



華明噴漆廠  
**HUA MENG SPRAY PAINTING WORKSHOP**

AUTOBAY@KAKIBUKIT

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883

Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg. No.: 254678/00M



Your Ref : FBM 9751P

Our Ref : SGA 5855 D

Date: 04/06/2020

AXA Insurance Pte Ltd

Attn: Motor Claims Dept

**ACCIDENT ON 25.02.2020 INVOLVING VEHICLE SGA 5855 D & FBM 9751 P ALONG  
TAMPINES ST 23 TWDS TAMPINES AVE 2**

With regards to the above, we are writing on behalf of the registered owner of vehicle SGA 5855 D which was involved in the above mentioned accident.

We are informed that the above accident was caused solely by the negligence of your insured vehicle FBM 9751 P. As a result of the accident, our client's vehicle was damaged and our client had instructed us to submit his claims for loss and expenses, particulars of which are follows:

1) Repair cost	\$	2,800.00
2) Loss of use-\$100 X 04 days	\$	400.00
3) LTA search	\$	7.49
<b>Total</b>	<b>\$</b>	<b>3,207.49</b>

We hereby enclosed herewith the following documents for your consideration of the above claim.

a) Final Repair Bill Of SGA 5855 D

c) LTA SEARCH

b) GIA report

d) Owner / Driver NRIC & Driving License

華明噴漆廠  
HUA MENG SPRAY PAINTING WORKSHOP  
AUTOBAY@KAKI BUKIT  
KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883  
TEL: 6747 8064, 6746 5519 FAX: 6743 4896

Yours faithfully,

**HUA MENG SPRAY PAINTING WORKSHOP**

## AUTHORISATION TO ACT

I/We, Ho Chao Siong ("the third party claimant") of  
Blk 331A Anchorvale Street #08-553 S (54/331) (address),  
owner of SGA5855D (vehicle no.) hereby authorise **HUA MENG SPRAY PAINTING**  
**WORKSHOP** ("the workshop") to act for me with respect to my claim for repair costs and/or  
rental and/or loss of use ("claim") for my vehicle no. SGA5855D that was damaged pursuant  
to the accident which occurred on 25-02-2020 (date) along Tampines St 23 twds  
Tampines Ave 2 (location) involving vehicle no/s FBM 9751P ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem  
fit and the workshop is further authorized to receive payment further to settlement of my claim  
with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other  
vehicle/s is concerned.

Dated this 28 (day) of 02 (month) 20 20 (year)

X

Signed by "the third party claimant"  
(with company stamp if applicable)

華明噴漆廠  
HUA MENG SPRAY PAINTING WORKSHOP  
AUTOBAY@KAKI BUKIT  
1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883  
TEL: 6747 8064, 6746 5519 FAX: 6743 4896

Signed by "the workshop"  
(with company stamp)





WITHOUT PREJUDICE  
TO OUR CLIENT'S PERSONAL INJURY  
CLAIM (PRESENT OR FUTURE) WHICH IS  
EXPRESSLY RESERVED

### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBM9751P (Insd veh)	Model: TOYOTA WISH 1.8X A
	SGA5855D (TP veh)	
Date of Accident/ Time:	25/02/2020 08:20	

Repair Estimate	: \$	8,144.77	
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)	: \$	3,040.00	
Payee Name : HUA MENG SPRAY PAINTING WORKSHOP			
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/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 accident.

華明噴漆廠  
HUA MENG SPRAY PAINTING WORKSHOP  
AUTOBAY@KAKI BUKIT  
1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883  
TEL: 6747 8064, 6746 5519 FAX: 6743 4896

Signature of workshop representative / Workshop stamp  
Name of Representative: Cheek Jing Yee  
Date: 4/9/2020



LWP

Signature of Witness / Workshop stamp (if applicable)  
Name of Witness: Albert Tan  
Date: 4/9/2020

Signature of AXA's surveyor/representative:  
Name of AXA's surveyor /Representative:  
Date: 09/09/2020



華 明 噴 漆 廠  
**HUA MENG SPRAY PAINTING WORKSHOP**

AUTOBAY@KAKIBUKIT

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883

Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg. No.: 254678/00M



Your Ref :

4/6/2020

Our Ref :

Date:.....

VEHICLE NO :SGA 5855 D  
MAKE / MODEL :TOYOTA WISH  
NAME :HO CHAO SIONG  
ADDRESS :BLK 331A ANCHORVALE STREET  
#08-553  
S 541331

---

**FINAL REPAIR BILL FOR VEHICLE NO:SGA 5855 D**

TO SUPPLY AND REPLACE PARTS, LABOUR CHARGES FOR  
REPAIRING, KNOCKING, WELDING AND TO RESPRAY PAINTING  
(LUMP SUM REPAIR)

\$ 2,800.00

**SINGAPORE DOLLARS:TWO THOUSAND EIGHT HUNDRED ONLY**



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

Print Date/Time : 25 Feb 2020 / 12:27:10

Receipt Date/Time : 25 Feb 2020 / 12:27:10

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200225-001510

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - FBM9751P				
As at 25 Feb 2020/08:20:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - FBM9751P Enquiry Fee 20200225122621109488	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
Paid By				
	20200225122636218	Direct Debit: eNETS Debit (Internet Banking)		7.45
<b>Total</b>				7.45
<b>Cash Change</b>				0.00
<b>Tendered Amount</b>				7.45
<b>Excess Refundable Amount</b>				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.



Auto  
Consultants  
Pte Ltd

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

2 JUNE 2020

MUHAMMAD HAFIZ BIN ARIFFIN  
APT BLK 231  
TAMPINES ST-21  
#02-661  
SINGAPORE 521231

Dear Sir/ Mdm

**OUR REF : CC4/ASM20003594/Aka3**  
**YOUR REF : FBM 9751P**  
**ACCIDENT INVOLVING FBM 9751P AND SGA 5855D ALONG/AT TAMPINES ST 23**  
**TOWARDS TAMPINES AVE 2 ON 25/02/2020**

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 M/S HUA MENG SPRAY PAINTING WORKSHOP acting on behalf of the owner of SGA 5855D against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third party vehicle SGA 5855D. As such, liability is down against us.

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 [khanchna@lkkauto.com](mailto:khanchna@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)
- Coloured photographs of accident scene (if any)
- 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 6841 2360 or email us at [khanchna@lkkauto.com](mailto:khanchna@lkkauto.com).

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

Yours sincerely

*Khanchna*

Case Handler

DID: 6841 2360

FAX: 6741 4108

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

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