

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

14 JANUARY 2020

KUAN CHEOW FUI BLK 10 WOODLEIGH CLOSE #01-05 SINGAPORE 357905

Dear Sir/ Mdm

OUR REF

: CC4/ASM19021327/Uga3

YOUR REF

: SGW 2911D

ACCIDENT INVOLVING SGW 2911D & SJL 2392Z ALONG/AT UBI AVE 1 ON

29/11/2019

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 LEE BROTHERS AUTOMOTIVE PTE LTD acting on behalf of the owner of SJL 2392Z 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 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)

Date: 63/142019

To: AXA Insurance Singapore Pte Ltd

			AT/ALO	NG	Ubi	Ave	1					
			1.030300				_ON_	29	. 11 - 2	019		
10000			Leasing							No./RC		10.)
			37 Jalan K JL23922					0 1	-	. 8		ete. Lt
M/S smount : proceedi etc. and	Lee I settled / ings, if n to their	payab payab ecessar appoin	Automotive by the Inc. y, under my ting solicitod shall belo	e Pte. L surance name, r to act	compa for the	to deny and cost of	emand d/or th f repai respec	clain ird pa irs, ca	settle arty or t	receive to comm and/or l	what ence oss of	ever legal use,
	r agree	and un	dertake to	indemi	nify the	n agai	inst th	e abo	ve mer	ntioned	claim	costs
1 further		therew	1445									



*** This Discharge Voucher applies only to the claimant's claim. for his property damage and will not effect his personal injuries claim and/or uninsured losses claim in a later date.

Further the settlement terms herein should not be used as an evidence to prejudice to the claiment's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SGW 29110)	(Insd veh)			
	SJL 2392Z	SJL 2392Z		Model: HONDA ST	TREAM	
Date of Accident/ Time:	29/11/2019	29/11/2019				
		1				
Repair Estimate	:5		-	(3,026,74		
Final Repair Cost	:5:			6,420.00	W/GST	
Loss of Use	:5.				days at 5 per day	
Rental (if any)	:5	700.00			7 days at \$100,00per day	
LTA / GtA Search Fee		36.45				
Others	1.5					
	15					
Final Settlement Sum	15			7,156,45		
Payee Name: LEE BRO	OTHERS AUTOMOT	IVE PTE LT	D			
Is Third Party Workshop ((Kindly indicate below)	
A) For Non G	IA Registered Work	shops	Agreed	Liability 100 (1	s)	
For GIA Re	gistered Workshop	t	BOLAA	opticable: Yes/ No. BO	LA Scenario No: 27	
BOLA Liab	lity:(%)		Assesses	d Lisbility (*):	(94)	

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.

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

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.

Lee Brothers Automotive Pte. Ltd.
Senature of war to Luci Avenue P/ Workshop stamp

PTet: (65) 6509 5521 Fax: (65) 6509 5523 Email: sales@leebrothers.com/sg

Co. Reg. No: 201101880@

Signature of AXA's surveyor/representati Name of AXA's surveyor /Representative

Date:

Signature of Witness 7 Workshop stamp (if applicable) Name of Witness Subn

Date:

Telephone: +65 6880 4888 - ava.com.ag

Fong Motors Car Rental

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

Tel: 6748 5648

INVOICE

No.: FM-000595

C/O LEE BRO- BAKHTIAR BIN ALI

Your Ref.

BLK 571 HOUGANG ST 51

Our D/O No. :

#16-121

Terms

: C.O.D.

SINGAPORE 530571

: 18/12/2019

TEL: 92331531

FAX:

Date Page

: 1 of 1

Item	Description	Qty	UOM	U/ Price	Disc.	Total
				S\$		S\$
1. SKX5952	M (30/11/19- 10/12/19)	1	CAR	1,800.00		1,800.00

REPLACE VEHICLE NO. SJL2392Z

REF AGREEMENT NO. 10539

SINGAPORE DOLLAR ONE THOUSAND EIGHT HUNDRED ONLY

Total

1,800.00

Notes:

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

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

SNO Authorised Signature

FONG MOTORS CAR RE

1 KAKI BUKIT AVENUE 6 #01-45 KAKI BUKIT, AUTOBAY BOLIL 2019 +0 14/12/19.

HP: 8182 0548 H/P: 9633 7504

UEN: 53371081B

while nemal accident vehicu-SJL23922 Replacement co- succic -franska

NO: 10539

VEHICLE RENTAL AGREEMENT

HIKEK 2	PARTICULA	R	Sec. mark	Vehicle No: SKX59 QIn Replace Ven No: SJL 2342Z
Name: (a	Mileage Out:			
NRIC/PASSPORT NO: S70260762 Address (Res): 8/5H Housey st 51				Make & Model: Toyofa cush Auto / Manual
Address	(Res): 6	SU HOM	m 21 21	Date Out: 30/11/2019 Time: 1315hrs
			-	HIRE / PERIOD EXPIRY Time:
				NON-WAIVER EXCESS =S
Occupati	on: ave	V2/	Driving Exp: (U	UQ9/3
Driving L	icense No	7026076	2 D/L Type: Loca te of Birth: 17 (8	Vint'i CHARGES:
Issue Dat	ie: 21/6/	JOIL DS	te of Birth:	71970 Daily 10 @\$ 180 Perday 189
			_HP: 9238 1	73] . Weekly @\$ Per week
		R'S PARTICI		Monthly @\$ Per month
Name: (a	IS IN I/C)			Hours @\$ Per hour
Address	(Ros)		houl	Malaysia @\$
Addiess.	(nes).	- as	10	CDW @S Per day/month
Name &	Address	employer:		The state of the s
117-11-1-1-1	/	GVAIRACAACTICS.		
Occupati	00:		Driving Exp:	
				SUB - TOTAL \$ 00
VEHICLE	CHECK LIST	r:		PETROL LEVEL
				Out E 1/4 1/2 (3/4) F
				Out E 1/4 1/2 3/4 F
Alb v	75			
A.P.		10015		EXTENSION
			1	Misc.
	_	_		TOTAL CHARGES \$ 1201
	-	100	1	
			100000	
89)	= /			Hirer's Signature:
UI)	60	(II)		
INDICA			- DENTS	A CONTRACTOR OF THE CONTRACTOR
A - ACI	CIDENTS	2	- SCRATCHES	Additional Driver's Signature:
710		out more and		
				the agreement. If I have presented a charge/credit card for payment, I agree that all amounts may be billed to that account and my signature above will be considered to have made.
				G MOTORS CAR RENTAL in connection with this agreement is true.
*IMPOR	TANT NOTE	ES		
_		-	MORE THAN 2 YEARS DRIV	NG EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2 ALL PARKS	NG AND TRAFFIC	VIOLATIONS ARE T	HE RESPONSIBILITY OF THE	HIRER, AN AGAINVETRATIVE CHANGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS. AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF COW AND/OR PAI WHERE APPLICABLE.
IL IN CASE OF	FACODENS, THE	HIRER SHALL REPO	RT TO RENTAL OFFICE IMM	EDIATELY, IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
SCHOOL CONTRACT	Ut Call III	and the second second		OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY FONE MOTORS CAR RENTAL.
THE DAY AND	TIME THE VEHIC	A / DRIVER IS TO S LE IS RETURNED TO	IGN IN THE COLUMN "SIGN FONG MOTORS CAN NEW	ATURE OF HIRTY CAME AND WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE AL AND THE SAME AND SHALL NOT BE
		ON ANY ACCOUN		9 15
	TIME IN	MILEAGE	CHECKED BY	FONG PADTORS CAN PRENZAL
DATE IN	111111111111111111111111111111111111111			
DATE IN 0/12/19	11:20 WS	Manager St.	(100 (100 E)	anos Co

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0005529-2

Print Date/Time:

30 Nov 2019 / 13:36:52

Receipt Date/Time: 30 Nov 2019 / 13:36:52

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191130-000997

Previo	ous Receipt No. :				
S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at	It of Insurance Enquiry - SGW2911D 29 Nov 2019/10:50:00 ance Co: AXA INSURANCE PTE LTD Insurance Enquiry - SGW2911D				
22	Enquiry Fee 20191130133611667853		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
		Paid By			
		20191130133621137	Direct Debit: eNt (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.



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-19-201244

Date of Request:

05/12/2019

Your Ref No:

WALK IN JASON

LEE BROTHERS AUTOMOTIVE PTE. LTD.

1 KAKI BUKIT AVE 6, #02-47 AUTOBAY @ KAKI BUKIT

SINGAPORE 417883

Dear Sir/Madam,

Your Vehicle No:

SJL2392Z

Date of Accident:

29/11/2019

Place of Accident:

UBI AVE 1 TOWARDS UBI CRESCENT

Involving Vehicle No: SGW2911D

DESCRIPTION	AMOUNT (S\$)		
E-File Search Fee (Public)	14.02		
GST Amount	0.98		
Total Amount Due (GST Inclusive)	15.0		

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-19-201246

Date of Request:

05/12/2019

Your Ref No:

WALK IN JASON

LEE BROTHERS AUTOMOTIVE PTE. LTD.

1 KAKI BUKIT AVE 6, #02-47 AUTOBAY @ KAKI BUKIT SINGAPORE 417883

Dear Sir/Madam.

Date of Accident:

29/11/2019

Vehicle No:

SJL2392Z

Place of Accident:

ALONG UBI AVE 1

Involving Vehicle No:

SGW2911D

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

DOCUMENTS	ACCIDENT LOCATION	accider	s as requested:	
COMPOSED		PER DOC (S\$)	QTY	AMOUNT (S\$)
SGW2911D ALONG UBI AVE 1		14.00 1		
GST Amount	13.08			
Total Amount Due (0	0.92			
The state of the s	or moralive)			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