



WITHOUT PREJUDICE

Our Ref: SKH 2567X

Your Ref: SGR 2062E

14th July 2020

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AXA Insurance Pte Ltd

Dear Hsiao Tong,

Accident Involving: SKH 2567X and SGR 2062E

Date of Accident: 28 December 2019

Location of Accident: Toa Payoh Safra CP

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$	4,850.00	
TOTAL LOR/U DAYS		11 DAYS	2+1 Days PRS (8/9/10 Jan) + 3 Day Resurvey (11-Sat/12-Sun/13 Jan) + 5 Repair Days Agreed (14/15/16/17/18 Jan)
Add Loss of Rental	\$	720.00	6 Days - Inv#TAP2567X-228/0685
Add Loss of Use	\$	400.00	5 Days
Total	\$	5,970.00	
Add 3rd Party Report Fee	\$	29.00	
GRAND TOTAL	\$	5,999.00	

Kindly pay the Grand Total Amount of **\$5,999.00** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautooffice@gmail.com

Thank you.



Regards
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautooffice@gmail.com / teamautopl@gmail.com



PROFORMA INVOICE

**ATTENTION:**

Goh Teck Yeow

PI Number	P2007-0943
PI Date	14-Jul-2020
Vehicle No.	SKH 2567X
Accident Date	28-Dec-2019

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SKH 2567X	COR Lump Sum		\$ 4,850.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$ 4,850.00
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Authorized Signature





160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956
teamautoffice@gmail.com / teamautopl@gmail.com

THIS IS YOUR INVOICE

Kindly remit payment to our office address stated. If you have any query pertaining to this invoice, please feel free to contact us.

INVOICE DATE: 15-Jan-20

INVOICE NOS: TAP2567X-228/0685

Your Reference: SKH 2567X

Our Reference: SKL 1557K

Billed To: Goh Teck Yeow

Address: 98 Aljunied Crescent #03-405 S'380098

Invoice Type: Rental

INVOICE TOTAL IN SGD

\$ 720.00

DESCRIPTION	AMOUNT (\$\$)
Leasing of Vehicle Number: SKL 1557K	\$ 720.00
Rental Rate Per Day: \$120.00	
Rental Duration: 6	
Commencement Date: 9/1/2020	
Ceasement Date: 15/1/2020	
* DRIVER: Goh Teck Hwee of S9622359E	
Discount	\$ -
Amount Due	\$ 720.00

COMMENTS

1. Total payment due in 30 days.
2. All Cheques must be made payable to **TEAM AUTOPRO PTE LTD.**
3. Please include our invoice number at the back of your cheque.

For Team AutoPro Pte Ltd

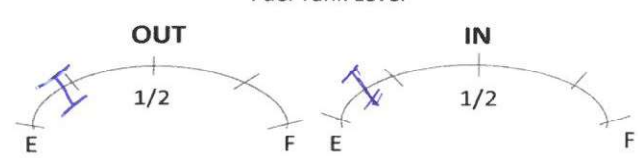
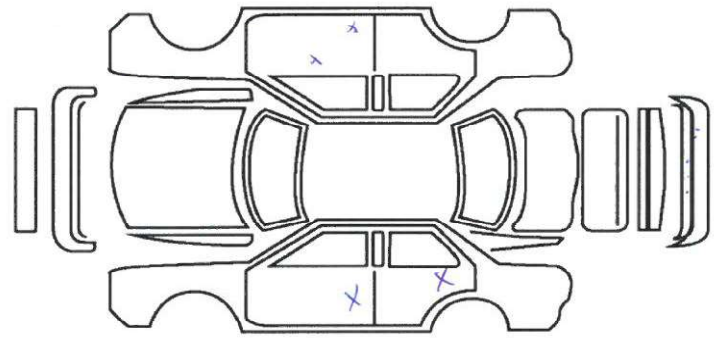





Signature & Stamp

PAYMENT DETAILS

THANK YOU FOR YOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms)
Page 1 of 1

HIRER'S PARTICULAR		Vehicle No / Model		Rental Vehicle No / Model														
Name: <u>Goh Teck Yeow</u>		SKH 2567X V-scarves		SKL/557K VW Jetta.														
NRIC/Passport No: <u>S9226262F</u>		Date / Time Out:		Date / Time In:														
Driving Licence No: _____ Exp: _____		12:15PM 09/01/2020		6pm 15/01/2020														
Address: <u>Blk 98 Aljunied Crescent #03-405</u> <u>s(356698)</u>		Fuel Tank Level 																
Tel: <u>84810345</u>																		
ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)		RENTAL CHARGES																
Name: <u>Goh Teck Hwee</u>		<table border="1"> <tr> <td>Hour</td> <td>@</td> <td>per hour</td> <td rowspan="4">TOTAL S\$</td> </tr> <tr> <td>6 Days</td> <td>@ \$120</td> <td>per days</td> </tr> <tr> <td>Weeks</td> <td>@</td> <td>per week</td> </tr> <tr> <td>Months</td> <td>@</td> <td>per month</td> </tr> </table>			Hour	@	per hour	TOTAL S\$	6 Days	@ \$120	per days	Weeks	@	per week	Months	@	per month	
Hour	@				per hour	TOTAL S\$												
6 Days	@ \$120				per days													
Weeks	@				per week													
Months	@				per month													
NRIC/Passport No: <u>S9622359E</u>																		
Driving Licence No: _____ Exp: _____																		
Address: _____																		
Tel: <u>93230864</u>		Additional Payable: _____																
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		SUBTOTAL Payable: <u>\$720</u>																
		DEPOSIT AMOUNT PAID		DEPOSIT AMOUNT REFUNDED / Date														
		Mode of Payment																
		ADDITIONAL REMARKS																
Physical Damage Excess		Acknowledgement		HIRER'S DECLARATION: I/WE agree to the terms and conditions above and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.														
<table border="1"> <tr> <td>Singapore - Own Damage</td> <td>\$2,000</td> </tr> <tr> <td>Singapore - 3rd Party Damage</td> <td>\$2,000</td> </tr> <tr> <td>Malaysia (If applicable)</td> <td>\$8,000</td> </tr> <tr> <td>For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age</td> <td>\$3,000 (Additional)</td> </tr> </table>		Singapore - Own Damage	\$2,000	Singapore - 3rd Party Damage	\$2,000	Malaysia (If applicable)	\$8,000	For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 (Additional)									
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For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 (Additional)																	
IMPORTANT NOTE : 1. The person(s) signing this rental Agreement assumes full personal responsibility, jointly and severally with the firm, person or organization, the driver or all authorized driver in whose name he/they might sign. 2. Only persons above 23 years of age with more than 2years driving experience, authorised, licensed and signing this agreement may drive the vehicle. 3. Vehicle is strictly for use in Singapore only and may not be driven or taken out of Singapore without the prior written consent of TeamAutoPro Pte Ltd. 4. Use of vehicle for illegal purposes (e.g. in connection with theft, drug pedalling or trafficking, smuggling), commercial purposes (e.g. taxi, uber, grab car / car pool usage) is strictly prohibited. 5. In case of accident, the hirer shall report to TeamAutoPro Pte Ltd immediately. If there are bodily injuries, a police report must be made within 24 hours																		
<div style="text-align: right;">  _____ HIRER Signature / Date  Authorized Signatory On Behalf of TeamAutoPro Pte Ltd </div>																		

TAX INVOICE

Our Ref No: GR-19-214765

Date of Request: 31/12/2019

Your Ref No:

WALK IN LEE TECK HUAT

TEAM AUTOPRO PTE LTD - SIN MING
160 SIN MING DRIVE #02-12 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Your Vehicle No: SKH2567X

Date of Accident: 28/12/2019

Place of Accident: TOA PAYOH SAFRA CARPARK

Involving Vehicle No: SGR2062E

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.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-214766

Date of Request: 31/12/2019

Your Ref No:

WALK IN LEE TECK HUAT

TEAM AUTOPRO PTE LTD - SIN MING
160 SIN MING DRIVE #02-12 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Date of Accident: 28/12/2019

Vehicle No: SKH2567X

Place of Accident: TOA PAYOH SAFRA CP

Involving Vehicle No: SGR2062E

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\$)
SGR2062E	TOA PAYOH SAFRA CP	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.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: SKH 2567 X
and SGR 2062 E and
and and
@ TOA PAYOH SAFRA CAR PARK

dated 28/12/2019.

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd**.

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

X 

Claimant Signature & Co's Stamp (if applicable)

Date: 10/01/2020



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SGR 2062E (Insd veh)	Model: VOLKSWAGEN SCIROCCO 1.4L
	SKH 2567X (TP veh)	
Date of Accident/ Time:	28/12/2019	

Repair Estimate	: \$		
Final Repair Cost	: \$	4,850.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	600.00	6 days at \$100.00 per day
LTA / GIA Search Fee	: \$	29.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	5,479.00	
Payee Name : Team AutoPro Pte Ltd			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)	
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:

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/TORTEASOR 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 accident.

Signature of workshop representative / Workshop stamp
Name of Representative: *Adrian*
Date: *21/07/2020*



Signature of Witness / Workshop stamp (if applicable)
Name of Witness: *Peach Any*
Date: *21/07/2020*



Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: *22/07/2020*

"My execution of this Discharge Voucher is solely for my claim for Property Damage & nonprejudicial to any other claims arising from the same accident."



160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956
teamautoffice@gmail.com / teamautopl@gmail.com

THIS IS YOUR INVOICE

Kindly remit payment to our office address stated. If you have any query pertaining to this invoice, please feel free to contact us.

INVOICE DATE:	21-Jul-20
INVOICE NOS:	TAP2567X-19/1082
Your Reference:	SKH 2567X
Date Of Accident:	28/12/2019

Billed To: AXA Insurance Singapore Pte Ltd

On Behalf Of: Goh Teck Yeow

Invoice Type: 3rd Party PD Claim

INVOICE TOTAL IN SGD

\$ 4,850.00

DESCRIPTION	AMOUNT (\$S)
Lump Sum Amount Payable for Supply of Spare Parts & Labour Pertaining to Accident Repair of: <u>SKH 2567X</u>	\$ 4,850.00
Discount	\$ -
Amount Due	\$ 4,850.00

COMMENTS

1. Total payment due in 30 days.
2. All Cheques must be made payable to **TEAM AUTOPRO PTE LTD.**
3. Please include our invoice number at the back of your cheque.

For Team Auto Pro Pte Ltd


Signature & Stamp

PAYMENT DETAILS

THANK YOU FOR YOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms)

Page 1 of 1



Auto
Consultants
Pte Ltd

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

29 JAN 2020

OH CHEE TIONG

BLK 258B COMPASSVALE ROAD

#03-569

SINGAPORE 542258

Dear Sir/ Mdm

OUR REF : CC4/ASM20000613/Bpa3// S9M02BN6

YOUR REF : SGR2062E

**ACCIDENT INVOLVING SGR 2062E(AXA) AND SKH 2567X ALONG/AT SAFRA TOA
PAYOH CAR PARK ON 28/12/2019**

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 TEAM AUTOPRO PTE LTD acting on behalf of the owner of SKH 2567X against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as your vehicle was turning out from minor road and collided with third party who was on main drive way. 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. 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 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 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 as at 6742 3197 or chewht@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'CHT' or similar, written over a faint circular stamp.

Chew Hsiao Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

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