



# Tony Automotive Pte Ltd

8 Kaki Bukit Ave 4 #04-07 Premier @ KB Singapore 415875

Tel: 69763261 Fax: 69763261

Email: tony07auto@gmail.com

Co. Reg No.: 201939168R

Your Ref No: CC4/ASM20005276/Eea3

Our Ref No: YM9530M/04/20

Date: 01/06/2020

**AXA Insurance Pte Ltd**

**8 Shenton Way #24-01, AXA Tower, Singapore 068811**

Attn: Motor Claims Department

Dear Sir / Madam,

**ACCIDENT INVOLVING: YM9530M and YQ222R on 07/04/2020**

Please refer to the above-mentioned accident.

We are writing on behalf of J Y Transport Services, the owner of motor vehicle YM9530M which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle YQ222R.

As a result of the said collision, our client has suffered loss and damage which are set out hereunder as follows (for Property Damage Claim only) :

1. COST OF REPAIR	\$	5,200.00
2. LTA SEARCH FEE	\$	7.45
3. LOU (5 DAYS X \$350)	\$	1,750.00
<b>TOTAL AMOUNT</b>	<b>\$</b>	<b>6,957.45</b>

We enclosed the following support documents for your reference:

- Authorization Letter
- Driver's ID and Driving License
- LTA Search
- Police Report
- Certificate of Insurance

Kindly acknowledge receipt of the above said documents and your swift and favourable reply is greatly appreciated.

Yours Faithfully,

Tony Automotive Pte Ltd





# Tony Automotive Pte Ltd

8 Kaki Bukit Ave 4 #04-07 Premier @ KB Singapore 415875  
Tel: 69763261 Fax: 69763271 Email: tony07auto@gmail.com  
Co. Reg No.: 201939168R

## Letter of Authorisation & Indemnity

Accident Involving Vehicle no: YM9530M and YQ222R On 07/04/2020  
At AYE TOWARDS TUAS

1. I/We, the owner of vehicle no. YM9530M hereby instruct and authorise TONY AUTOMOTIVE PTE LTD ("the workshop") to commence repairs to the said vehicle. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$\_\_\_\_\_ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in court in my/our name against the third party.
3. You have my full/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
4. Upon resolving my/our claim, you are authorised to agree with my/our solicitors on the amount of their professional costs and disbursement for acting for me/us and to receive the payment of the balance of the settlement sum on my/our behalf directly into your account. In the event that my/our claim or legal costs of the third party as well as professional costs and disbursements of my/our solicitors notwithstanding that my/our solicitors were appointed by you on our behalf.
5. I/we also hereby instruct and authorise you deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
6. In the event that I/we am/are required to attend at my/our solicitors' office or to attend court in connection with my/our claim, I/we shall render full co-operation.
7. In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party. I/we authorise you to revert the claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respect, I/we understand and accept that the excess amount applicable under policy of insurance shall be borne by me/us.
8. If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
9. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 16 day of APR 2020

Signature of vehicle owner:  ←

Signature of Witness: 

Name: J Y TRANSPORT SERVICE

Witnessed by: POH BMSG

IC no: \_\_\_\_\_  
(Company stamp, if applicable)

Address: \_\_\_\_\_



Tel: \_\_\_\_\_



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	YQ 222R (Insd veh)	Model: ISUZU FVR34SUQD
	YM 9530M (TP veh)	
Date of Accident/ Time:	07/04/2020 / 16:30	

Repair Estimate	: \$	59,948.00	
Final Repair Cost	: \$	5,000.00	
Loss of Use	: \$	750.00	5 days at \$ 150 per day
Rental (if any)	: \$	-	days at \$ per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$	-	
	: \$	-	
Final Settlement Sum	: \$	5,757.45	

Payee Name : **TONY AUTOMOTIVE 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/ <del>No</del> BOLA Scenario No: <u>NIL</u>
	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: TONY  
 Date: 3/11/21

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: CHARIS  
 Date: 3/11/21

Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative:  
 Date: 05.11.21



# Tony Automotive Pte Ltd

8 Kaki Bukit Ave 4 #04-07 Premier @ KB Singapore 415875

Tel: 69763261 Fax: 69763271

Email: tony07auto@gmail.com

Co Reg No. 201906614W

## INVOICE

1/6/2020

YM9530M

### BILL TO

AXA Insurance Pte Ltd  
8 Shenton Way #24-01  
AXA Tower  
Singapore 068811

Vehicle No: YM9530M  
Make/Model ISUZU  
FVR34SUQD  
Term: CASH

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
1	Cost of Repair for YM9530M LKK REF : CC4/ASM20005276/Eea3	1	S\$ 5200.00	S\$ 5200.00

All cheques should be crossed and made payable to "Tony Automotive Pte Ltd"

**Balance Amount Due \$ 5,200.00**

  
for Tony Automotive Pte Ltd





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

Print Date/Time : 16 Apr 2020 / 12:35:35

Receipt Date/Time : 16 Apr 2020 / 12:35:35

### Tax Invoice/Receipt

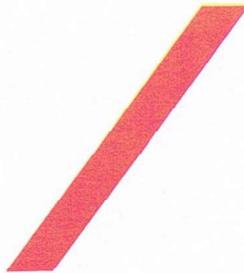
Receipt No. : ITNET-00000-200416-001168

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 - YQ222R As at 07 Apr 2020/16:30:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - YQ222R Enquiry Fee 20200416123345538451	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				
	559221XXXXXX9969 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.



### GIRO CREDIT AUTHORISATION FORM

This form must be completed and returned to AXA Insurance Pte Ltd. Payment will be credited directly into the policyholder/claimant's designated bank account stated below. The Policyholder/claimant has to complete **all fields** of this form and return to:

**AXA Insurance Pte Ltd**  
**8 Shenton Way, #24-01 AXA Tower**  
**Singapore 068811**

Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)	
Name of Policyholder/Claimant:	TONY AUTOMOTIVE PTE LTD
Contact Person:	CHRIS
Contact Number:	86886813
Email Address:	tony@tauto@gmail.com
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	
Particulars of Policyholder/Claimant's Bank Account	
Name of Bank:	UOB
Bank Code:	
Bank Branch Code:	
Bank Account Number:	3403135877
Name of Account Holder:	TONY AUTOMOTIVE PTE LTD

I/We hereby authorise AXA Insurance Pte Ltd to credit the payment due to me/us to the above bank account, and undertake to return to AXA Insurance Pte Ltd immediately upon demand any sum which shall not be so credited into such bank account. I/We agree that AXA Insurance Pte Ltd shall be fully absolved of any liability to pay me/us such insurance payout once such amounts are credited into the above bank account.

This authorisation shall continue in force until I/we have expressly revoked it by notice in writing delivered to you. In the event of a change of bank account, I/we shall inform you in writing 30 days in advance before the change.

In connection with my/our and/or the claimant's claims, I/We give consent for AXA Insurance Pte Ltd ("AXA") and their respective representatives or agents to collect, use, store, transfer and/or disclose the information (including that provided by sources other than myself) concerning me/us and/or the claimant, to or with all such persons (including any member of the AXA Group or any third party service provider, and whether within or outside of Singapore and the Policyholder when claiming under a Group Policy) for the purpose of enabling AXA and their respective representatives or agents to provide me/us and/or the claimant (where applicable) with services required of an insurance provider, including the evaluating, processing, administering and/or managing my/our and/or the claimant's claims or the Policyholder Group Policy(ies) with AXA (as the case may be), and for the purposes set out in AXA's Data Use Statement which can be found at <http://www.axa.com.sg> ("Purposes").




Authorised Signature & Company Stamp (as in bank records)

3/4/21

Date





Re:RE: Re:RE: :[MANDATE IA] - S0M02MF5 [ACCIDENT INVOLVING YQ 222R(OI) & YM 9530M(TP) ON 07/04/2020]

Type

 Question

Message

PLS PROCEED WITH COR AT \$5,000.00 OTHERS AS PROPOSED

Reply