Block 9005 Tampines Street 93 #01-246/254 Singapore 528839 Tel: 67840663 (8 Lines) Fax: 67840692 GST Reg No: MX-0869103-NO Business Reg No: 394773/00D E-mail: nphauto@pacific.net.sg



Our Ref: TP0028/08/20

1st September 2020

Motor Claim Department AXA Insurance Singapore Pte Ltd 8 Shenton Way #27-01 AXA Tower Singapore 068811

Dear Sirs

Ref : ACCIDENT ON: 18/08/2020

INVOLVING VEHICLE: SLR7329U AND SDM9119S

ALONG CONDO CARPARK OF 299 BEDOK SOUTH AVE 3

We refer to the above matter and our car no: SLR7329U has now been repaired and as the accident was caused by the negligence of your insured's driver, we are claiming from you the loss incurred as follows:

| Cost of repair | \$3,103.00 |
|----------------|------------|
| Rental         | 749.00     |
| GIAFee         | 2.00       |
| Total          | \$3,854.00 |
|                |            |

We enclose copies of the following document support of the claims:

- E-filing report
- 2 Search fee
- 3 Final Repair Bill
- 4 Wellcome Rental Invoice

Could you please look into this matter and let us hear from you whether you admit liability to settle our claim within 14 days of this letter.

Yours faithfully

## AUTHORIZATION TO ACT

| I, Patrick Law Wai Kit ("the third party claimant"   |
|--|
| of(address),   |
| owner of <u>SLR 73290</u> (vehicle no.) hereby authorize   |
| MPH AUTO SERVIUE   |
| ("The workshop") to act for me with respect to my claim for  |
| repair costs and/or rental and/or loss of use ("claim") for my   |
| Vehicle No. SLR 7800 that was damaged pursuant to the  |
| accident which occurred on $18820$ (date) along $2000$   |
| Carpark of 299 Bedox 30uth Ave3 (location)   |
| involving Vehicle No/s SDM 91195   |
| ("The accident").  |
| I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop. |
| I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.                                 |
| Dated this 20 day of 08 (month) 20 20 (year)   |
| Signed by "the third party glaimant" Signed by "the yearkshop"   |



#### AXA THIRD PARTY DIRECT SETTLEMENT

| Vehicle No:             | SDM 9119S (Insd veh) | The state of the s |
|-------------------------|----------------------|--|
|                         | SLR 7329U (TP veh)   | Model: HONDA VEZEL 1.5X CVT  |
| Date of Accident/ Time: | 18/08/2020           |  |

| Kepar Es               | stlmate   | : S                             | 5,309.04  |  |                         |  |                     |
|------------------------|---|---------------------------------|-----------|--|-------------------------|--|---------------------|
| Final Rep              | air Cost W/GST                                    | :\$                             | 3,103.00  |  |                         |  |                     |
| Loss of U              |   | :\$                             |           |  |                         | days at \$   | per day             |
| Rental (if             | any) w/GST  | : \$                            | 428.00    | V V W D. Made of the control of the  |                         | 4 days at \$ 100   | per day             |
| LTA / GIA              | Search Fee  | : 5                             | 2.00      |  |                         | STATE OF THE PROPERTY OF THE P |                     |
| Others:                | ▼ TW No. T Time Se M                              | :\$                             |           |  | -                       | W. A. C.   |                     |
|                        | 1   | :\$                             |           |  |                         | ***************************************  |                     |
| Final Set              | tlement Sum                                       | :\$                             | 3,533.00  | the American State of the State |                         |  |                     |
| Payee Na               | ame : NPH Auto Service                            | 9                               |           |  | eronier pro-            |  |                     |
|                        |   |                                 |           |  |                         |  |                     |
| Is Third P             | arty Workshop GIA Registe                         | red? [                          | ] YES [X] | NO (Kindly in  | dicate below)           |  |                     |
|                        | Party Workshop GIA Registe<br>For Non GIA Registe |                                 |           | NO (Kindly in  |                         | A supply A beauty of the supply of the suppl | William Water grant |
| A)                     |   | red Workshi                     |           | Agreed Liability   | 100(%)                  | Scenario No:   |                     |
| Is Third F<br>A)<br>B) | For Non GIA Register                              | red Workshi<br>Vorkshop:        |           | Agreed Liability   | 100 (%)<br>Yes/ No BOLA |  |                     |
| A)                     | For Non GIA Register                              | red Worksho<br>Vorkshop:<br>(%) | op:       | Agreed Liability   | 100 (%) Yes/ No BOLA    | (%)  |                     |

#### 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.

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: BOI

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

Signature of workshop representative ksho stamp

Name of Representative:

Signature of AXA's surveyor/representative Name of AXA's surveyor /Representative Date: 01/02/2021

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22 Telephone: +65 6880 4888 - axa.com.sg





Block 9005 Tampines Street 93 #01-246/254 Singapore 528839 Tel: 67840663 (8 Lines) Fax: 67840692 GST Reg No: MX-0869103-NO Business Reg No: 394773/00D E-mail: nphauto@pacific.net.sq



Our Ref

#04-13

:TP0028/08/20

TAX INVOICE NO. : 06652

Date of

Accident Date

:18/08/2020

Policy Number

Model

: HONDA VEZEL

Veh Reg No

:SLR7329U

Date

:01/09/2020

### LABOUR CHARGES

SINGAPORE 489298

LAU WAI KIT PATRICK

BLK 298 BEDOK SOUTH AVE 3

DEAR SIR

THIS IS TO CERTIFY THAT WE HEREBY AGREED TO

REPAIR THE ABOVE VEHICLE AT:

LUM SUM

\$2,900.00

Nett Total Before GST

Add GST @ 7%

Nett Total After GST

\$2,900.00

\$203.00

\$3,103.00

(Three Thousand and One Hundred Three Only)

NPH AUTO SERVICE

(MANAGER)



Mr Patrick Lau Wai Kit (S2223221E) c/o NPH Auto Service Block 9005 Tampines Street 93 #01-246 Singapore 528839 **TAX INVOICE** 

NO: 08-30411

DATE: 26/08/2020

REF DESCRIPTION UNIT PRICE AMOUNT

RA NO:
Being rental charges for One Unit
Toyota Wish 1.8 (A) No:
SLX 8163S for period:
19/08/20 to 24/08/20

SUB TOTAL SGD

S\$ 700.00

ADD 7% GST

S\$ 49.00

GRAND TOTAL SGD

S\$ 749.00

WELLCOME MOTOR AGENCIES

E.&O.E.

**Customer Copy** 

All cheque payment should be made within 7 days to WELLCOME

MOTOR AGENCIES

Thank You For Renting

Authorised Signature



# Wellcome motor agencies

68 Kaki Bukit Avenue 6 #02-02 ARK @ KB Singapore 417896 Tel: (65) 6344-4012 Fax: (65) 6345-3140

Email: admin@wellcome.com.sg Website: www.wellcome.com.sg

RA No: 31727

CO. REG. NO: 39853800W GST REG. NO: M9-0001228-R

DATE: 19/8/20

## VEHICLE DENTAL ACDEEMENT

|                              |  | DE KENTA  | LAG                            | NL       | LIVI         | LI        | 1                |                      |                |              |          |
|------------------------------|--|---|--------------------------------|----------|--------------|-----------|------------------|----------------------|----------------|--------------|----------|
| 2010                         | HIRER'S PARTICULARS  |   |                                |          |              | VEHI      | CLE'S            | PARTÍ                | CULARS         |              |          |
| -17                          | CK Lau Wai   | KIT   | VEHIC                          | LE NO    | SLX          | 816       | 23               | REPL.                | VEH. NO:       |              |          |
| Address:                     | Bedok Stl  | I-AVE 3   | MAKE                           | MODE     | I. LO        | 40-       | C                |                      | MODEL          |              |          |
| TO1                          | +-13 (2) 40  | 7298  |                                |          |              | 34        | ,                |                      |                |              |          |
| Name & Address of Er         | nployer:   |   | MILEA                          | GE OU    | π            |           |                  | MII.EA               | GE OUT         |              |          |
|                              |  |   | DATE                           | OUT      | 191          | 80        | O                | DATE                 |                |              |          |
| IC/PP No:                    | DL No: 577   | 223221  | TIME                           | OUT 2    | 2/4          | 5         |                  | TIME                 |                |              |          |
| Date of Birth:               | Date of Issue/Expiry:  | 223 221   | HIRE/P                         | ERIOD    | EXPIR        |           |                  |                      |                |              |          |
| Nationality:                 | PL of Issue:   |   | 1                              |          |              |           | Rental           | Charge               | •              |              |          |
| Occupation:                  | Driving Exp:   |   | Daily                          |          | > @s         | 7         | 2                | per day              |                | 170          | TOX      |
| Tel No:(O)                   | <b>~</b> :   | HP)   | Weekly                         |          | @\$          |           | -                | per week             |                |              | +        |
|                              | DRIVER'S PARTICULARS   | <u> </u>  | Monthly                        | ,        | @\$          |           |                  | per mont             | h              | 1            | $\top$   |
| Name:                        | DIGTER STARTICULARS  |   | Hours                          |          | @\$          |           |                  | per hour             |                |              | $\top$   |
| Address:                     |  |   | Others                         | 1        | <b>@\$</b>   |           |                  |                      |                |              |          |
|                              |  |   | CDW                            |          | @\$          |           |                  | er day/v             | veek/month     |              |          |
| IC/PP No:                    |  |   | PAI                            |          | @\$          |           | I                | er day/w             | reek/month     |              |          |
|                              | DL No;   |   | DELIVE                         | RY SEI   | RVICE        |           |                  |                      |                |              |          |
| Date of Birth:               | Date of Issue/Expiry:  |   |                                | 1        |              |           |                  | St                   | JB-TOTAL S\$   |              |          |
| Nationality:                 | PL of Issue:   | P & II  | PETROL                         | -        | LLEVE        | L         |                  |                      |                |              |          |
| Occupation:                  | Driving Exp:   |   | OUT                            | E        | 1/4          | 1/2       | 3/4              | F                    |                |              |          |
| Tel No:(O)                   | (R) (H   | IP)   | IN                             | E        | 1/4          | 1/2       | 3/4              | F                    |                |              |          |
|                              |  |   | Extension                      |          |              |           |                  |                      |                |              |          |
|                              |  | )~  | Repairs/L                      |          |              |           |                  |                      |                |              |          |
| //B ``                       |  |   | MISC                           | u Servic | <del>-</del> |           |                  |                      |                | -            |          |
| <b>≥</b> 110                 |  |   | Masc                           |          |              |           |                  |                      |                | 1            |          |
| FRONT                        |  | REAR  | 1                              |          | 7            |           | 70               | 00017                | GST @ 7%       | 4            | 4        |
| 110                          |  | JAII*   |                                |          |              |           |                  | UIAL                 | HARGES S\$     | #47          | $\bot$   |
| (/B                          |  |   | SECURI                         |          |              |           |                  |                      |                |              |          |
|                              |  | 1   | ADVAN                          |          |              |           |                  |                      |                |              |          |
| ,                            | $\mathcal{C}$  | <b>'</b>  | BY: CA                         |          |              | HEQUE     | BILL             | CARD                 |                |              |          |
| A-ACCIDEN                    | ITS C-CRACKED D-DENTS S-   | SCRATCHES   | CHEQUE                         |          | D NO:        |           |                  |                      |                |              |          |
|                              | 1  |   | EXPIRY                         |          |              |           |                  |                      |                |              |          |
| ) / W                        |  |   | AMOUN                          | DUE      | REFU         | ND        |                  |                      |                |              |          |
| +                            | <u> </u>   | ⊗   |                                |          |              |           |                  |                      |                |              |          |
| HERER'S<br>SIGNATUBE & STAND | DRIVER'S<br>P SIGNATURE  |   | REFUND                         |          |              |           |                  | BY                   |                |              |          |
|                              |  |   |                                |          |              |           |                  | _ RECE               | IVER           |              | <u> </u> |
| payable under this agree     | ee to the terms and conditions on both<br>ement and for parking and traffic infin<br>ard voucher. All information I/We h | i sides of this agreement<br>ngements may be billed | . If I/We hav                  | e prese  | ented a c    | heque/o   | redit car        | d for pa             | yment, I agree | that all amo | ounts    |
| on the cheque/credit ca      | ard voucher. All information I/We h  | ave given WELLCOME                                  | MOTOR A                        | GENCIE   | S in co      | nnection  | n with t         | his agre             | considered to  | have been n  | nade     |
|                              |  |   |                                |          |              |           |                  |                      |                |              |          |
|                              |  |   |                                |          |              |           |                  |                      |                |              |          |
| The hirer shall be li        | re required to register with us before   | they are allowed to dri                             | ve the vehic                   | le. Ot   | herwise      | he/she    | will not         | be prot              | ected by the i |              | over     |
| ) In case of accident        | the hirer chall report to account  | ediately, if there is bod                           | wn per hou:<br>lily injuries a | or per   | day, in      | clusive   | of CDW           | and/or               | PAI where ap   | plicable.    |          |
| The hirer is respons         | sible for the first con / 1 th   |   |                                |          |              |           |                  |                      |                |              |          |
| excess to the FIRS           | T PARTY DAMAGE (I.E) WELLDON   | excess to the THIRD F<br>ME MOTOR AGENCIES          | S, upon pay                    | ment o   | of CDW       | for each  | ms and<br>and ev | or also<br>ery acc   | the first S\$  |              |          |
| ETURN OF VEHICLE             | The Hirer / Driver is required to sign vehicle is returned to WELLCOME I   | in the column "Signatur                             | e of Hirer / F                 | )river"  | Failing      | which the | day a-           | d time:              |                |              | _        |
| e the day and time the       | vehicle is returned to WELLCOME  | MOTOR AGENCIES and                                  | the same                       | shall be | e accept     | ed as c   | onclusiv         | u ume ir<br>e evider | isened below   | shall deeme  | d to     |

| Date In | Time In | Mileage In | Checked By | Remarks | Λ                           |
|---------|---------|------------|------------|---------|-----------------------------|
| 1.2     | 20      |            |            |         | $ \sim$                     |
| 18/11   | M       | <i>~</i>   |            |         | 1 100                       |
| 24.     | NAN     |            |            |         |                             |
| ,       | U I     |            |            |         | Signature of HIRER / DRIVER |

## 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

## Third Party Insurer Enquiry

Our Ref No:

GR-20-097288

Date of Request:

19/08/2020

Your Ref No:

Online Purchase

NPH Auto Service Blk 9005 Tampines Steet 93 #01-246/254

Singapore 528839

Dear Sir/Madam,

**Enquiry Date** 

19/08/2020

**Enquiry By** 

Mark Ng Yong Xiang

TP Vehicle No.

SDM9119S

Accident Date 18/08/2020

#### **Enquiry Result**

| TP Vehicle No. | Insurer               | David of Land         | was a second sec |
|----------------|-----------------------|-----------------------|--|
| SDM9119S       |                       | Period of Insurance   | Insurer Tel. No.   |
|                | AXA Insurance Pte Ltd | 29/03/2020-28/03/2021 | 6880 4888  |

Thank You.

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.

This is a computer generated document and requires no signature.

### **Hsiao Tong (LKKAuto)**

From: Hsiao Tong (LKKAuto)

**Sent:** Monday, 12 October 2020 4:12 PM To: 'C.YGOH9119@GMAIL.COM'

Subject: ACCIDENT INVOLVING SDM 9119S(AXA) AND SLR 7329U ALONG/AT BLK 299

BEDOK SOUTH AVE 3 CARPARK ON 18/08/2020

12 Oct 2020

Mr Goh Ching Yeang [By Email only]

Dear Sirs/ Mdm

OUR REF : CC4/ASM20008754/Upa3 // S0M02SFT

YOUR REF : SDM9119S

ACCIDENT INVOLVING SDM 9119S(AXA) AND SLR 7329U ALONG/AT BLK 299 BEDOK SOUTH AVE 3 CARPARK ON 18/08/2020

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 NPH AUTO SERVICE acting on behalf of the owner of SLR7329U against your motor insurance policy.

Based on both parties report and all the available information on hand, we are of the view that liability is not in your driver's favour as you reversed and collided onto third party parked vehicle. Therefore, we shall proceed to negotiate for an amicable settlement of the third party claim at best to avoid further litigation, which would escalate to even more cost.

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. You 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 <a href="mailto:chewht@lkkauto.com">chewht@lkkauto.com</a> within 7 days from the date of this letter <a href="mailto:if not provided at our reporting centre">if not provided at our reporting centre</a>. 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 <a href="mailto:cst@axa.com.sg">cst@axa.com.sg</a> 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 <a href="mailto:chewht@lkkauto.com">chewht@lkkauto.com</a>.

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

Best Regards, **Hsiao Tong, Chew (Ms)** | Case Handler **LKK Auto Consultants Pte Ltd** 

Phone: 6742-3197 | Email: <a href="mailto:chewht@lkkauto.com">chewht@lkkauto.com</a> | Fax: 6741 4108 HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)