码
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 复诊

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

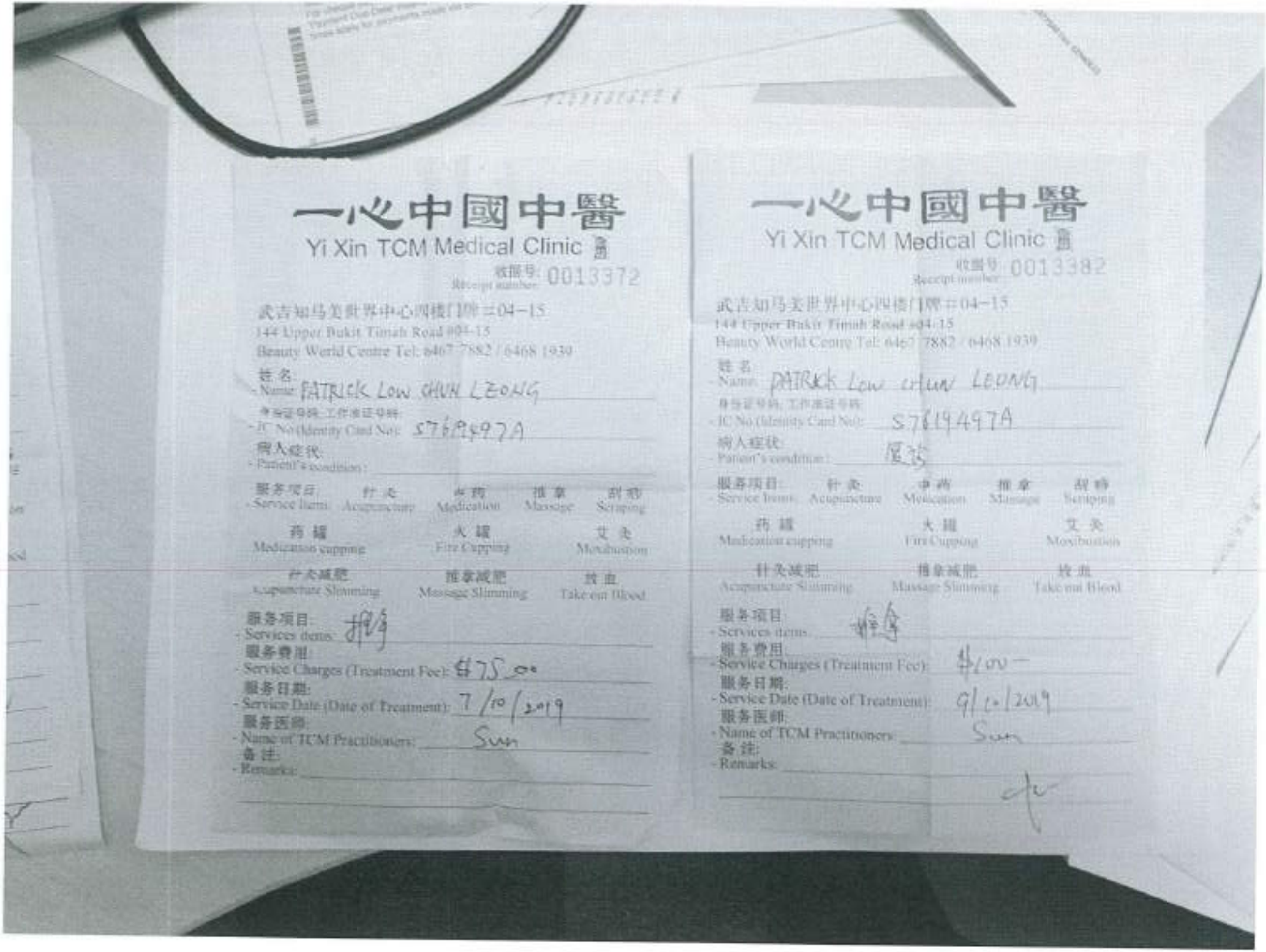
服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100

服务日期:
- Service Date (Date of Treatment): 30/9/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:



一心中國中醫
Yi Xin TCM Medical Clinic 壹

收据号 Receipt number: 0013372

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码
- IC No (Identity Card No): S7819497A

病人症状
- Patient's condition:

服务项目 - Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目
- Services items: 推拿

服务费用
- Service Charges (Treatment Fee): $75.00

服务日期
- Service Date (Date of Treatment): 7/10/2019

服务医师
- Name of TCM Practitioners: Sun

备注
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic 壹

收据号 Receipt number: 0013382

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码
- IC No (Identity Card No): S7819497A

病人症状
- Patient's condition: 屋漆

服务项目 - Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

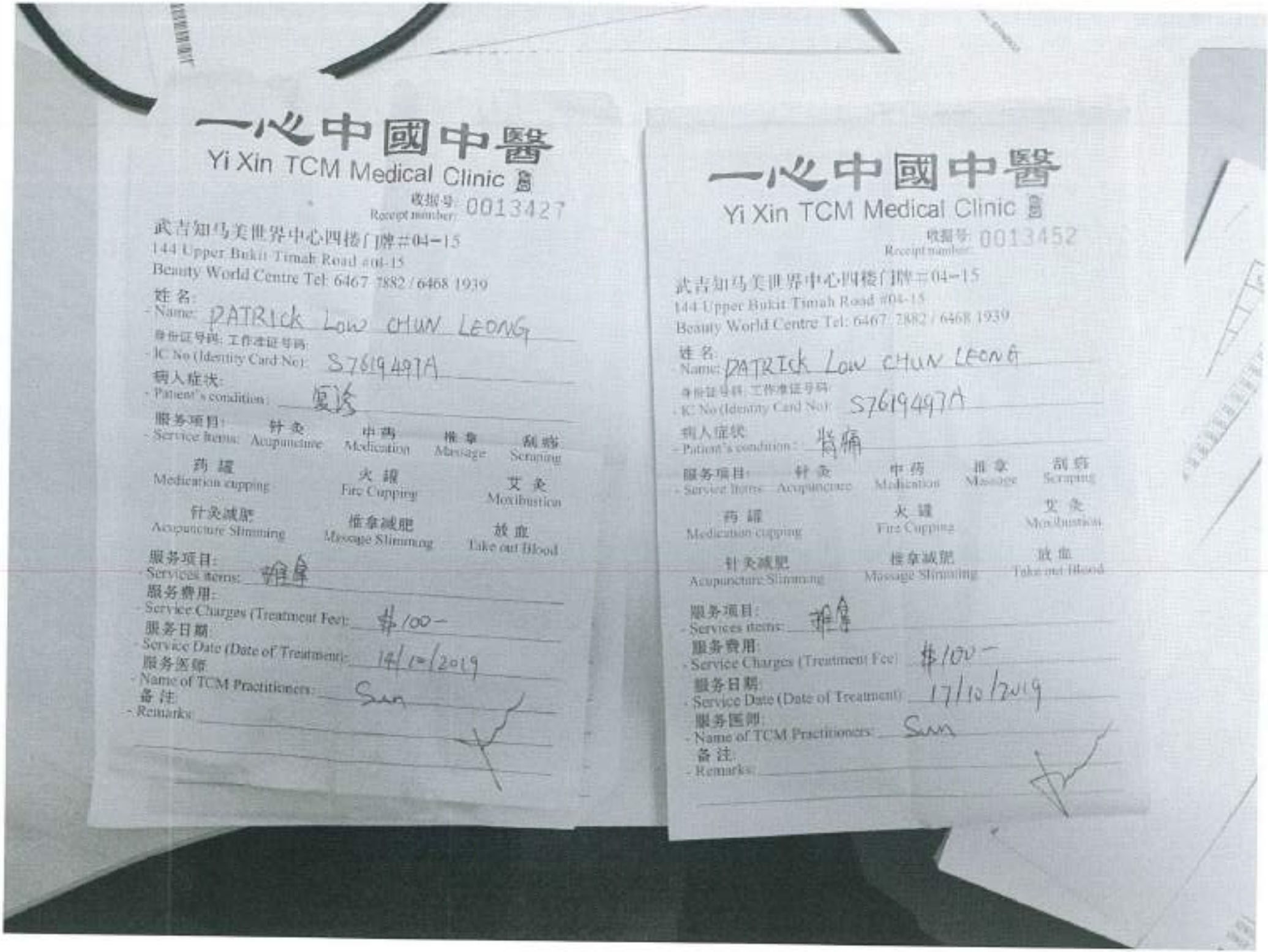
服务项目
- Services items: 推拿

服务费用
- Service Charges (Treatment Fee): $100-

服务日期
- Service Date (Date of Treatment): 9/10/2019

服务医师
- Name of TCM Practitioners: Sun

备注
- Remarks:



一心中國中醫
Yi Xin TCM Medical Clinic

收据号 Receipt number: 0013427

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名 Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码 IC No (Identity Card No): S7619497A

病人症状 Patient's condition: 腰疼

服务项目 Service Items: 针灸 Acupuncture ☐ 中药 Medication ☐ 推拿 Massage ☐ 刮痧 Scraping ☐
药罐 Medication cupping ☐ 火罐 Fire Cupping ☐ 艾灸 Moxibustion ☐
针灸减肥 Acupuncture Slimming ☐ 推拿减肥 Massage Slimming ☐ 放血 Take out Blood ☐

服务项目 Services items: 推拿

服务费用 Service Charges (Treatment Fee): $100-

服务日期 Service Date (Date of Treatment): 14/10/2019

服务医师 Name of TCM Practitioners: Sun

备注 Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号 Receipt number: 0013452

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名 Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码 IC No (Identity Card No): S7619497A

病人症状 Patient's condition: 肾痛

服务项目 Service Items: 针灸 Acupuncture ☐ 中药 Medication ☐ 推拿 Massage ☐ 刮痧 Scraping ☐
药罐 Medication cupping ☐ 火罐 Fire Cupping ☐ 艾灸 Moxibustion ☐
针灸减肥 Acupuncture Slimming ☐ 推拿减肥 Massage Slimming ☐ 放血 Take out Blood ☐

服务项目 Services items: 推拿

服务费用 Service Charges (Treatment Fee): $100-

服务日期 Service Date (Date of Treatment): 17/10/2019

服务医师 Name of TCM Practitioners: Sun

备注 Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013632
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码, 工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 复诊

服务项目:
- Service Items:

针灸 Acupuncture	中药 Medication	推拿 Massage	刮痧 Scraping
药罐 Medication cupping	火罐 Fire Cupping	艾灸 Moxibustion	
针灸减肥 Acupuncture Slimming	推拿减肥 Massage Slimming	放血 Take out Blood	

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100.00

服务日期:
- Service Date (Date of Treatment): 31/10/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013650
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码, 工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 复诊

服务项目:
- Service Items:

针灸 Acupuncture	中药 Medication	推拿 Massage	刮痧 Scraping
药罐 Medication cupping	火罐 Fire Cupping	艾灸 Moxibustion	
针灸减肥 Acupuncture Slimming	推拿减肥 Massage Slimming	放血 Take out Blood	

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100-

服务日期:
- Service Date (Date of Treatment): 12/11/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013521
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 腹泻

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100-

服务日期:
- Service Date (Date of Treatment): 24/10/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013434
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 背痛

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100.00

服务日期:
- Service Date (Date of Treatment): 21/10/2019

服务医师:
- Name of TCM Practitioners: a

备注:
- Remarks:

一心中國中醫

Yi Xin TCM Medical Clinic

收据号: 0013742
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码; 工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition :

服务项目:
- Service Items:

针灸	中药	推拿	刮痧
Acupuncture	Medicaion	Massage	Scraping

药罐	火罐	艾灸
Medication cupping	Fire Cupping	Moxibustion

针灸减肥	推拿减肥	放血
Acupuncture Slimming	Massage Slimming	Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100.00

服务日期:
- Service Date (Date of Treatment): 5/11/2019

服务医师:
- Name of TCM Practitioners: 2

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0014052
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A TCM

病人症状:
- Patient's condition: TCM TREATMENT.

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; ~~推拿~~ Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100.-

服务日期:
- Service Date (Date of Treatment): 13/12/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0014025
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 复诊 (TCM)

服务项目:
- Service Items: 针灸 Acupuncture; 中药 Medication; 推拿 Massage; 刮痧 Scraping; 药罐 Medication cupping; 火罐 Fire Cupping; 艾灸 Moxibustion; 针灸减肥 Acupuncture Slimming; 推拿减肥 Massage Slimming; 放血 Take out Blood

服务项目:
- Services items: 推拿

服务费用:
- Service Charges (Treatment Fee): $100-

服务日期:
- Service Date (Date of Treatment): 13/12/2019

服务医师:
- Name of TCM Practitioners: Sun

备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0014000
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 腹泻

服务项目: 针灸 / Acupuncture | 中药 Medication | 推拿 Massage | 刮痧 Scraping
药罐 Medication cupping | 火罐 Fire Cupping | 艾灸 Moxibustion
针灸减肥 Acupuncture Slimming | 推拿减肥 Massage Slimming | 放血 Take out Blood

- Services items: 针灸+推拿
服务费用:
- Service Charges (Treatment Fee): $130-
服务日期:
- Service Date (Date of Treatment): 19/11/2019
服务医师:
- Name of TCM Practitioners: 2
备注:
- Remarks:

一心中國中醫
Yi Xin TCM Medical Clinic

收据号: 0013999
Receipt number:

武吉知马美世界中心四楼门牌#04-15
144 Upper Bukit Timah Road #04-15
Beauty World Centre Tel: 6467 7882 / 6468 1939

姓名:
- Name: PATRICK LOW CHUN LEONG

身份证号码/工作准证号码:
- IC No (Identity Card No): S7619497A

病人症状:
- Patient's condition: 腹泻

服务项目: 针灸 / Acupuncture | 中药 Medication | 推拿 Massage | 刮痧 Scraping
药罐 Medication cupping | 火罐 Fire Cupping | 艾灸 Moxibustion
针灸减肥 Acupuncture Slimming | 推拿减肥 Massage Slimming | 放血 Take out Blood

- Services items: 推拿
服务费用:
- Service Charges (Treatment Fee): $100-
服务日期:
- Service Date (Date of Treatment): 10/12/2019
服务医师:
- Name of TCM Practitioners: Sun
备注:
- Remarks:

一心中国中医 Yi Xin TCM Medical Clinic

144 Upper Bukit Timah Road, #04-15 Beauty World Centre, Tel: 6467 7882

AXA's :

兹有 PATRICK LOW CHUN LEONG 刘俊龙

IC 7B1949 7A 在 26/08/2019 由于肩颈扭伤来我

-此诊所推拿(TCM)治疗. 特此证明!

Wang Ping Ping

22/7/2020

English (default) LKK AUTO CONSULTANTS PTE LTD (TP)

SERVICE REQUESTS MESSAGES CLAIMS

Pls offer as per below computation

Type
Question

Message
TCM memo only stated that insured went for TCM treatment on 26 Aug, but did not include any recommendations on the follow-up sessions required. If claimant wants a speedy settlement, we are willing to offer an additional $325.00 for all TCM bills incurred within one month following the accident ($75 on 2/9/2019, $75 on 9/9/2019, $75 on 17/9/2019, $100 on 23/9/2019). If TP agrees, please ask TP to sign DV as full and final settlement including BI. If TP disputes and requested for more, please request for additional memo from GP / TCM to indicate the recommended sessions due to the injuries arising from the accident. Feel free to call me to clarify if there are additional queries. Thank you!

Reply

Patrick Low Chun Leong
C/O 54 YUNNAN ROAD
SINGAPORE 637917

OUR REF : 93704XA

YOUR REF : -TBA-

DATE : 20/07/2020

ATTN: THE MOTOR CLAIMS DEPT
AXA Insurance Pte Ltd

Dear Sir/ Mdm,

Re: Accident involving vehicle no. SLV9370P & Your Insured SJQ6446A

On 26/06/2019 along Clagmore Hill turn to Dingsett Drive

I/We wish to inform you that my/our vehicle have been completed repairs to my/our satisfaction by M/S SNG AH TEE MOTOR & PANEL SERVICE PTE. LTD. I/We therefore propose to claim from you as followed:-

1.	COST OF REPAIR / EXCESS	S$ 3746.98
2.	LOSS OF USE $ 100.00 /per DAY FOR 5 DAYS	S$ 500.00
3.	SURVEY FEE (Survey Mng LKK)	S$ -
4.	POLICE REPORTS/ LTA SEARCH FEE/ GIA REPORTS	S$ 2.00
5.	OTHERS (Medical Fee)	S$ 1820.95
	TOTAL:	S$

For the payment, kindly make payable directly to my/our repairer M/S SNG AH TEE MOTOR & PANEL SERVICE PTE LTD of BLK 3 PIONEER ROAD NORTH #01-18 S'PORE 628457.

Your kind and early co-operation will be greatly appreciated.
Thank You.

Yours Faithfully,

Enclosed documents:-
GIA report/assessment ☑
Original/Copy of Surveyor report ☐
Original/Copy of Photographs ☐
Insurance Card/ Logcard ☐
Copy of IC/ Driving License ☐
Witness Statement ☐
Final Bill / Tax Invoice ☑
Others Statutory, Medical Fee ☑

SNG AH TEE MOTOR & PANEL SERVICE PTE LTD
BLK 3 PIONEER ROAD NORTH #01-18
SINGAPORE 628457
TEL: 6268 6183 FAX: 6268 1429

YOUR REF : SJQ 6446A

ATTN: MOTOR CLAIMS DEPT

AXA INSURANCE PTE LTD
8 Shenton Way #24-01
AXA Tower (S) 068811

RE: THIRD PARTY CLAIM FOR ACCIDENT INVOLVED SLV 9370 P **AND** SJQ 6446 A
ON 26/08/2019 **ALONG** Claymore Hill turn to Draycott Drive

LETTER OF AUTHORITY

Dear Sir / Madam,

I, Patrick Law Chun Leng hereby authorize and appoint **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD of BLK 3 PIONEER ROAD NORTH #01-18 SPORE 628457** to claim on my behalf of the above mentioned matter against SJQ 6446A.

I further authorize SNG AH TEE MOTOR & PANEL SERVICE PTE LTD to release my personal information to the third party such as the third party's insurance to direct the payer to make the cheque in favour of M/s **SNG AH TEE MOTOR & PANEL SERVICE PTE LTD.** In case of unsuccessful claim of the third party, Sng Ah Tee Motor & Panel Service Pte Ltd has the right to bill me the necessary cost and disbursements. I/We also acknowledge that the repair of my vehicle will be done in lumpsum as per what the insurer's surveyor has recommended. I hereby authorize my driver _____ to do necessary paperwork for the claim.

I further acknowledge that any settlement that 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.

Yours Faithfully,

X _____
Signature of Owner

孫亞弟汽車燒焊私人有限公司
SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

Blk 3, Pioneer Road North, #01-18 Singapore 628457
Tel: 6268 6183 (4 Lines) Fax: 6268 1429
Email: sngahtee@singnet.com.sg
Website: www.sngahtee.com
RCB. Reg. / GST Reg. No: 200810440N

INVOICE. SO004273

AXA INSURANCE PTE LTD

8 Shenton Way #24-01
AXA Tower (S) 068811
-
ATTENTION :
CONTACT : -

FAX NO: 68804838

DATE 20/03/2020
ACCIDENT DATE : 26/08/2019
VEHICLE NO : SLV9370P
CHASSIS/ENG NO :
VEHICLE MODEL : VOLKWAGEN CADDY
CLAIM NO : SURVEY BY LKK
POLICY NO :
REMARK 9370AXA TP AGST SJQ6446A

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
			** LIST PRICE **				
			SUB-TOTAL:				0.00
			** WORK LABOUR **				
			AS PER AUDATEX REPORT	3501.85			3,501.85
			SUB-TOTAL				3,501.85

SHARON

SNG AH TEE MOTOR & PANEL SERVICE PTE LTD
BLK 3 PIONEER ROAD NORTH #01-18
SINGAPORE 628457
TEL: 6268 6183 FAX: 6268 1429

PAGE: 1 of 1

SUB-TOTAL :	S$	3,501.85
ADD 7% GST.	S$	245.13
GRAND TOTAL :	S$	3,746.98

ON BEHALF OF SNG AH TEE PANEL & SERVICE PTE LTD E&OE