



WITHOUT PREJUDICE

Our Ref: SJT 9816E

Your Ref: SML 5139J

9th September 2020

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

Dear Hsiao Tong,

Accident Involving: SJT 9816E and SML 5139J

Date of Accident: 3 August 2020

Location of Accident: Junc of Jalan Besar & Rochor Road

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

Cost of Repair as agreed	\$ 6,000.00
Add Loss of Use	\$ 1,040.00 13 Days
**2 Days PRS (5/6 Aug) + 8 Repair Days Agreed (7/8/11/12/13/14/15/17 Aug) + 2 Sunday (9/16 Aug) + 1 PH (10 Aug)	
Total	\$ 7,040.00
Add 3rd Party Report Fee	\$ 29.00
GRAND TOTAL	\$ 7,069.00

Kindly pay the Grand Total Amount of **\$7,069.00** 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

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.: SJT9816E
and SML 51397 and _____
and _____ and _____
@ JUNC OF JALAN BESAR & ROCHOR ROAD
dated 3/8/2020

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,



Claimant Signature & Co's Stamp (if applicable)

Date: 03/08/2020



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SML 5139J (Insd veh)	Model: Hyundai I30 (1591)
	SJT 9816E (TP veh)	
Date of Accident/ Time:	03/08/2020	

Repair Estimate	: \$	14,943.76	
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)	: \$	6,540.00	

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/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.

Signature of workshop representative / Workshop stamp
Name of Representative: Phua Lay
Date: 17/11/22



Signature of Witness / Workshop stamp (if applicable)
Name of Witness: _____
Date: 17/11/2020



Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: 17/11/2020

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: 16-Nov-20

INVOICE NOS: TAP9816E-20/1221

Your Reference: SJT 9816E

Date Of Accident: 3/8/2020

Billed To: AXA Insurance Singapore Pte Ltd

On Behalf Of: Ace Car Rental Pte Ltd

Invoice Type: 3rd Party PD Claim

INVOICE TOTAL IN SGD

\$ 6,000.00

DESCRIPTION	AMOUNT (\$S)
Lump Sum Amount Payable for Supply of Spare Parts & Labour Pertaining to Accident Repair of: <u>SJT 9816E</u>	\$ 6,000.00
Discount	\$ -
Amount Due	\$ 6,000.00

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

TAX INVOICE

Our Ref No: GR-20-090023

Date of Request: 04/08/2020

Your Ref No:

PURCHASE BY EMAIL

TEAM AUTOPRO PTE LTD (SIN MING)
160 SIN MING DRIVE, #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Your Vehicle No: SJT9816E

Date of Accident: 03/08/2020

Place of Accident: JLN BESAR

Involving Vehicle No: SML5139J

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-20-090024

Date of Request: 04/08/2020

Your Ref No:

PURCHASE BY EMAIL

TEAM AUTOPRO PTE LTD (SIN MING)
160 SIN MING DRIVE, #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Date of Accident: 03/08/2020

Vehicle No: SJT9816E

Place of Accident: JUNC OF JALAN BESAR & ROCHOR ROAD

Involving Vehicle No: SML5139J

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\$)
SML5139J	JUNC OF JALAN BESAR & ROCHOR ROAD	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

ACCIDENT INVOLVING SML 5139J(AXA) AND SJT 9816E ALONG/AT CROSS JUNCTION TOWARDS SIM LIM SQUARE ON 03/08/2020

Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Fri 7/8/2020 9:03 AM

To: CHIN_Y_Y81@HOTMAIL.COM <CHIN_Y_Y81@HOTMAIL.COM>

07 AUG 2020

Mr Chin Yong Yew Willy

[By Email only]

Dear Sirs/ Mdm

OUR REF : CC4/ASM20008093/ps3 // S0M02RKP

YOUR REF : SML5139J

ACCIDENT INVOLVING SML 5139J(AXA) AND SJT 9816E ALONG/AT CROSS JUNCTION TOWARDS SIM LIM SQUARE ON 03/08/2020

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 third party claim(s) from TEAMWORK GARAGE PTE LTD acting on behalf of the owner of SJT9816E against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour. 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 to confirm that the driver is allow to drive the vehicle.
- 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 us at 6742 3197 or email us at chewht@lkkauto.com.

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

Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742 3197 | email: chewht@lkkauto.com | fax: 6741 4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)