### SUPREME AUTO SERVICE PTE LTD

176 Sin Ming Drive, #02-01 Sin Ming Autocare Singapore 575721 Email: chewkeong@supreme.sg

•TEL: 6452 8211 •FAX: 6451 7420

### Direct Settlement THIRD PARTY CLAIM

Your ref: SGJ 1320 J Our ref: SLF 406 P

AXA INSURANCE PTE LTD Attn: Officer In Charge (Motor Claim Department)

10/03/2020

Dear Sir,

# RE: ACCIDENT INVOLVING SLF 406 P & SGJ 1320 J AT THOMSON ROAD (SLIP ROAD) ON 17/02/2018.

We have been authorized by AMV PTE LTD, the registered owner of vehicle number SLF 406 P, which was involved in the above accident and at the material time to make a 3<sup>rd</sup> party claims against vehicle number SGJ 1320 J.

The accident was clearly caused by your insured's negligence. We, therefore seeking compensation from you for our client financial losses as itemized below: -

Repair cost	S\$	3,050.00
Loss of Use (\$60 x 7 days)	S\$	420.00
Search Fee	S\$	2.00
Total	S\$	3,472.00

We have enclosed copies of relevant documents to support our claims.

Please settle this matter within <u>7 days</u>.

Your prompt settlement of our claim would be much appreciated.

Do contact us at 64528211 for any clarification.

Thank you.

Yours faithfully,



### SUPREME AUTO SERVICE PTE LTD

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Authority Property



To: Supreme Auto Service Pte Ltd SINGAPORE

Date this 26 day of February 20 18.

### Letter of Authorisation

RE:	ACCIDENT NVOLVING SLF406P & SGT 132	CO		_
ALO	NG/AT THOMSON ROAD (SLIP ROAD) TURNING INTO	NORFOLK ROAD		
ON_	17/02/2018.			
1.	I/We, AMV PTE LTD	(NRIC No. SLF 406P	201505825Z & residing	_): at
	owner/driver of motor vehicle no.	3LF 400F	cc rootung	
	respectively in consideration of your workshop repairing my/our vehicle, I/we hereby authorise you to repair and loss of use. I/We further confirm and author said service of a solicitor to proceed with negotiati	o claim on my/our b ise you to use my/our on with the default	enall for the costs name/s to engage ting party's insuran	ICE ITE
	company for payment of the same and in the event nego Summons on my/our behalf and in my/our name/s to claim is successful or not, all legal costs incurred shall assistance as per second paragraph stated herein below:	aim for the same. In be borne by you, prov	vided we rendered o	oui
	I/We understand that by signing this Letter of Author reasonable assistance to you including signing all relector to give evidence to enable the claim to succeed. request from you, you shall be entitled to claim from costs, other incidental costs and expenses pertaining the payment from defaulting party.	If I/we failed or negl me/us the repair cos ne issuance of Summ	ent and attendance lected to do so desp its together with le-	oite ga air
3	You have my/our full authority to instruct my/our solicit party and/or his insurers on such terms as you deem fit. authorised to sign any Discharge Voucher or any docum settlement as full and final discharge of my/our claim, of full authority to collect all compensation monies pertain insurance company or any other party, directly to your value for the settlement of the	ent to confirm my account my/our behalf. You ing to the above-men	ceptance of the a also have my/our	C
4.	In the event the claim is settled or judgment is obtained deducing all costs and disbursements incurred should be your discretion) and will be forwarded to you.	against the defaulting e drawn in your name	party, payment after or my/our name/s (	er at
5.	This letter of Authorisation is irrevocable.	*		
Sign	ROC No. 201505825Z			
Nam	AMY DTE LTD			
NRI	C NO: 201505825Z			
2.7				

## SUPREME AUTO SERVICE PTE LTD

176 SIN MING DRIVE #02-01 SINGAPORE 575721 TEL: 6452 8211 FAX: 6451 7420 CO. REG. NO.: 19-9404214-H

**INVOICE: 17704** 

**AXA INSURANCE PTE LTD** 

DATE:

3/10/2020

QUANTITY	PARTICULARS	AMOUNT (\$)
	RE: MAZDA 3 / SLF 406 P	
	Lump Sum for repair for the above mentioned vehicle.	\$3,050.0
	Total	\$3,050.0
	SERVICE SERVIC	

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### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SGJ 1320J (Insd veh)	Marine San School State Control of the Control of t
Verries (100)	SLF 406P (TP veh)	Model: Mazda 3 (1496cc)
Date of Accident/ Time:	17/02/2018	

Repair Es	stimate	:\$	7,523.30			
Final Rep	pair Cost	:\$			1 16	nos dos
Loss of L	Jse	:\$			days at \$	per day
Rental (i	fany)	:\$			days at \$	per day
LTA/GIA	A Search Fee	:\$				
Others:		:\$				
		:\$				
Final Set	ttlement Sum (Global Sum)	:\$	3,350.00			
Is Third	lame : Supreme Auto S Party Workshop GIA Registered	?  ?	[ ] YES [ X	NO (Kindly indicate below		
	For Non GIA Registered	Work	shon:	Agreed Liability 100 (9	6)	
	For Non GIA Registered			rigicos aleanin)		1
A)	For Non GIA Registered For GIA Registered Wor			BOLA Applicable: Yes/ No BO	LA Scenario No: _	
A)	27	kshop				
A) B)	For GIA Registered Wor	kshop (%)	:	BOLA Applicable: Yes/ No BO	LA Scenario No:(%)	_

#### 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.
- 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.

LKK

Signature of workshop representative

Name of Representative: Chew

Signature of Witness Name of Witness

Workshop stamp (if applicable)

Date:

Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative:

Date: 15/04/2020



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

18 APRIL 2019

CHUA SEOW - WEI DEREK 9 GLOUCESTER ROAD #01-03 SINGAPORE 21009

Dear Sir/Madam,

OUR REF : CC4/ASM18004299/Khb3

YOUR REF : SGJ1320J

ACCIDENT INVOLVING SGJ1320J AND SLF406P ALONG SLIP ROAD THOMSON ROAD TO NORFOLK ROAD ON 17.02.2018

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

We have received a claim from M/s SUPREME AUTO SERVICE PTE LTD acting on behalf of the owner of SLF406P against your motor insurance policy.

Based on the accident report and accident, it was reported that your vehicle had collided to the Third Party vehicle SLF406P. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD - if applicable) 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 7 days from the date of this letter if not provided at AXA's reporting centre. The list below is not all inclusive and further

- Police report, Police Investigation result, appeal against the Traffic Police offence
- Authorization Letter for the Driver to drive the vehicle
- 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)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)



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

 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 <a href="mailto:vicalpeh@lkkauto.com">vicalpeh@lkkauto.com</a>.

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: vicalpeh@lkkauto.com

c.c. AXA Insurance Pte Ltd (AXA) (Motor Claims Dept)