



WITHOUT PREJUDICE

Our Ref: SMA 4968Y

Your Ref: SHD 149P

7th November 2020

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

Dear Sir/Mdm,

Accident Involving: SMA 4968Y and SHD 149P
Date of Accident: 14 August 2020
Location of Accident: Lornie Road Entrance towards PIE (Tuas)

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

Cost of Repair as agreed	\$ 3,400.00
Add Loss of Loss	\$ 1,320.00 11 Days
***2 Days PRS (14/17 Aug) + 2 Days PRS Weekend (15/16 Aug) + 1 Day Resurvey (18 Aug) + 5 Repair Days Agreed + 1 Sunday	
Total	\$ 4,720.00
Add 3rd Party Report Fee	\$ 29.00
Add LTA Search Fee	\$ 7.45
GRAND TOTAL	\$ 4,756.45

Kindly pay the Grand Total Amount of **\$4,756.45** 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)

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.: SMA 4968 Y
and SHD 149 P and
and and
@ Lornie Rd Entrance Towards PIE Tuas
dated 14/08/2020.

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: 14/08/2020



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 149P (Insd veh)	Model: TOYOTA HARRIER M GRADE
	SMA 4968Y (TP veh)	
Date of Accident/ Time:	14/08/2020 15:20	

Repair Estimate	: \$		
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	: \$	4,000.00	(GLOBAL SUM)
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 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:

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/TORTEFEASOR 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.

<p>Signature of workshop representative / Workshop stamp</p> <p>Name of Representative: TEAM AUTOPRO PTE. LTD.</p> <p>Date: 23/11/20</p> <p>LKK Reg no: 201811621K</p> <p>LTC</p>	<p>Signature of Witness / Workshop stamp (if applicable)</p> <p>Name of Witness: TEAM AUTOPRO PTE. LTD.</p> <p>Date: 23/11/20</p> <p>Reg no: 201811621K</p>
<p>Signature of AXA's surveyor/representative:</p> <p>Name of AXA's surveyor /Representative:</p> <p>Date:</p>	<p>"My execution of this Discharge Voucher is solely for my claim for Property Damage & nonprejudicial to any other claims arising from the same accident."</p>



160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956
teamautooffice@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:	23-Nov-20
INVOICE NOS:	TAP4968Y-20/1241
Your Reference:	SMA 4968Y
Date Of Accident:	14/8/2020

Billed To: AXA Insurance Singapore Pte Ltd

On Behalf Of: AL Autocar Pte Ltd

Invoice Type: 3rd Party PD Claim

INVOICE TOTAL IN SGD
\$ 3,400.00

DESCRIPTION	AMOUNT (\$S)
Lump Sum Amount Payable for Supply of Spare Parts & Labour Pertaining to Accident Repair of: <u>SMA 4968Y</u>	\$ 3,400.00
Discount	\$ -
Amount Due	\$ 3,400.00

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 AutoPro Pte Ltd


Signature & Stamp
Reg no: 20111021K

PAYMENT DETAILS

THANK YOU FOR YOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms)

Page 1 of 1



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-20-097679

Date of Request: 20/08/2020

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: SMA4968Y
Date of Accident: 14/08/2020
Place of Accident: LORNIE RD
Involving Vehicle No: SHD149P

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



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-20-097680

Date of Request: 20/08/2020

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: 14/08/2020

Vehicle No: SMA4968Y

Place of Accident: LORNIE ROAD ENTANCE TOWARDS PIE (TUAS)

Involving Vehicle No: SHD149P

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\$)
SHD149P	LORNIE ROAD ENTANCE TOWARDS PIE (TUAS)	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



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

Print Date/Time : 14 Aug 2020 / 18:06:16

Receipt Date/Time : 14 Aug 2020 / 18:06:16

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200814-003664

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 - SHD149P As at 14 Aug 2020/15:20:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHD149P Enquiry Fee 20200814180519502731	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				
426569XXXXXX8855		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.



Jasper Chua (LKK Auto)

From: Jasper Chua (LKK Auto)
Sent: Friday, 25 September 2020 6:14 PM
To: claims@transcab.com.sg
Cc: 'transcab_avaclaims@ava-ins.com'
Subject: ACCIDENT INVOLVING SHD 149P(AXA) AND SMA 4968Y ALONG/AT LORNIE ROAD ENTANCE TOWARDS PIE (TUAS) ON 14/08/2020

25 September 2020

**Transcab Taxi
Singapore**

Dear Sir,

OUR REF : CC4/ASM20008558/Bba3 // SOM02S90
YOUR REF : P2348706 (SHD 149P)

**ACCIDENT INVOLVING SHD 149P(AXA) AND SMA 4968Y ALONG/AT LORNIE ROAD ENTANCE TOWARDS PIE (TUAS)
ON 14/08/2020**

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 claim from TEAM AUTOPRO PTE LTD acting on behalf of the owner of SMA 4968Y against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as it is a head to rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of S\$5,000/- is attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim. The applicability of the excess is as follows:

- 1) Any settlement equal to or above the excess, you shall be liable to make the payment of \$5000/-; or
- 2) Any settlement below the excess, you shall be liable for the amount settled.

We shall keep you informed of the third party claim settlement and thereafter kindly let us have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by us for the above subject matter, we expressly reserve all our rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

As Insurers, 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 AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following 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)
- 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 AXA immediately. You may email it to cst@axa.com.sg / jasperchua@lkkauto.com or deliver it by hand to our 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), 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 2928 or email us at jasperchua@lkkauto.com.

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

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd


Phone: 6841-2928 | email: jasperchua@lkkauto.com | fax: 6741-4108

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



Pls proceed DS with below revised quantum

Type

 Question

Message

COR: \$3400.00 (as proposed); LOR: up to \$600 (\$100/day for 5-6 days, subject to rental receipt); LTA/GIA: \$36.45. Total: \$4036.45

Reply