Cecilia Chong (LKK Auto)

From:

Cecilia Chong (LKK Auto)

Sent:

Thursday, 19 December 2019 2:17 PM

To:

nats147@list.ru

Subject:

<STANDARD LETTER> OUR REF: CC4/ASM19017721/Egb3 *** ACCIDENT INVOLVING

SLL 2162Y & SMA 3163J ON 07/10/2019 ***

Importance:

High.

19 DECEMBER 2019

AMIRKHANIAN NATALIA

Dear Sir/ Mdm

OUR REF

: CC4/ASM19017721/Egb3

YOUR REF

: SLL 2162Y

ACCIDENT INVOLVING SLL 2162Y & SMA 3163J ALONG/AT ALEXANDRA RD ACCESS TO AYE ON 07/10/2019

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 RAAIM CAR BODYWORKS PTE LTD acting on behalf of the owner of SMA 3163J 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 from your company
- Authorisation letter
- Rental Agreement/ Leasing Agreement
- Coloured photographs of accident scene (if any)
- COUNTER CLAIM STATUS AGAINST THIRD PARTY
- 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 ceclliachong@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Cc AXA Insurance Pte Ltd (Motor Claims Dept)

"Please note that our proposal and correspondence with you is strictly on a without prejudice basis and should not be construed as an admission of liability on our part and/or that of our policyholder and/or the authorised driver. The terms of our without prejudice engagement should not be disclosed in any other related matter(s) in respect of this accident nor should it be binding in any other related claims."

"Best Wishes for Merry Christmas & Happy New Year 2020"

Best Regards, Cecilia Chong | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6749-4274 | email: <u>CeciliaChong @lkkauto.com</u> fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

利克耳喷漆私人有限公司 RAAIM CAR BODYWORKS PTE LTD

Blk 2 Kranji Loop #01-04 Singapore 739538 Tel: 6694 3197 Fax: 6694 3191

Email: Raaim.CarBW@gmail.com

REG No: 201327842N

LETTER OF AUTHORITY & INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SMA 3/63] & QLY162 !
I/We Chy Found Yet UEN/NRIC NO. S7618 CAYC owner of Vehicle No. No. No. No. No. S7618 CAYC owner of Vehicle No.
to assign the whole proceeds of my/our third party claim to you and if applicable, our solicitors (to be appointed by you on my / our behalf) shall accept this as my /our irrevocable authority to pay the amount compensated direct to you after deduction of their costs on a solicitor & client basis. I/We undertake to co-operate fully with you and our solicitors to see the claim to a successful conclusion.

If third party driver and and/or his employer and/or the vehicle owner and/or insurer reject liability, i/We will fully be responsible for the repair costs and other incidentals.

I/We also authorise you to sign all discharge vouchers/indemnity forms and all necessary paper in connection with the above claim in my/our absence.

I/We authorise you to appoint such a firm of solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/we undertake to inform you and/or the solicitors appointed by you on my/our behalf in the event of the third party's insurance company communicate with me/us directly by telephone or in writing and I/We further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you.

My/our vehicle is repaired by the repairer on my/our will without any inducement, threat and/or promise.

In the event that the repairer is compelled to enforce this undertaking, I/We agree that I/shall pay for the legal costs incurred by the repairer on a solicitor and client's full indemnity basis.

Owner Signature

(Company Stamp if applicable)



WITHOUT PREJUDICE to:

(a) Insurers' Subrogated Claim and/or (b) Any Personal Injury Claims [Note: This Notice supersedes any inconsistencies found in this Discharge Voucher!

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLL 2162Y (Insd veh)		
	SMA 3163J (TP veh)	Model: MAZDA 2	
Date of Accident/ Time:	07/10/2019	avvanini i vesecus	

Repair Es	timate	- S			8.071.36	
Final Rep	air Cost	:5			3,263.50	(W/GST)
Loss of U	se	:5			400.00	8 days at \$50.00 per day
Rental (if	any)	:\$				days at 5 per day
LTA / GIA	Search Fee	- 5			2.00	
Others:		:5			1.0	
		- 5				
Final Settlement Sum		15			3,660.00	(GLOBAL SUM)
Payee N	ame : RAAIM CAR E	BODYWORKS	TE LTD		S. F. H. S. W.	
ts Third F	arty Workshop GIA Reg	pistered? [] YES [X] NO	(Kindly indicate below)
A)	For Non GIA Reg	istered Worksh	op:	Agreed	Liability 100 (16]
B}	For GIA Registers	ed Workshop:		BOLAZ	Applicable: Yes/Ala BO	LA Scenario No: 27
	BOLA Liability:(%)			Assess	ed Liability (*):	(%)
	 Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply. 					

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 policyholdeXauthorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

ge the authority of our client to act for and on their behalf in this

Signature prepresentative / Workshop stamp

Signature of AXA's surveyor/representative.

Name of AXA's surveyor /Representative

Date:

Signature of Witness / Wo Name of Witness:

(if applicable)

Date:



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-19-164572

Date of Request:

07/10/2019

Your Ref No:

Online Purchase

Vermogen Ace Pte Ltd 60 Jalan Lam Huat Singapore 737869

Dear Sir/Madam.

Enquiry Date

07/10/2019

Enquiry By

Llm Jian Zhi, Edmond

TP Vehicle No.

SLL2162Y

Accident Date

07/10/2019

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:

[X] GIRO [] Cash [] Cheque



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

Third Party Insurer Enquiry

Our Ref No:

GR-19-164572

Date of Request:

07/10/2019

Your Ref No:

Online Purchase

Vermogen Ace Pte Ltd 60 Jalan Lam Huat Singapore 737869

Dear Sir/Madam,

Enquiry Date

07/10/2019

Enquiry By

Lim Jian Zhi, Edmond

TP Vehicle No.

SLL2162Y

Accident Date

07/10/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLL2162Y	AXA Insurance Pte Ltd	12/03/2019-11/03/2020	6338 7288

Thank You.

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.

This is a computer generated document and requires no signature.