

# BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

WITHOUT PREJUDICE

Our Ref : **SLK7707S**  
Your Ref : **SMR5555J**

22/02/2020

AXA INSURANCE SINGAPORE PTE LTD  
8 Shenton Way,  
#24-01 AXA Tower,  
Singapore 068811

Attention: Motor Claims Department

Dear Sir/Mdm.

Accident on 07/12/2019 along NGEE ANN CITY DROP OFF involving vehicles SLK 7707 S and SMR 5555 J

We refer to the above-mentioned accident.

We are claiming as per below:-

1. Repair Cost	\$ 3,200.00
2. Loss of Use for 7 Days x \$120/- per day	\$ 840.00
3. LTA/GIA Search fee	\$ 34.10
<b>SUBTOTAL</b>	<b>\$ 4,074.10</b>
<b>Gst (7.0%)</b>	<b>\$ 226.39</b>
<b>TOTAL</b>	<b>\$ 4,300.49</b>

Enclosed herewith a copy each of relevant GIA report, LTA, Proforma Tax invoice and Letter of Authorization for your attention. Kindly let us have your reply with the next 14 days upon receipt of this letter.

If you have any enquiries, please contact us @ 9648-8228 or you may email to us at [claims@bifrostauto.com](mailto:claims@bifrostauto.com)

Yours faithfully,  
**BIFROST AUTO PTE. LTD.**



**NOTE:** # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

This is a computer generated letter and does not need a signature.

*The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document.*

*GST at 7% is chargeable if applicable*

# BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

## Proforma Invoice

**AXA INSURANCE SINGAPORE PTE LTD**  
8 Shenton Way,  
#24-01 AXA Tower,  
Singapore 068811

Inv. No. : PF.RA.2002007  
Inv. Date : 22-02-2020  
Ref : 07/12/2019  
Terms : 14 Days  
Veh. No. : SLK7707S  
Make & Model : MERCEDES-  
BENZ E200

#	Description	Qty	Rate	Total	Tax
1	Repair Cost	1.0000	\$3,200.00	\$3,200.00	\$224.0000 00
2	Loss of Use	7.0000	\$120.00	\$840.00	\$0.000000
3	GIA and LTA Search Fees	1.0000	\$34.10	\$34.10	\$2.390000

Remarks:  
SLK7707S

Subtotal for invoice : S\$4,074.10  
GST (7.0%) : S\$226.39  
Total : S\$4,300.49

*I agree to the price as listed above and  
affirm that the goods are received in good  
condition.*

On behalf of **BIFROST AUTO PTE. LTD.**

(Customer's Signature and Company Stamp)



(Authorised Signature)

Please make cheque payable to "**BIFROST AUTO PTE LTD**" and mail to **6001 BEACH ROAD #22-01, GOLDEN MILE TOWER Singapore 199589** or direct bank transfer to **DBS Bank Current Account 070-902-886-1**.

*The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document.*

GST at 7% is charged where applicable

# BIFROST AUTO PTE. LTD.

Co. Reg. No. : 201929175W

## LETTER OF AUTHORISATION

Accident on 07/12/2019 along NGEE ANN CITY DROP OFF  
Involving vehicles SLK 77072 & 8MR5553

In consideration of **Bifrost Auto Pte Ltd, 6001 Beach Road #22-01, Golden Mile Tower Singapore 199589**, repairing my/our motor vehicle no SLK 77072 at my request, I/We, CHAN LI CHEN ("the claimant") of BLK 201 BOON LAY DRIVE #11-29 S(640202) (address) bearing NRIC No S79169423 the owner of motor vehicle no SLK 77072, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.


I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by **Bifrost Auto Pte Ltd**.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to **Bifrost Auto Pte Ltd** the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Bifrost Auto Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Bifrost Auto Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Bifrost Auto Pte Ltd** shall amount to a good discharge of **Bifrost Auto Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 09 day of 12 (month) 20 19 (year)

  
Signed by "the claimant"

Name: \_\_\_\_\_

NRIC No: \_\_\_\_\_

  
Signed by Bifrost Auto Pte Ltd

Name: \_\_\_\_\_



> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 11 Dec 2019 / 12:51:34

Receipt Date/Time : 11 Dec 2019 / 12:51:34

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-191211-001466

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SMR5555J

As at 07 Dec 2019/17:20:00

Insurance Co: AXA INSURANCE PTE LTD

1 Insurance Enquiry - SMR5555J  
Enquiry Fee  
20191211124951456992

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

xxxxxxxxxxxx5759 Credit Card:  
Visa/MasterCard 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.



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-20-001841

Date of Request: 06/01/2020

Your Ref No: WALK IN JATI

BIFROST AUTO PTE LTD  
6001 BEACH ROAD, #22-01 GOLDEN MILE TOWER  
SINGAPORE 199589

Dear Sir/Madam,

Your Vehicle No: SLK7707S

Date of Accident: 07/12/2019

Place of Accident: Ngee Ann City Drop Off

Involving Vehicle No: SMR5555J

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.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

## TAX INVOICE

Our Ref No: GR-20-001842  
Date of Request: 06/01/2020

Your Ref No: WALK IN JATI

BIFROST AUTO PTE LTD  
6001 BEACH ROAD, #22-01 GOLDEN MILE TOWER  
SINGAPORE 199589

Dear Sir/Madam,

Date of Accident: 07/12/2019  
Vehicle No: SLK7707S  
Place of Accident: NGEE ANN CITY DROP OFF  
Involving Vehicle No: SMR5555J

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SMR5555J	NGEE ANN CITY DROP OFF	14.00	1	13.08
GST Amount				0.92
Total Amount 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.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

# BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

## Tax Invoice

**AXA INSURANCE SINGAPORE PTE LTD**  
8 Shenton Way,  
#24-01 AXA Tower,  
Singapore 068811

Inv. No. : BA.RA.2007002  
Inv. Date : 13-07-2020  
Ref : 07/12/2019  
Terms : 30 Days  
Veh. No. : SLK7707S  
Make & Model : MERCEDES-  
BENZ E200

#	Description	Qty	Rate	Total	Tax
1	Repair Costs	1.00	\$3,200.00	\$3,200.00	\$224.00

Subtotal for invoice : S\$3,200.00  
GST (7.0%) : S\$224.00  
Total : S\$3,424.00

On behalf of **BIFROST AUTO PTE. LTD.**



(Authorised Signature)



Please make cheque payable to "BIFROST AUTO PTE LTD" and mail to **6001 BEACH ROAD #22-01, GOLDEN MILE TOWER Singapore 199589** or direct bank transfer to **DBS Bank Current Account 070-902-886-1.**



## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SMR 5555J (Insd veh)	Model: Mercedes E200(1991cc)
	SLK 7707Z (TP veh)	
Date of Accident/ Time:	07/12/2019	

Repair Estimate	: \$	9,340.46	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	1,800.00	
Payee Name : BIFROST AUTO PTE LTD			
Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability	50 (%)
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/TORTEASOR 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.

 Signature of workshop representative / Workshop stamp Name of Representative: <u>Maximilian</u> Date: <u>13/7/17</u>	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Koh Seng Leong</u> Date: <u>13/7/17</u>
 Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>14/07/2020</u>	 <i>my execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims arising from the same accident.</i>





Auto  
Consultants  
Pte Ltd

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

17 DEC 2019

**WANG DONGFENG**  
50 MARINE PARADE ROAD  
#14-12 SILVERSEA  
SINGAPORE 449307

Dear Sir/ Mdm

**OUR REF : CC4/ASM19021995/pb3 // S9M029UW**  
**YOUR REF : SMR5555J**  
**ACCIDENT INVOLVING SMR 5555J(AXA) AND SLK 7707Z ALONG/AT**  
**TAKASHIMAYA PICK UP POINT ON 07/12/2019**

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 third party claim(s) from BIFROST AUTO PTE LTD acting on behalf of the owner of SLK 7707Z against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant at best to avoid further litigation, which would escalate to even more cost.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they 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 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 7 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)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- 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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) or deliver it by hand to AXA Customer Care Centre.

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), we 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 6742 3197 or [chewht@lkkauto.com](mailto:chewht@lkkauto.com). Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely



Chew Hsiao Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: [chewht@lkkauto.com](mailto:chewht@lkkauto.com)

Cc     *AXA Insurance Pte Ltd*  
         *(Motor Claims Dept)*