

ACCIDENT ASSIST

ROC: 53375754A

Address: Blk 24 Sin Ming Lane #01-94 Midview City Singapore 573970

Tel: 63341182

Fax: 63341482

Email: management@assist.com.sg

Letter of Demand

Date: 07 August 2020

Ref No: SML4612R

To: AXA Insurance

8 Shenton Way

#24-01 AXA Tower

Singapore 069911

Thru: LKK AUTO CONSULTANTS PTE. LTD.

Attention: Motor Claims Dept

Dear Officer-in-charge

Case: Accident claim for vehicle SML4612R and XD6927G on 02.04.2020

With reference to above case.

Please find attached copies:

Invoice Reference -AASGIV20-06009	\$21,000.00
Loss of Use- 10 days	\$220 x 10= \$2200.00
Authorisation Letter	-
LTA Search Fee	\$7.45
Total Cost	\$23207.45

Yours Faithfully,



Ashwath

Email: management@assist.com.sg

RCC: 53375754A

Address: Blk 24 Sin Ming Lane #01-94 Mid View City Singapore 573970

Tel: 6334 1182

Fax: 6334 1482

Email: enquiry@accidentassist.sg

AUTHORISATION & INDEMNITY LETTER

I/We ROZAIDI BIN ZAINAL NRIC No. / UEN No. S8019786A
(the third party claimant), having address at 53 BEDOK ROAD #03-31, SINGAPORE 469569 and the owner of SML4612R
(Vehicle) hereby to authorize **ACCIDENT ASSIST SG** to repair the damage to my vehicle in a reasonable time that was pursuant to the accident which occurred (date) 02/04/2020 along FORT ROAD (Just before bus stop 91089) involving vehicle/s XD69276.

I/We understand, acknowledge and agree that:

- I/We, the owner of vehicle no. SML4612R hereby instruct & authorize **ACCIDENT ASSIST SG** to commence repairs to the said vehicle.
- I/We confirm that you are hereby authorized to handle the repair the vehicle and/or to negotiate and settle my claims, relating to the above mentioned accident, which I/We may have, against other third party/parties, or insurers, and/or to instruct lawyers on my/our behalf, to facilitate the third party claim for me/us.
- You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit.
- You are hereby authorised to execute and/or sign any documents/discharge voucher / agreements regarding my/our claims/case for my convenience. You are also hereby authorised to receive on my/our behalf monies/claims, correspondences in connection with this said claims.
- I/We confirm that an event of an unsuccessful claims, against the negligent party, and/or my own insurer for the damages caused to my vehicle, I agree to pay all repair costs and any incidental expenses incurred by you, or to lodge an own damage claim (only for Comprehensive cover) to cover the expenses incurred.
- I/We also hereby instruct and authorised you deduct from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair cost, rental of substitute vehicles and any other incidentals related to the accident claims.

Owner Signature /Company Stamp/ Date

Witness Signature / Name / Date



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	XD 6927G (Insd veh)	Model: PORSCHE PANAMERA
	SML 4612R (TP veh)	
Date of Accident/ Time:	02/04/2020 17:40	

Repair Estimate	: \$	62,736.42	
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	: \$	20,200.00	(GLOBAL SUM)
Payee Name : ACCIDENT ASSIST SG			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability	100 (%)
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/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:

Date: 12/01/2021



KSC

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date: 12/01/2021

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: 12/01/2021

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 03 Apr 2020 / 16:13:15

Receipt Date/Time : 03 Apr 2020 / 16:13:13

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200403-002447

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 - XD6927G As at 02 Apr 2020/17:25:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - XD6927G Enquiry Fee 20200403161112518192	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				
	526471XXXXXX5170	eNETS Credit Card		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.



Immediate Advice

To : AXA Insurance Pte Ltd

Date: 9/11/2020

Survey Details:

Date of loss	2-Apr-2020
Date of appointment	7-Apr-2020
Date of survey	7-Apr-2020
Location of survey	ACCIDENT ASSIST SG

Vehicle Details:

Claim Type:	THIRD PARTY CLAIM
Vehicle number	SML4612R
Make and Model	PORSCHE PANAMERA
Date of registration	10/5/2011
Parf Rebate	
Market Value	\$ 135,000.00
Parf Rebate	\$ 96,989.00
Nett Loss	\$ 38,011.00

Repair details:

Initial Estimate	\$ 62,736.42
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Proposed/Revised repair cost:

Parts	\$ 19,493.66
Check items (estimate)	
Labour	\$ 3,060.00
Total	\$ 22,553.66
Lump Sum(if applicable)	\$ 18,000.00

Number of days for repair	8
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Remarks:

Insured driver change lane

Mandate:

Liability(TP)		100%
Proposed repair cost	\$	18,000.00
Loss of use (10 days x \$220.00)	\$	2,200.00
LTA search fees	\$	7.45
Others		NIL
Proposed Total	\$	20,207.45



RE: Re:<TP - MANDATE IA> - SOM02KR1 [ACCIDENT INVOLVING XD 6927G(OI) & SML 4612R(TP) ON 02/04/2020]

Type

 Question

Message

After we use the part price given, COR at L/S = \$18,000.00. We seek your mandate at \$20,207.45(ALL IN). TP-Mandate IA had been uploaded in Smartclaims. Kindly let us have your approval/instruction. Jasper Chua – 09/11/2020.

Reply



Re:RE: Re:<TP - MANDATE IA> - SOM02KR1 [ACCIDENT INVOLVING XD 6927G(OI) & SML 4612R(TP) ON 02/04/2020]

Type

 Question

Message

Please proceed

Reply