

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

18 DECEMBER 2019

BOON LAY CORPORATION CLINIC PTE LTD BLK 350 JURONG EAST AVE 1 #01-1225 YUHUA PLACE SINGAPORE 600350

Dear Sir/ Mdm

OUR REF

: CC4/ASM19018431/Agb3

YOUR REF

: SMD 3808S

ACCIDENT INVOLVING SMD 3808S / SFD 89C / OTHERS ALONG/AT CLEMENTI ROAD ON 16/10/2019

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 **MG SOLUTION PTE LTD** acting on behalf of the owner of SFD 89C 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)

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

AUTHORIZATION TO ACT

I, TAY TIEN CHENG ("the third party claimant")
of BLK 138C YHAN CHING ROAD #22-135 S(613138) (address),
owner of SFD 89 ((vehicle no.) hereby authorize
MG SOZUTION PTECTD
("The workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
Vehicle No. SFD 19C that was damaged pursuant to the
accident which occurred on 16/10/2019 (date) along JUNCTION OF
CLEMENTI ROAD AND KENT RIDGE CRESCENT (location)
involving Vehicle No/sSMD 3808S
("The accident").
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 cheque/s being made in favour 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 insofar as the driver/owner/insurers of the other vehicle/s is concerned.
Dated this 6 day of 10 (month) 20 (year)
QUINON TO THE POPULATION OF TH
Signed by "the third party claimant" Signed by "the workshop"



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SMD 3808S(Insd veh)	
	SFD 89C (TP veh)	Model: HONDA STREAM
Date of Accident/ Time:	16/10/2019	

Repair Est	imate	:\$	22,900.57.			
Final Repa	air Cost	:5	, ve	5 34		
Loss of Us	e	:5		17 days at \$80.00 per day		
Rental (if	any)	:\$		days at S per day		
LTA/GIA	Search Fee	1:\$	The second secon	Der day		
Others:		1:\$				
		:5				
Final Settlement Sum		:\$	11,850.00	GLOBAL SUM (ALL-IN)		
Payee Na	me : MG SOLUTION PT	TE LTD	11,000.00	GEOBAE SOM (AEE-IN)		
ls Third Pa	arty Workshop GIA Registe	ered? [] YES [X] NO (Kindly indicate belo	w)		
A)	For Non GIA Registe	red Worksh	op: Agreed Liability 100	(%)		
B) For GIA Registered		Workshop:	BOLA Applicable: Yes/ NO B	OLA Scenario No: . >		
	BOLA Liability:	BOLA Liability:(%)		Assessed Liability (*): 100 (%)		
	* Assessed Liability t	o be filled o	nly for chain collisions and for cases where BOLA (
				2.61 (0.00000000000000000000000000000000000		

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.
- 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 plour client to act for and on their behalf in this accident

Signature of workshop representati Name of Representative: Warfu

Signature of AXA's surveyor/r Name of AXA's si

Date:

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Date:

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

16 Oct 2019 / 16:38:11

Receipt Date/Time: 16 Oct 2019 / 16:38:11

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191016-002500

Previous Receipt No.:

rioriodo reccipi 140.				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMD3808S As at 16 Oct 2019/13:10:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SMD3808S		σστ (σψ)	(04)	(3\$)
Enquiry Fee 20191016163720599059		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
* 6	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20191016163728957	Direct Debit: eNE (Internet Banking)		7.45
	Total	,		7.45
	Cash Change			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.

Print Receipt

OK

Save as PDF