Cecilia Chong (LKK Auto)

From:

Cecilia Chong (LKK Auto)

Sent:

Thursday, 19 December 2019 11:53 AM

To:

ginatay@ubts.com.sg

Subject:

<STANDARD LETTER> OUR REF: CC4/ASM19018362/Ugb3 *** ACCIDENT INVOLVING

XB 8270P & GT 919L ON 11/10/2019 *** (REVISED)

Importance:

High

19 DECEMBER 2019

UBTS PTE LTD

Dear Sir/ Mdm

OUR REF

: CC4/ASM19018362/Ugb3

YOUR REF

: XB 8270P

ACCIDENT INVOLVING XB 8270P & GT 919L ALONG/AT 15 PANDAN CRESCENT LEVEL 4 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 THINK ONE AUTOCARE PTE LTD acting on behalf of the owner of GT 919L 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 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)

Save the Earth Print only when necessary

From: Cecilia Chong (LKK Auto)

Sent: Thursday, 19 December 2019 11:52 AM

To: ginatay@ubts.com.sg

Subject: <STANDARD LETTER> OUR REF: CC4/ASM19018362/Ugb3 *** ACCIDENT INVOLVING XB 8270P & GT 919L ON

11/10/2019 *** Importance: High

19 DECEMBER 2019

UBTS PTE LTD

Dear Sir/ Mdm

OUR REF : CC4/ASM19018362/Ugb3

AUTHORISATION TO ACT

I/We, PROM	MO SPORE	F PTELT	D	of	21	404 GUAN	ROAS
		narty claimant"		-	. Way	(address) GT 919 L	W
0101					700700	(vehicle nun	nber)
hereby authoris	ed THINK ON	E AUTOCAR	E PTE. LT	TD ("the wor	rkshap) t	o act for me	
with respect to	my claim for re	epair costs ar	nd/or renta	I and/or I	oss of	use ("claim") for my	
	1-1					to the accident w	vhich
						#04-1A & C	
	(date)	1172					
involving vehic	le number(s)	XB8271	77			("the other	er party").
0							77 - 77 104 100 10
I/We further as	uthorised the w	orkshop to s	ettle my at	ove men	tioned	claim in a mann	er that
they deem fit a	and the worksh	op is further	authorised	to receiv	e payr	nent further to s	ettlement
of my claim wi	th payment ch	eque(s) being	made in f	avour of t	the wo	rkshop.	
I/We further a	cknowledge tha	at any settlen	nent the w	orkshop n	nay re	ach on my behal	f is on
a without preju	udice and with	out admission	of liability	basis ins	ofar as	the driver / ow	ner/
insurers of the	other vehicle(s) is concerne	ed.				
	ase could not reall the necessar					Think One Auto	care to
I/We PRO	MO S'PORE	PTELTD				agreed and w	ill bear / pay
41.11	10		ue inccured	by Think	One /	Autocare Pte Ltd	
Dated this	11	(day) of	OCT.	(mont	403	20 <i>19</i> (year)	
Dated tills		(usy) or	2-72-7-01	(IIIOIII	11.7	(year)	
				Th		ne Autocare Pte	
					Sit	gapore 539522	1%
~ D	1			Tel	: 6844	3300 Fax: 6842	4000
L SAD	7.	atatana - su			CI	d bu Wab - word	To a set of
Signed by "	the third party	ciaimant"			Signe	ed by "the works	nop

(with company stamp)

(with company's stamp if applicable)



AXA THIRD PARTY DIRECT SETTLEMENT

venice	NO:		XB 8270P (Inso veh)	_			
			GT 919L (TP veh)	Model: TOYOTA H	HACE		
Date of Accident/Time:			11/10/2019				
Repair E	stimaté	:5		8,334.08			
Final Rep	pair Cost	:5		2,300.50	W/GST		
Loss of U	lite	:5			days at 5 per day		
Rental (ii	(any) WiGST	. 5		192.60	3 days at \$64,20 per day		
LTA/GIA	A Search Fee	-5		2.00			
Others:		1.5					
		: \$					
Final Set	tlement Sum	:\$		2,495.10			
Payee N	ame: THINK ONE AUT	OCARE PTE	ELTD	Samue Contract Contra			
Is Third I	Party Workshop GIA Regis	tered?	X) YES [] NO	(Kindly indicate below)		
1)	For Non GIA Registered Workshop:			Liability(16)		
For GIA Registered		Workshop:	BOLA A	pplicable: Yes/ No 80	LA Scenario No: 22		
	BOLA Liability:	BOLA Liability: 100 (%)			Assessed Liability (*):(%)		
	* Assessed Liability	* Assessed Liability to be filled only for chain callisions and for cases where BOLA does not apply.					
					Committee of the Commit		

NOTE:

Remarks

- 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.
- 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. Think One Autocare

18 Defu Lane Avenue 2

Singapore 539522 Tel: 5844 3300 Fax: 6842 47

Signature of workshop representative / Workshop stamp

Name of Representative: Mrcluel 19

Signature of AXA's surveyor/representative Name of AXA's surveyor /Repre

Signature of Witness / Workshop stamp (if applicable)

50620869

Name of Witness:

Date:



THINK ONE LEASING PTE LTD

(of Think One Group of Companies) 20 Ubi Road 4 #02-06 Think One Building Singapore 408622
Tel: (65) 6844 3300 24/7 roadside asst: 9678 8488 Fax: +65 6844 4164 Email: info@tol.com.sq Website: www.tol.com.sq ROC No.: 201115609M GST Reg No.: 20-1115609M

Bill To : AXA INSURANCE PTE LTD

Address : 8 SHENTON WAY

#27-01 AXA TOWER

SINGAPORE 068811

Tel

HP

Attn

: MOTOR CLAIMS DEPT

Fax:

Invoice Ref : JO201910-0382

Date

: 29/10/2019

Vehicle Num

: GT919L

Make/Model

: TOYOTA HIACE

Mileage(km)

: 0.00

Staff ID

: MICHAEL

Remarks/Ref

S/N Description

BEING RENTAL OF NISSAN URVAN GBA9636 FOR 3DAYS FROM 22.10.2019 TO 25.10.2019

Qty

Unit Price 120

0.00

Disc %

Amount SS 360.00

E & O.E.

SUB TOTAL

360.00

GST 7%

25.20 385.20

TOTAL SGD

for Think One Leasing Pte Ltd.



Think One Leasing Pte Ltd
(of Think One Group of Companies)
20 Ubi Road 4 #02-06 Think One Building Singapore 408622
Tel: +65 6844 3300 24/7 roadside msst: 9678 8488 Pax: +65 6844 4164 Emsil: info@tol.com.ag Website: www.tol.com.ag

ROC No.: 201115609M GST Reg. No.: 20-1115609M

Date: 22.10.2019

QUOTATION NO:

*delete where inapplicable

LEASING AGREEMENT NO: HA/ GT 9/9

SCHEDULE

This is a lessing Agreement made between us, THINK ONE LEASING PTE LTD (hereinafter referred to as "TOL" which shall include its successors-in-title and ussignt), identified as the Lessor and having our registered address 20, UBI ROAD 4 #02-06 THINK ONE BUILDING, SINGAPORE 408622

Hame of Hiner(s) PEH HEAL	NRIC/Passport/ RC/RB No:		Tel:	Tel:		
Address: BIK 702	0AD 413-8	371 5188	PE 120 702			
Div C 2		Person in Charg				
iame of Driver (1) (in full):		NRIC/Passport No:		Date of Birth:		
		W 752 573		21 51 25		
Priving Licence No:	T 201225-0 172	Issue/Expiry Date:		Country of Insue:		
(ame of Driver (2) (in full):	NRJC/Passport No:		Date of Birth:			
Driving Licence No:		Issue/Expiry Date:		Country of Issue:		
DESCRIPTION OF VEHICL						
tegistration No: GBA 9636	C Make/Model MSSW	VAW Colour:	fingine N	ia:		
Justais No:	Type: Pa	ssenger / Commercial*	Spare Tyre: Y / N*	CD/DVD	Player, Y/N*	
ools & Jack: Y / N* Remarks:						
ollection Date Tipe and Mileage:	8.30 9m	25.10 · 20	Report For Rename 12.3	O Hames	Onlings	
ermi Out: Empty / 1/4 tank / 1/2 tank				.1-10		
man court smallest to be some to be some	energy and the state of the sta	VESTINITIES CO.				
Note: The above Monthly Lease C at least 2 weeks in advance before will be charged accordingly.	the road tax for the Vehicle exp	ires, failing which TOL v	vill punchase the VPC	On your behalf at man	ket price and y	
DEPOSIT Amount 55	(equivalent to months	of Monthly Lease Char	go exclusive of GST	0 2		
CardyCheque*						
INSURANCE Subject to the payment of the Exc claims (unlimited), and (b) Third F	ess Amount below, the standard terty Property Damage (up to a s	Insurance for the rental o um of \$\$500,000.00), Ad	f the Vehicle will on ditional charges will	ly cover (a) Third Party apply for additional in	r injury and des surance coverag	
Excess Amount: SS	(per accident per claim)	la Singapore	011	(max 16.2-55		
Additional Insurance Coverage: MAXIMUM MILEAGE Maxi	Air side insurance: S\$	(per air side)	- 20.000 km hear 6	or Passanner Vehicles	Addition charg	
(see below):-	mum princage: 60,000 km/year	TOF COMMISSION VEHICLE	at anyhor and Jesse or			
Type of Vehicle	Additional 10,000 km or part thereof	Type of Vehicle		Addit or po	ional 10,800 k rt thereof	
(a) Life Style Van / Goods Van / Panel Van / 10 ft Lorry \$5500.00 (b) 14 ft Lorry \$5700.00 (c) 24 ft 6 Ten Lorry / Prime Mover \$31,200.00 (d) 24 ft 10 Tion Lorry / Prime Mover \$31,200.00		(f) Passenger Vehic	Passenger Vehicle 1.6cc to 1.99cc Passenger Vehicle 2.0cc and above		\$\$1,100.00 \$\$1,400.00 \$\$2,500.00	
e Agreement herein comprises the d agreed to the terms of this Agree	schedule above and the Terms ment. IN WITNESS whereof	and Conditions annexe the Parties hereto have	d hereto. The Hirer set their hands that	confirms that he has a day and the year fire	read, understoo it above writte	
med by the Hirer	No.	Endah One Leasing P	te £.td			
me; signation:	Name / C Designati			Lessor	Hirer	
	Company	and the second second			(HCC)	



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffies 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-19-170049

Date of Request: 15/10/2019

Your Ref No:

Online Purchase

Think One Autocare Pte Ltd No. 18 Defu Avenue 2 Singapore 539522

Dear Sir/Madam,

Enquiry Date

15/10/2019

Enquiry By

No Shee Pan

TP Vehicle No.

XB8270P

Accident Date

11/10/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
XB8270P	AXA Insurance Pte Ltd	29/12/2018-28/12/2019	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.



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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-19-170049

Date of Request: 15/10/2019

Your Ref No:

Online Purchase

Think One Autocare Pte Ltd No. 18 Defu Avenue 2 Singapore 539522

Dear Sir/Madam,

Enquiry Date

15/10/2019

Enquiry By

Ng Shee Pan

TP Vehicle No.

XB8270P

Accident Date

11/10/2019

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:

Date:

[X] GIRO [] Cash [] Cheque