Cecilia Chong (LKK Auto)

From:

Cecilia Chong (LKK Auto)

Sent:

Wednesday, 18 December 2019 11:49 AM

To:

chewlm@yahoo.com

Subject:

<STANDARD LETTER> OUR REF: CC4/ASM19018083/Ugb3 *** ACCIDENT INVOLVING

SJD 7891J & SJZ 6353L ON 09/10/2019 ***

18 DECEMBER 2019

CHEW LOON MENG

Dear Sir/ Mdm

OUR REF

: CC4/ASM19018083/Ugb3

YOUR REF : SJD 7891J

ACCIDENT INVOLVING SJD 7891J & SJZ 6353L ALONG/AT TPE TEDS SLE NEAR UPP CHANGI EAST EXIT ON 09/10/2019

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 SJZ 6353L 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.

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"

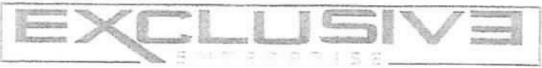
Best Regards,

Cecilia Chong | Case Handler

LKK Auto Consultants Pte Ltd

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

IKK Save the Earth Print only when necessary



8 Kaki Bukit Ave 4 #03-50 PREMIER @ KAKI BUKIT Singapore 415875 Tel: 6245 9655 / 97356016 Fax: 6245 9678 (Co Reg No: 201906614W) Email: exclusivec:nterprise50@gmail.com

AUTHORIZATION TO ACT

I, Tan Loo Tiong	_("third party claimant") of
BLE 461, Hougang Ave 10 # 13-978 S. 53	
(address), owner of \$32 6353 L (vehicle	no.) hereby authorize ("workshop") to act
for me with respect to my claim for repair cost and/	or rental and/or loss of use
pursuant to the accident to which occurred on 411	Aland (data) also
Tampines Express way Along TPE involving vehicle no. SJD 7811 J ("accident	t"),
I further authorize the workshop to settle my above ment they deem fit and the workshop is further authorized to settlement of my claim with payment cheques being made	receive parmant Such
I further acknowledge that any settlement the workshop in a without prejudice and without admission of liabili- driver/owner/insurers of the other vehicle/s in concerned.	nav reach on my babatet.
Dated this 06 day of Nov 20	19
Signature: Witnessed By	Ge.
(third party claimant)	(workshop)



Vehicle No:

AXA THIRD PARTY DIRECT SETTLEMENT

(Insd veh)

SJD 7891J

S		SJZ 63	1531		(TP veh)	Model: KIA CERAT	O EX FORTE
Date of A	ccident/Time:	09/10/	_		5	+	
		03/10	2010	5			
Repair Es	timate		15	11.986.2	9		
Final Rep.	air Cost		:5	5,300.00			
Loss of U	se		:5				days at S per day
Rental (if	any)		:\$	400.00			4 days at \$100,00 per day
LTA/GIA	Search Fee		:5	38,45			
Others:			:\$				
			:5				
Final Sett	tlement Sum		15	5,736.45			
Payee Na	me: EXCLUSIVE	ENTERPR	SE PT	ELTD			
Is Third P	arty Workshop GIA	Registere	1?] YES [>	<1 NO	(Kindly indicate below	r)
A)	For Non GIA	Registered	Work	shop:	Agreed	Liability 100 (%)
5)	For GIA Regi	stered Wor	kshop		BOLA A	pplicable: Yes/ No BO	LA Scenario No:
	BOLA Liabilit	/:	[96]		Assesse	ed Liability (*):	[96)
							3000

NOTE:

Remarks:

- 1. 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.

Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

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: * Tm/ Guang X: an
Date:

2019005T4W

Signature of Witness / Workshop stamp (Laphilicable)
Name of Witness: Cha: Hu: Pan 4

HTERA

2019066149

Date: 03/01/2020

Dete: 3/1/202 0

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

Date:

3/1/2020

RENTAL AGREEMENT



PLATINUM RENTALS PTE LTD

8 Kaki Bukit Avenue 4 #04-07, Singapore 415875

Tel: 5917 7880 | Fax: 5926 2686 | www.piatinumgroup.com.sg

INV NO:

XERO INV:

Company Regn: No.201701221K

HIRER'S PARTICULAR	Vehic	e No. S	SGR	157	13	Miles	ige Out			
Hame (as in VC): TAN CAVIN	Make & Model HYUNDAL AVANTE and Manuel Group									
HRIC/MASSPORT NO: S8720633E	E out one ID-0CT-19						Time		204	_
Address (Res) APT BLK 461 HOUGANG AVENUE	Replac	e Veh			-	Miles	AJA.F			
10 #13-978 SZNGAPORE 520.461	pur:	Onte				OUT				
			00) \$35	00 (TP	o) sg			\$3500	(TPO) M'S	SIAN
HELMAN SOMEON HINDUNG HIS POLICE	COLL	SION D	DAMAG	WAIV	ER		Exe			DE/N
Name & Address Of Employer	-	GES	0-00	-	TO		XT-			
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Occupation: Driving Exp:	Week	ly	@S			per w	eek .	7	1	
Driving Licence No: D/L Type: Local / International	Monti	hily	@S			perm	poth			\top
Pass Date Date Of Birth: 19 -701-1987	Hours	9	@ \$			per h	out			
Tel. (0) (145 051)	Other	1	es							
	cow		es							
DRIVEN'S PARTICULARS - If different from hiter)	PAI		øs			per da	v / me	esh		
	Delive	ry.Serv	rice				22.11-4			\vdash
Name (as in I/C):							SUB-1	OTAL S		
Address (Res):	PETRO	OL LEV	EL.							
	Out	1	1/4	1/2	3/4	3/4	Ŧ			
	in	Ε	1/4	1/2	3/4	1/4	2			
Telegiture (Hesident) :	EXTENS	NON								
(Diffice) :	Collect	on Ser	vice							
HRIC / PASSPORT Nu .	Miss:									
Nationality:										
Date Of Birth Age						тота	LCHA	RGES \$	600	
Driving License No: Pass Date:	Hente	d out t	292						000	
Type Cocal / IntT Issued:	Hirer's Signature Mun.									
	mirer's	Signa	une	0	/					_
HEMARKS			-							
IMPORTANTI	Additio	anal De	iver's S	enatur						

I have read and agree to the terms and conditions on both sides of this agreement, if I have presented a charge / credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature ablove will be considered to have been made on the charge / credit. All information I have given *PLATINUM RESTALS PIE LED* in connection with this agreement is true.

IMPORTANT

- DINLY FOR PERSONS AND ABOVE 26 AND SELOW 65 YEARS OLD WITH MORE THAN 3 YEARS DRIVING EXPERIENCE, ALTHORISED, LICENSED AND SIGNIFICATION AGREEMENT MAY DRIVE THE VEHICLE, OTHERWISE ADDITIONAL \$\$3000.00 EXCESS IS APPLICABLE.
- 2. ALL FARIOUS AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER AND ADMINISTRATIVE CHARGE WILL BE LEVIED DIL ANY TRAFFIC VIOLATIONS. REDIRECTED.
- 3 THE HIRER SHALL SE LIABLE FOR DICESS CHARGES FOR ANY LATE RETURN AT THE BATE SHOWN FER HOUR OR FER DAY, INCLUSIVE OF COW AND FOR PAI WHERE APPLICABLE.
- 4. VI.HICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT STUGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY "PLATINUM RENTALS PLEUTO"
- S. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO HENTAL OFFICE IMMEDIATELY, IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN

RETURN OF VEHICLE, THE HREER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HREEY/DRIVER" FACING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO "PLATINUM RENTALS FTE LTD." AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE DYDENCE OF THE SAME AND SHALL NOT BE CHALLENGED ON QUISTIONED ON ANY ACCOUNT WHATSOMER.

VIDENCE OF THE	SAM	AND SHALL	NOT B	E CHALLENGED O	M QUESTIONED ON AN	ACCOUNT WHATSDEVER.	CONTRACTOR SECTION SECTIONS	3,50741-13626-15.
DATEIN	1	TIME IN	ı	MUFARE	CHECKED BY			



Platinum Rentals Pte Ltd INVOICE

8 Kaki Bukit Avenue 4 #03-36 Premier @ Kaki Bukit Singapore 415875

Tel: (65) 9616 1151 Fax: (65) 6926 2686 DATE INVOICE # CUSTOMER ID 14/10/19 100007 58720633E

BILL TO

TAN CAVIN

APT BLK 461 HOUGANG AVENUE 10 #13-978 SINGAPORE 530461 9455 0512

Ref No. ST1125		A	MOUNT
HYUNDAI AVANTE		No.	
SGR 1571 J		180	
		Nest	
RENTAL PAYMENT			
ERIOD: 10-OCT-19 TO 14-OCT-19 150.00 PER DAY *4 DAYS = \$600		30	
130.00 FER DAT 4 DATS = \$600		-	600.0
Control of the Assessment of the Property of the Assessment of the		150.00	
		30.0	
		15036-0	
		100000	
		100	
		178	
	Subtotal		600.00
	Subtotal Taxable		600.00
	Taxable Tax rate	183	-
OTHER COMMENTS	Taxable Tax rate Tax due	(8)	0.000
	Taxable Tax rate Tax due Other		0.000
	Taxable Tax rate Tax due	\$	0.000
	Taxable Tax rate Tax due Other		0.000

*** PLEASE MAKE PAYMENT TO MAYBANK ACCOUNT: 040-210-687-64 ***

If you have any questions about this invoice, please contact administrator @ 9616 1151 or trina@pcr.sg

Thank You For Your Business!



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-19-168032

Date of Request:

11/10/2019

Your Ref No:

WALK IN NG

EXCLUSIVE ENTERPRISE PTE LTD 8 KAKI BT AV 4#03-50 PREMIER@KB SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No.

SJZ5353L

Date of Accident:

09/10/2019

Place of Accident:

TPE

Involving Vehicle No: SJD7891J

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 [X] Cash [] Cheque



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-19-168035

Date of Request:

11/10/2019

Your Ref No:

WALK IN NG

EXCLUSIVE ENTERPRISE PTE LTD 8 KAKI BT AV 4#03-50 PREMIER@KB SINGAPORE 415875

Dear Sir/Madam,

Date of Accident:

09/10/2019

Vehicle No:

SJZ6353L

Place of Accident:

ALONG ROAD 1 TOWARDS EXPRESSWAY ALONG TPE

Involving Vehicle No: SJD7891J

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (\$\$)	QTY	AMOUNT (S\$)
SJD7891J	ALONG ROAD 1 TOWARDS EXPRESSWAY ALONG TPE	14.00	1	13.08
GST Amount				0.92
Total Amount I	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 [X] Cash [] Cheque

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

10 Oct 2019 / 16:44:21

Receipt Date/Time: 10 Oct 2019 / 16:44-21

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191010-002425

Previous Receipt No. :

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (SS)
Result of Insurance Enquiry - SJD7891J As at 09 Oct 2019/22:00:00 Insurance Co: AXA INSURANCE PTE LTD		321 (34)	(00)	(33)
1 Insurance Enquiry - SJD7891J Enquiry Fee 20191010164217148848		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
SJZ 6353 L	Paid By			
215	южихихих 9489	Credit Card. Visa/MasterCard		7,45
	Total			7.45
	Cash Chunge			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.