

Hsiao Tong (LKKAUTO)

From: Hsiao Tong (LKKAUTO)
Sent: Tuesday, 22 October 2019 1:55 PM
To: claims@transcab.com.sg
Cc: transcab_avacclaims@ava-ins.com
Subject: ACCIDENT INVOLVING SHD 9703E(AXA) AND SLC 965H ALONG/AT POTONG PASIR AVE 1 ON 05/10/2019

22 Oct 2019

Transcab Taxi
Singapore

Dear Sir,

OUR REF : CC4/ASM19017892/Upb3 // S9M0230R
YOUR REF : P1680520 (SHD9703E)
ACCIDENT INVOLVING SHD 9703E(AXA) AND SLC 965H ALONG/AT POTONG PASIR AVE 1 ON 05/10/2019

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 ZOOM AUTOWERKS PTE LTD acting on behalf of the owner of SLC965H against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your driver favour as it is a head-to-rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of S\$5,000/- is attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim. The applicability of the excess is as follows:

- 1) Any settlement equal to or above the excess, you shall be liable to make the payment of \$5000/-; or
- 2) Any settlement below the excess, you shall be liable for the amount settled.

We shall keep you informed of the third party claim settlement and thereafter kindly let us have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by us for the above subject matter, we expressly reserve all our rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

As Insurers, 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 AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following 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)
- 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 AXA immediately. You may email it to cst@axa.com.sg / chewht@lkkauto.com or deliver it by hand to our 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), 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 6742 3197 or email us at chewht@lkkauto.com.

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

Best Regards,

Hsiao Tong, Chew (Ms) | 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)



ZOOM AUTOWERKS PTE LTD

130 Bedok Reservoir Road, Eunos Spring
#08-1339 Singapore 470130
Tel: 9450 7920
zoomautowerks@gmail.com

LETTER OF AUTHORIZATION

Accident on 05/10/2019 02.53 along JUNE of POTONG PASIR AVE 1 X AVE 2
Involving vehicles SLC 965 H, SHD 9703 E

In consideration of Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130, repairing my/our motor vehicle no SLC 965 H at my request, I/We, HJ CAR RENTAL PTE LTD ("the claimant") of _____ (address) bearing NRIC No 201843291 R the owner of motor vehicle no SLC 965 H, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by Zoom Autowerks Pte Ltd.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to Zoom Autowerks Pte Ltd the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into Zoom Autowerks Pte Ltd account. Upon clearance of the said cheque, I/we further authorize Zoom Autowerks Pte Ltd and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to Zoom Autowerks Pte Ltd shall amount to a good discharge of Zoom Autowerks Pte Ltd and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 05 day of 10 (month) 20 19 (year)



Signed by "the claimant"

Name: HJ CAR RENTAL PTE LTD

NRIC No: 201843291 R



Signed by Zoom Autowerks Pte Ltd

Name: ROLAND THONG



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SH0703E (Insd veh)	Model: AUDI A3 SEDAN 1.4 TFSI (AMBIENTE)
	SLC06BH (TP veh)	
Date of Accident/ Time:	25/10/2019	

Repair Estimate	: \$	12,076.39	
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)	: \$	1,000.00	
Payee Name: Zoom Autowerks Pte Ltd			
Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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:			


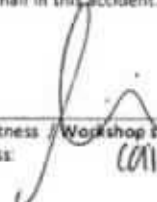

NOTE:

- 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		Signature of Witness / Workshop Stamp (if applicable)	
Name of Representative:		Name of Witness:	
Date:		Date:	
		COI & IAN WEN, ELIN 12/11/2019	
Signature of AXA's surveyor/representative:			
Name of AXA's surveyor /Representative:			
Date:			

Land Transport Authority

10, Sin Ming Drive

Singapore 575701

GST Registration No. M4-0006529-2

Print Date/Time: 08 Oct 2019 / 12:44:07

Receipt Date/Time: 08 Oct 2019 / 12:43:57

Tax Invoice/Receipt

Receipt No: ITNET-00000-191008-001483

Previous Receipt No:

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
Result of Insurance Enquiry - SHD9703E As at 05 Oct 2019/02:55:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHD9703E Enquiry Fee 20191008124310823516	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - GBF7591J As at 07 Oct 2019/09:45:00 Insurance Co: NTUC INCOME INS CO-OP LTD				
2	Insurance Enquiry - GBF7591J Enquiry Fee 20191008124310858819	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SGV230D As at 08 Oct 2019/21:35:00 Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD				
3	Insurance Enquiry - SGV230D Enquiry Fee 20191008124310914965	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		21.00	1.47	22.47
Rounding Difference				0.02
Total Amount Payable				22.45
Paid By				
	xxxxxxxxxxxx0962	Credit Card: Visa /MasterCard		22.45
Total				22.45
Cash Change				0.00
Tendered Amount				22.45
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.