



Auto
Consultants
Pte Ltd

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

16 MARCH 2020

**KOH TAT JUN KENNETH
BLK 455C ANG MO KIO ST 44
#09-33
SINGAPORE 563455**

Dear Sir/ Mdm

**OUR REF : CC4/ASM19018550/Ega3
YOUR REF : SML 1821Z
ACCIDENT INVOLVING SML 1821Z & SMC 9022H ALONG/AT VIVO CITY CARPARK
B1 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 **RAAIM CAR BODYWORKS PTE LTD** acting on behalf of the owner of **SMC 9022H** 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 & Relationship with driver
- ADDEMDUM FORM TO BE SIGN & RETURN
- 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](tel:67494274) 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)*



WITHOUT PREJUDICE to:
 (a) Insurers' Subrogated Claim and/or
 (b) Any Personal Injury Claims
 [Note: This Notice supersedes any
 inconsistencies found in this
 Discharge Voucher]

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SML 1821Z (Insd veh)	Model: HYUNDAI ELANTRA
	SMC 9022H (TP veh)	
Date of Accident/ Time:	16/10/2019	

Repair Estimate	: \$		
Final Repair Cost	: \$	1,876.06	W/GST
Loss of Use	: \$	240.00	6 days at \$ 50.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	2,118.06	
Payee Name : RAAIM CAR BODYWORKS PTE LTD			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability 80 (%)	
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 to act for and on their behalf in this accident.



Signature of workshop representative / Workshop stamp
 Name of Representative:
 Date: 11/05/2020

Signature of Witness / Workshop stamp (if applicable)
 Name of Witness:
 Date: 11/05/2020

Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 11/05/2020





Re:RE: Re:RE: Re:RE: DS

Type

🔗 Question

Message

REVISED OFFER: COR \$2,345.08 LOR: \$300 (6DAYS) @ 80%: \$2,116.06 LTA \$2.00 TOTAL
\$2,118.06~\$2,120.00 (ALL-IN)

Reply

利 汽车喷漆私人有限公司
RAAIM CAR BODYWORKS PTE LTD

Blk 2 Kranji Loop #01-04 Singapore 739538

Tel: 6694 3197 Fax: 6694 3191

CO. REG NO.:201327842N

Yr Ref : SML1821Z

Our Ref : SMC9022H

22 November 2019

Without Prejudice

Attn: Motor Claim Dept

AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way

#27-01/02 AXA Tower

SINGAPORE 068811

Dear Sir/Mdm,

Accident involving SMC9022H & SML1821Z on 16/10/2019 14:05 hrs at along VIVO CITY B1 CARPARK

We refer to the above said accident.

As instructed, we are claiming the following as stated below:-

1. Repair cost	\$	2,345.08
2. Loss of usage (\$150 x 7 days)	\$	1,050.00
3. GIA search	\$	2.00
Total	\$	3,397.08

We enclosed herewith relevant document as stated below:-

1. Accident report
2. Final Repair Bill
3. Letter of authority
4. GIA search receipt

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to hear from you soonest.

Thank you.

Best Regards,


Charlie Toh (Claim dept)
Raaam Car Bodyworks Pte Ltd
Tel : 9128 8559 Fax: 6694 3191
Email: raaam.carbw@gmail.com

利 汽 车 喷 漆 私 人 有 限 公 司
RAAIM CAR BODYWORKS PTE LTD

Blk 2 Kranji Loop #01-04 Singapore 739538

Tel: 6694 3197 Fax: 6694 3191

CO. REG NO.:201327842N

Tax Invoice: 190014

AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way

#27-01/02 AXA Tower

SINGAPORE 068811

Tel: +65 6880 4741 Fax: +65 6880 4838

Bill Date: 22-11-19

Vehicle No: SMC9022H

Vehicle Model: HY ELANTRA

Date of Accident: 16-10-19

Claim No:

Attn: Motor Claims Dept

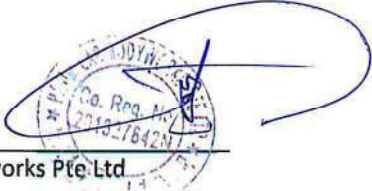
S/N	QTY	Descriptions	Unit Price	Amount S\$
1		Part by part repair		2191.66

E. & O.E.

Total S\$ 2191.66

GST 7% S\$ 153.42

Amount Due S\$ 2345.08


for Raaim Bodyworks Pte Ltd



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-19-171400

Date of Request: 17/10/2019

Your Ref No: Online Purchase

Vermogen Ace Pte Ltd
60 Jalan Lam Huat
Singapore 737869

Dear Sir/Madam,

Enquiry Date 17/10/2019
Enquiry By Lim Jian Zhi, Edmond
TP Vehicle No. SML1821Z
Accident Date 16/10/2019

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:

☒ GIRO ☐ Cash ☐ Cheque

**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

Third Party Insurer Enquiry

Our Ref No: GR-19-171400

Date of Request: 17/10/2019

Your Ref No:

Online Purchase

Vermogen Ace Pte Ltd
60 Jalan Lam Huat
Singapore 737869

Dear Sir/Madam,

Enquiry Date 17/10/2019
Enquiry By Lim Jian Zhi, Edmond
TP Vehicle No. SML1821Z
Accident Date 16/10/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SML1821Z	AXA Insurance Pte Ltd	09/05/2019-08/05/2020	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.

利汽车喷漆私人有限公司
RAAIM CAR BODYWORKS PTE LTD

Blk 2 Kranji Loop #01-04 Singapore 739538 Tel: 6694 3197 Fax: 6694 3191
Email : Raaim.CarBW@gmail.com
REG No : 201327842N

LETTER OF AUTHORITY & INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SMC9022H & SML1827E

I/We Lin Kai Zhen UEN/NRIC NO. S8P13870C, owner of Vehicle No. SMC9022H, hereby authorise **Raaim Car Bodyworks Pte Ltd** to commence repairs to my vehicle and to forward the claim for damages sustained in the above accident to the third party driver and /or his employer and /or the vehicle owner and /or the insurer concerned. I /We agree that in consideration of you giving up your repairer's lien. I/We agree to assign the whole proceeds of my/our third party claim to you and if applicable, our solicitors (to be appointed by you on my / our behalf) shall accept this as my /our irrevocable authority to pay the amount compensated direct to you after deduction of their costs on a solicitor & client basis. I/We undertake to co-operate fully with you and our solicitors to see the claim to a successful conclusion.

If third party driver and and/or his employer and/or the vehicle owner and/or insurer reject liability, i/We will fully be responsible for the repair costs and other incidentals.

I/We also authorise you to sign all discharge vouchers/indemnity forms and all necessary paper in connection with the above claim in my/our absence.

I/We authorise you to appoint such a firm of solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/we undertake to inform you and/or the solicitors appointed by you on my/our behalf in the event of the third party's insurance company communicate with me/us directly by telephone or in writing and I/We further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you.

My/our vehicle is repaired by the repairer on my/our will without any inducement, threat and/or promise.

In the event that the repairer is compelled to enforce this undertaking, I/We agree that I/shall pay for the legal costs incurred by the repairer on a solicitor and client's full indemnity basis.



Owner Signature
(Company Stamp if applicable)

TO: AXA INSURANCE PTE LTD

Dear Sirs,

CLAIMANT: LIN KAI ZHEN

ACCIDENT INVOLVING Smc9022H and SML1817E on 16/10/19 At Vivo city B1 carpark.

I/WE Lin Kai Zhen, am/are the registered Owner of Vehicle No. Smc9022H

Please note that I have assigned all compensation monies due -to me/us in the above said accident to **Raaim Car Bodyworks Pte Ltd.**

I/We, hereby authorize you to release **all** compensation monies pertaining to the above said accident to **Raaim Car Bodyworks Pte Ltd.** and forward your settlement cheque to **Raaim Car Bodyworks Pte Ltd.** whom I/we had authorized to collect the said compensation monies..

Thankyou.



Signature of Claimant
(company Stamp, if applicable)

Name : LIN KAI ZHEN

NRIC No. : SXXXX870C

Date : 17/10/19