

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

21 NOVEMBER 2019

LIM SIEW FUNG **BLK 469B ADMIRALTY DRIVE** #16-67 SINGAPORE 752469

Dear Sir/ Mdm

OUR REF

: CC4/ASM19018075/Uga3

YOUR REF : SJH 7965J

ACCIDENT INVOLVING SJH 7965J & SJQ 1070H ALONG/AT JUNCTION OF PEREIRA RD PAYA LEBAR RD ON 11/10/2019

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 EXCLUSIVE ENTERPRISE PTE LTD acting on behalf of the owner of SJQ 1070H 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 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)



8 Kaki Bukit Ave 4 #03-50 PREMIER @ KAKI BUKIT Singapore 415875 Tel: 6245 9655 / 97356016 Fax: 6245 9678 (Co Reg No: 201906614W) Email: exclusiveenterprise50@gmail.com

AUTHORIZATION TO ACT

- to the sample and tack blow that were	'third party claimant'') of 543260
for me with respect to my claim for repair cost and/or of ("claim") for my vehicle no. SJQ1070 H pursuant to the accident to which occurred on 11/10/	o.) hereby authorize ("workshop") to act rental and/or loss of use that was damaged 2019 (date) along
involving vehicle no. SJH 7965 J ("accident").	(location)

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheques being made in favor of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as the driver/owner/insurers of the other vehicle/s in concerned.

Dated this 30 day of OCT 20 (9

Signature:

(third party claimant)

Witnessed By

(workshop)



Vehicle No:

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle	thicle No: SJH 7995.					(Insd veh	1)		_			
		SJQ 1070H				(TP veh)		Model: HONDA CIVIC				
Date of	Date of Accident/Time: 11/10/2019							THE SAME TO SAME THE				
Repair Er	itimate		:5									
Final Rep	air Cost		_	-	_			_	8,543.44			
Loss of U			:5	2,000,00					- (1	- (WGST)		
Rental (if			-5								days at \$	per day
	Search Fee	_	- 5	720.00				< e	days at 5 120.00	per day		
Others:	THE REAL PROPERTY.		:5	7.45								
			:5	_	_							
Final Settlement Sum		: 5										
			11177						3,517,45	1		
to Third D	me : EXCLUSIVE ENTER	APRISE PTE I	70	_						-		_
is rined y	arty Workshop GIA F	legistered	1	1	YES	[×]	NO	(K	indly indicate belov	1		
)	For Non GIA R	For Non GIA Registered Workshop: Agric			Agreed	Lia	bility100 (161				
)	For GIA Regist	For GIA Registered Workshop:									-	
					BOLA Applicable: Yes/No BOLA Scenario No:							
		BOLA Liability:(%)				Assessed Liability (*): (%):						
	* Assessed Liab	ility to be j	liled o	nly fo	or chiai	n collici	ons and A	here	oses where BOLA do		*****	
emarks:		_		-	10.		The second of	97.8	uses where BOLA do	es n	ot apply.	
												-

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 / involces are not received within 7 days of this signed confirmation, we will automatically revert to loss of use claim

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.

201906614W Signature of Workshop representative Workshop stamp Name of Representative Date:

Signature of Witness / Workshop stamp (if appleable) Name of Witness

2019066149

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

FONG MOTORS CAR RENTAL

1 KAKI BUKIT AVENUE 6 #01-45 KAKI BUKIT, AUTOBAY SINGAPORE 417883 HP: 8182 0548 H/P: 9633 7504

UEN: 53371081B

No: 10464

VEHICLE RENTAL AGREEMENT

Name: (as in I/C) N		Vehicle No: SmH IDDK Replace Veh No: STQ	HOFOL	
NRIC/PASSPORT NO:		Mileage Out:		
Address (Res): SUK 2	60 C Sengkang East Wa	Make & Model: Auto / Manua	al	
# 07-454 S.5	43260	Date Out: 11/10/19 Time: 1905		
Name & Address of er	mployer:	HIRE / PERIOD EXPIRY Time:	7 9 1053	
Occupations	Part of the second	BUCKET SALAM COM PROMISE OF		
Driving License No:	Driving Exp: D/L Type: Local /	CHARGES:		
Issue Date:	Date of Birth:	Daily 6 @S 180 Per day	0 -	
Tel: (O)(F	HP: 9012 647	C CV 100 reidey	108	
ADDITIONAL DRIVER'	S PARTICULAR	Per Week		
Name: (as in I/C)	Section of the state of the section	Ter moner	1	
MAIC/PASSPURI NO: _		nours @\$ Per hour		
Address (Res);		The state of the s	1	
Name & Address of en	ployer:	CDW @\$ Per day/month		
		PAI @\$ Per day/month		
Occupation:	Driving Exp:	Delivery / Collection Services	-	
			0/20	
VEHICLE CHECK LIST:		PETROLLEVEL 5 MARKS	200	
		Out E 1/4 1/2 3/4 F		
_	1			
No Teles		Out E 1/4 1/2 3/4 F EXTENSION		
		10		
	• (IIII) A	Misc.		
	\ H	TOTAL CHARGES \$	offe	
	iU	Hirer's Signature:	_	
INDICATE:	D - DENTS			
A - ACCIDENTS	S - SCRATCHES	Additional Driver's Signature:		
have read and seems to the c	manufacture for			
ayable under this agreement a	nd for parking and traffic infringements	Agreement. If I have presented a charge/credit card for payment, I agree that all am may be billed to that account and my signature above will be considered to have a	ounts	
in the charge/credit card. All in	formation that I have given to FONG Mo	only be sined to that account and my signature above will be considered to have n OTORS CAR RENTAL in connection with this agreement is true.	ade	
IMPORTANT NOTES				
THE HIRER SHALL BE LIABLE FOR E.	XCESS CHARGES FOR ANY LATE METURN AT TH	RPENIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE. I. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS. IS RATE SHOWN FEE HOUR OF FEE DAY, INCLUSIVE OF COW AND/OR PAY WHERE APPLICABLE. ELEX IF THERE IS BIODICY HUMBED. A POLICE NEPORT MUST BE MADE WITHIN 24 HOURS.		
	ALL THE STATE OF T	COMPANY FOR MATTER CONSENT OF THE COMPANY FORG MOTORS CAR RESIDEN		
FURTH OF VEHICLE, THE HIRER / 194	WHEN IN THE ENGINEER PLANT COLUMN THE PROPERTY OF	OF HIRER / DAIVER!" FAILING WHICH THE DAY AND TIME BUSINESS BELOW SHALL DEEMED TO D THE SEN THE BE ACCEPTED AS CONCLUSIVE EVADENCE OF THE SAME AND SHALL NOT IN	38	
	LEAGE CHECKED BY FO	THE ALTOASKAR RENTAL IN A		

Fong Motors Car Rental

(53371081B) 1 Autobay@Kaki Bukit #01-45 Singapore 417883

Tel: 6748 5648

INVOICE

FM-000521

C/O EXCLUSIVE- NG YEAN KEONG

Your Ref.

BLK 260 SENGKANG EAST WAY

Our D/O No. :

#09-454

: C.O.D.

SINGAPORE

Terms Date

: 18/10/2019

TEL: 90126475

FAX:

Page

: 1 of 1

Iten	n Description					
	ocsorption	Qty	MOU	U/ Price	Disc.	Total
1.	SMH122X (11/10/19- 17/10/19)			S\$		S\$
		1	CAR	1.080.00		1 000 00

REF AGREEMENT NO. 10464

REPLACE CEHICLE NO. SJQ1070H

SINGAPORE DOLLAR ONE THOUSAND EIGHTY ONLY

Total

1,080.00

Notes:

1. All cheques should be crossed and made payable to Fong Motors Car Rental

Goods sold are neither returnable nor refundable. Otherwise a carrollation fee of 20% on purchase price will be imposed.

> Back to OneMotoring

Land Transport Authority

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

Print Date/Time :

14 Oct 2019 / 10:07:32

Receipt Date/Time: 14 Oct 2019 / 10:07:32

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191014-000562

Previous Receipt No. -

Frevious Receipt No.;				
S/N Item Description/ Business Transaction Referen No. Result of Insurance Enquiry - SJH7965. As at 11 Oct 2019/15:45:00	J	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Insurance Co; AXA INSURANCE PTE L	TD			
Insurance Enquiry - SJH7965J				
Enquiry Fee 20191014100529933267		7.00	0.49	7,49
	Sub-Total	7.00	0.49	~
	Total Before Rounding	7.00	23/3/47	7.49
	Rounding Difference	7,00	0.49	7.49
	Total Amount Payable			0.04
	roun Amount Payable			7.45
374	Paid By			
570107017	xxxxxxxxxxxx9489	Credit Card.		
27~	Total	Visa/MasterCard		7.45
				7.45
	Cash Change			0.00
	Tendered Amount			7,45
	Excess Refundable Amount			0.00
				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.