

Cecilia Chong (LKK Auto)

From: Cecilia Chong (LKK Auto)
Sent: Wednesday, 15 January 2020 5:24 PM
To: WAIMUN0012@GMAIL.COM
Subject: <STANDARD LETTER> OUR REF: CC4/ASM19022521/Kga3 *** ACCIDENT INVOLVING SFU 8611C & SLW 8772P ON 21/12/2019 ***

15 JANUARY 2020

LOW WAI MUN

Dear Sir/ Mdm

OUR REF : CC4/ASM19022521/Kga3
YOUR REF : SFU 8611C
ACCIDENT INVOLVING SFU 8611C & SLW 8772P ALONG/AT BKE ON 21/12/2019

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 claim from **COMPLETE VMS PTE LTD** acting on behalf of the owner of SLW 8772P 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.

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 matter(s) in respect of this accident nor should it be binding in any other related claims."

~ Wishing you a Happy and Prosperous Lunar New Year ~



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)

LKK

Auto Consultants
Pte Ltd

Save the Earth. Print only when necessary.

To: Complete VMS Pte Ltd
176, Sin Ming Drive,
#03-14, Sin Ming Autocare Complex
Singapore 575721

LETTER OF AUTHORIZATION

RE: ACCIDENT BETWEEN SLW 8772P | STU 8611C (Vehicle Numbers)
ON 21/12/2019 (Date of Accident) AT BKE towards Singapore Custom

1. I/We, the owner of vehicle no. SLW 8772P hereby appoint you to act for me to repair and recover damages sustained to my vehicle in the above accident from the third party driver and / or his / her insurers.
2. In this respect, I/We have authorized you to repair, correspond, negotiate and settle on my behalf, all claims against the parties involved in the subject accident. All final financial awards in my favor pertaining to the subject accident claim are to be paid to Complete VMS Pte Ltd.
3. By way of this Letter of Authorization, I/We also further authorized you to sign all Discharge Vouchers and any other related documents in settlement of the subject accident claims. I/We hereby undertake to ratify and reaffirm such signing of Discharge Vouchers and/or documents from any third party insurers by us.
4. During the settlement process with the third party insurers / drivers, you may act fully on my behalf and all negotiations and correspondences given by you to the third party insurers / driver are as if given directly from me. With regards to the settlement of the above subject accident claim, I/We agree and undertake to ratify all correspondences and negotiations given by you to the third party insurers / driver and further agree and undertake to be bound by all acts performed or carded out by you.
5. I/We understand that should the subject accident claims fail or not able to reach an amicably settlement with the third party insurers or driver, I/We will have to appointed a solicitors by way of signing a warrant to act in present of the appointed solicitor to further pursue the matter and to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable). I/We further agrees that should I/We fails or disagrees to appoint a solicitors at that stage, I/We shall be fully liable for all costs incurred to you until that point of time.
6. I/We further confirm my/our understanding that I/We shall render my/our full co-operation pertaining to the settlement of the subject accident and method of repair adopted shall be in accordance to the standard practices of the industry and will be at the full discretion of you.
7. I/We hereby agree that upon settlement of the above subject accident claim, I/We are required to sign Discharge Voucher/s issued by the third party insurers. After which all settlement monies shall be used to settle all costs and fee incurred to carry out the above subject accident repairs and claims. This settlement monies shall constitute a full discharge of your payment obligation to us.
8. Any indemnity / discharge voucher signed by the workshop is without prejudice to my rights to claim for compensation for my personal injury (if any). Complete VMS Pte Ltd is only authorized to negotiate and finalized with Third Party for my property damages

Signature



Witness's Name & Signature

Name

Er Hock Chai

Date

21/12/2019

Company Stamp (if applicable) : _____

Email:



AXA THIRD PARTY DIRECT SETTLEMENT

| | | |
|-------------------------|-----------------------|--------------------|
| Vehicle No: | SFLJ 8611C (Insd veh) | Model: TOYOTA VIOS |
| | SLVW 6772P (TP veh) | |
| Date of Accident/ Time: | 21/12/2019 | |

| | | | |
|----------------------|------|----------|-----------------------------|
| Repair Estimate | : \$ | 5,763.09 | |
| Final Repair Cost | : \$ | 2,981.64 | VWOST |
| Loss of Use | : \$ | | days at \$ per day |
| Rental (if any) | : \$ | 100.00 | 7 days at \$ 100.00 per day |
| LTA / GIA Search Fee | : \$ | 7.48 | |
| Others: | : \$ | | |
| | : \$ | | |
| Final Settlement Sum | : \$ | 3,089.29 | |

Payee Name: COMPLETE VMS PTE LTD

Is Third Party Workshop GIA Registered? ☐ YES ☒ NO (Kindly indicate below)

| | | |
|--|----------------------------------|---|
| A) | For Non GIA Registered Workshop: | Agreed Liability: 100.00 (%) |
| B) | For GIA Registered Workshop: | BOLA Applicable: Yes <input checked="" type="checkbox"/> BOLA Scenario No: 27 |
| | BOLA Liability: (%) | Assessed Liability (*): (%) |
| * Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply. | | |

Remarks:

NOTE:

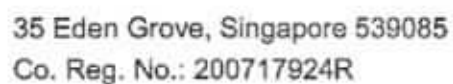
- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY 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 of our client to act for and on their behalf in this accident.

| | |
|--|---|
|  Signature of workshop representative / Workshop stamp Name of Representative: Leo Wuh Date: 23/3/2020 |   Signature of Witness / Workshop stamp (if applicable) Name of Witness: Gan Li Hui Date: 24/3/2020 |
|  Signature of AXA's surveyor/representative Name of AXA's surveyor / Representative: KKK Date: 25/3/2020 |  This indemnity is signed without prejudice to my rights to claim for compensation for my personal injury. |



No: 2508

Date: 15. Jan. 2020

Vehicle No: SLM6001Y

| QTY | DESCRIPTION | UNIT PRICE | AMOUNT |
|---|--------------------------|------------|-------------------------|
| 1 | Rental for 7 days | \$150.00 | \$1,050.00 |
| | 23/12/2019 to 30/12/2019 | | |
| | Reference: SLW8772P | | |
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| | | | |
| Cheques should be crossed and made payable to "COMPLETE LEASING PTE LTD" | | | TOTAL \$1,050.00 |

for COMPLETE LEASING PTE LTD


Order checked & accepted by



SLW 8772 P
35 Eden Grove, Singapore 539085
Co.Reg. No.: 200717924R

VEHICLE RENTAL AGREEMENT

STA No: 002499


| HIRER'S PARTICULAR Name: (as in I/C) <u>Er Hock Chai</u> NRIC / Passport No: <u>S 766 5313 E</u> Address: _____ ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) _____ NRIC / Passport No: _____ Address: _____ | | Veh. No: <u>SLW 6001Y</u> Replace Veh. No: _____ Mileage Out: _____ Mileage Out: _____ Out: Date <u>22/12/19</u> Out: Date _____ Out: Time <u>10:30am</u> Out: Time _____ | | | | | | | | | | | | | |
|--|--|---|-------------|----------------|--|------------------|-------------|--------------|--|-----------------------|-----|-------------|--|-----------------------|--|
| REMARKS _____ _____ _____ _____ _____ _____ _____ | | <table border="1"><thead><tr><th colspan="2">RENTAL CHARGES</th></tr></thead><tbody><tr><td>Daily 7 @ \$ 150</td><td>\$ 1050 - W</td></tr><tr><td>Monthly @ \$</td><td></td></tr><tr><td>Delivery Charges @ \$</td><td>For</td></tr><tr><td>Others @ \$</td><td></td></tr><tr><td colspan="2">SUB TOTAL \$ 1050 - W</td></tr></tbody></table> | | RENTAL CHARGES | | Daily 7 @ \$ 150 | \$ 1050 - W | Monthly @ \$ | | Delivery Charges @ \$ | For | Others @ \$ | | SUB TOTAL \$ 1050 - W | |
| | | RENTAL CHARGES | | | | | | | | | | | | | |
| | | Daily 7 @ \$ 150 | \$ 1050 - W | | | | | | | | | | | | |
| | | Monthly @ \$ | | | | | | | | | | | | | |
| | | Delivery Charges @ \$ | For | | | | | | | | | | | | |
| Others @ \$ | | | | | | | | | | | | | | | |
| SUB TOTAL \$ 1050 - W | | | | | | | | | | | | | | | |
| PETROL: Empty, 1/8, 1/4, 3/8, 1/2, 5/8, 3/4, 7/8, Full | | | | | | | | | | | | | | | |
| INSURANCE EXCESS PAYABLE ON CLAIM \$ 2000 - Hirer is responsible for the first \$ _____ excess for Collision / Damages to 1st party (i.e.) COMPLETE LEASING P/L vehicle (inc. windscreen) and also first \$ 2000 - excess for Collision / Damages to 3rd party's vehicle for each and every accident / damages. | | | | | | | | | | | | | | | |
| Hirer's Signature:  | | | | | | | | | | | | | | | |

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.

IMPORTANT

1. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. VEHICLE IS STRICTLY FOR USE IN SINGAPORE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT FROM THE COMPANY COMPLETE LEASING PTE LTD
3. IN THE EVEN OF AN ACCIDENT, THE HIRER OF AUTHORIZED DRIVER:
(i) shall report all accidents involving the said vehicle to the owner immediately,
(ii) shall NOT admit liability or sign any settlement documents with any 3rd parties
4. THIS AGREEMENT IS SUBJECT TO THE CONDITIONS PRINTED ON THE REVERSE SIDE

EXCESS:
ADDITIONAL \$2500
FOR 23 TO 27 &
ABOVE 65 YEARS OLD

| | | | |
|---------------|---------|------------|--|
| DATE IN | TIME IN | CHECKED BY |  SIGNATURE OF HIRER / DRIVER |
| 30 Dec - 2019 | 1pm | | |

> Back to OneMotoring

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

Print Date/Time : 23 Dec 2019 / 10:58:33
Receipt Date/Time : 23 Dec 2019 / 10:58:33

Tax Invoice/Receipt

Receipt No. : ITNET-00000-191223-001092
Previous Receipt No. :
S/N Item Description/
Business Transaction Reference
No.
Result of Insurance Enquiry - SFU8611C
As at 21 Dec 2019/00:00:01
Insurance Co: AXA INSURANCE PTE LTD

| S/N | Item Description/ Business Transaction Reference No. | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
|-----|---|-------------------------------|------------------------|------------------------------|
| 1 | Insurance Enquiry - SFU8611C Enquiry Fee 20191223105556089322 | 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 | | | |
| | xxxxxxxxxxxx2417 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.