Hsiao Tong (LKKAuto)

From:

Hsiao Tong (LKKAuto)

Sent:

Wednesday, 15 January 2020 2:46 PM

To:

RAMUMIYAPAN@GMAIL.COM

Subject:

ACCIDENT INVOLVING SMH 128U(AXA) AND SLS 898J ALONG/AT AYE (TUAS) ON

24/12/2019

15 Jan 2020

Miyapan Ramu

Dear Sirs/ Mdm

OUR REF

: CC4/ASM19022658/Qpa3// S9M02B7K

YOUR REF : SMH128U

ACCIDENT INVOLVING SMH 128U(AXA) AND SLS 898J ALONG/AT AYE (TUAS) ON 24/12/2019

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 SM AUTOMOTIVE acting on behalf of the owner of SLS 898J against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as it is a head to rear collision. 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.

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. You 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 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)
- Driver's Work Permit/Work Pass
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization to confirm that the driver is allow to drive the vehicle.
- 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 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 email us at chewht@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

"Wishing you a Happy and Prosperous New Year"



Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LETTER OF AUTHORISATION

SM AUTOMOTIVE

Kaki Bukit Avenue 6 Blk 1 #01-43 Singapore 417883

Accident on Involving Vehicles SUSSASJ, SMHRSU Live, the registered owner/driver of vehicle registration no: have involved in the above accident. Live hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith. Live agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor, to act on my/our behalf in respect of the above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis. Live also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence. Your kind co-operation in this matter will be much appreciated. Yours truly, Owner's Signature (Company's stamp if applicable) Name: Gob Shubb Ling	Dear Sir,		
Involving Vehicles SUSSASJ, SMHRRU Along AYE (TUCK) I/We, the registered owner/driver of vehicle registration no: have involved in the above accident. I/We hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor, above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis. I/We undertake to co-operate fully with you and our solicitors to ensure that claim is successful. I/We also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence. Your kind co-operation in this matter will be much appreciated. Yours truly, Owner's Signfature (Company's stamp if applicable) Name: Gob Shubb LIM		24/12/19, 137.0	
I/We, the registered owner/driver of vehicle registration no: SUS 8987		010	WHP611
I/We hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor,			ITTE S U
have involved in the above accident. I/We hereby authorize SM AUTOMOTIVE to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor,	Along	THE CLUM	
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I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor,			tion no: SCS 898J
solicitor,	I/We hereby aut	horize SM AUTOMOTIVE to co	ommence repairs of the said vehicle forthwith.
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Your kind co-operation in this matter will be much appreciated. Yours truly, Owner's Signature (Company's stamp if applicable) Name: Goh Shuth LIM	1/We undertake	to co-operate fully with you and our se	olicitors to ensure that claim is successful.
Owner's Signature (Company's stamp if applicable) Name: Goh Shuth Ling			ers/indemnity forms and all necessary papers in
Owner's Signature (Company's stamp if applicable) Name: Goh Shuth Ling	Your kind co-op	peration in this matter will be much ap	preciated.
(Company's stamp if applicable) Name: Goh Shugh Ling	Yours truly,	Well	
(Company's stamp if applicable) Name: Goh Shugh Ling	Owner's Signatur	view.	
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7.199.4.1	Name Go	h Shugh Lina	
NIDIC No. 1936 84 919	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
NRIC No.: 57533 873B Date: 26-12-2019	Date:	16-12-2019	

Assignment

To: SM	Automotive (Workshop)
In consideration for	your agreement to repair my motor vehicle registration no. SLS 8 9 8
and to defer dema irrevocably assign a costs and expenses (i	inding for payment of the cost of repair, I/we the undersigned do hereb absolutely to you all the proceeds of my/our claim(s) including damages, interest including legal costs / disbursements payable on a party and party basis which e parties so entitled including solicitors, vehicle appraisers and other experts
	m that payment to you only or to any person authorised by you to receive titute a good and effectual discharge of the obligations by any party of the of my/our claim(s).
I/We authorise you	expressly to give notice of this assignment to the party concerned.
	y this assignment, I/we shall not be entitled in law to receive any payment. If me/us, I/we shall return same to the sender as I/we am/are precluded from ent.
Dated this _	26 day of 12 20 19.
Signature	: aft.
Name	Gon Shugh Line
ID No.	(76330738
Address	= 4 Chou chu kang Grove # 01-09 S(688>=9)
Witness Signature	: _//_
Witness Name	: Chew Yne Yin
Witness ID	588266184

Witness Address



Letter of the Mobile of

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SMH 128U (Insd veh)	
	SLS 898J (TP veh)	Model: Honda Civic (1498cc)
Date of Accident/ Time:	24/12/2019	

Remaiks:	*Assessed Liability to b	e filled only for the	tin callisions and for cases where BOLA does not apply		
	SCILA Liability	(%)	Assessed Liability (*) (%)		
B) For GIA Registered Wo		rkshop:	BOLA Applicable: Yes/ No BOLA Scenario N	0:	
A)	For Non GIA Registered Workshop:		Agreed Dability 100 [96]	Agreed Dability 100 [96]	
	ame: SM AUTOMOTIVE Party Workshop GIA Registere		[X] NO (Kindly indicate below)		
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		= \$			
Others.		1.5.			
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Loss of 1		S S	days at	S per da	
Repair El Final Rep		5 9,52	1-04		

NOTE:

- 10 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.
- 3. 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 socident.

LKK

Signature of workshop representative / Workshop stamp
Name of Representative: SULM, Chons

Date: 24. 2. 7070

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: (h[0] / h(h)

Name of Witness Date 24-2-2070

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

Date:

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811

AXA Customer Centre #01-21/22 Telephane: +65 6880 4888 - axa.com.sg



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-19-211814

Date of Request:

24/12/2019

Your Ref No:

Online Purchase

Chew Motor Pte Ltd No 1 Kaki Bukit Ave 6, #01-11/41 Autobay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

24/12/2019

Enquiry By

Chong Siok Ling

TP Vehicle No.

SMH128U

Accident Date

24/12/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SMH128U	AXA Insurance Pte Ltd	10/05/2019-09/05/2020	6880 4888	

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.

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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-19-211814

Date of Request:

24/12/2019

Your Ref No:

Online Purchase

Chew Motor Pte Ltd No 1 Kaki Bukit Ave 6, #01-11/41 Autobay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

24/12/2019

Enquiry By

Chong Siok Ling

TP Vehicle No.

SMH128U

Accident Date

24/12/2019

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:

[X] GIRO [] Cash [] Cheque