

TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 68420051

Fax: 67410510

Email: sales@n51.com.sg

01 July 2021

Our Ref : CLM15009 / SMQ9957L / SEPT-06/2020

AXA INSURANCE PTE LTD

8 SHENTON WAY

#24-01 AXA TOWER

SINGAPORE 068811

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

Re: Accident involving SMQ9957L & YP5577P on 04/09/2020 **Along Mandai Estate**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **YP5577P** whose vehicle was insured with you at the material date of the accident.

We are proposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

Cost of repairs	\$	5,029.00	(Include 7% GST)
Loss of rental	\$	600.00	(\$120 X 5 Days)
Additional 2 days loss of use for pre repair	\$	200.00	(\$100 X 2 Days)
Towing fee	\$	100.00	
LTA search fee	\$	7.45	
3rd party GIA report	\$	29.00	
	S \$	<u>5,965.45</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM15009
- 2) Twincar Rental - Invoice No: 13-3112 , Vha No: 72382
- 3) Autobay Towing - SMQ9957L (receipt attached)
- 4) LTA search
- 5) Tax Invoice of 3rd party GIA report
- 6) Letter of Authorisation
- 7) GIA report of SMQ9957L

We look forward to your prompt reply.

Yours faithfully,



Twincar Automotive Pte Ltd

S.Y.NEO

Director

P.I.C - Melody Chin

Reply to :huixin@n51.com.sg

LETTER OF AUTHORISATION

To: **M/s Twincar Automotive Pte Ltd**
Singapore

RE: ACCIDENT INVOLVING VEHICLE NOS: SMQ 99572 & YP 5577P
ALONG Mandai Estate ON 04/09/2020 @ 10:30H

I/We Tan Yong Hap NRIC/Passport No: S XXXX 8402
of 22 St. Michael's Road, #02-15, S(307981)
the owner of vehicle no. SMQ 99572 hereby authorise you to commence repair to the said
vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident' claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we underake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are _____

Policy No. _____

Expiry Date: _____

Date: 09/04/2020

Excess: _____



Owner's Signature/Co's stamp (if applicable)

Witness Signature/Name _____



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	YP 5577P	(Insd veh)	Model: HONDA VEZEL
	SMQ 9957L	(TP veh)	
Date of Accident/ Time:	04/09/2020 / 10:30		

Repair Estimate	: \$	8,323.10	
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	: \$	5,660.00	GLOBAL SUM (ALL IN)
Payee Name : <u>TWINCAR AUTOMOTIVE PTE LTD</u>			
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: <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/TORTEASOR 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:
Date: 10/09/2021



Lup

[Signature]

Signature of Witness / Workshop stamp (if applicable)
Name of Witness:
Date: 10/09/2021

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: 13/09/2021

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.

TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub

2 Kaki Bukit Ave 2

#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27

Singapore 417921

Tel No. : +65 6842 0051 Fax No. : +65 6741 0510

E-Mail : sales@n51.com.sg

Company Reg. No. : 200714616M

GST Registration No. : 200714616M

AXA INSURANCE PTE LTD

8 SHENTON WAY

#27-01/02 AXA TOWER

SINGAPORE 068811

TAN YONG HEE

22 ST. MICHAEL'S ROAD #02-15

SINGAPORE 327981

TAX INVOICE

Date : 25/11/2020

Date in : 07/09/2020

Vehicle Num. : SMQ9957L

Make/Model : HONDA VEZEL 1.5X CVT-2019

Chassis/Eng# : RU11327442/L15B5577481

Accident Date : 04/09/2020

Claim No : CLM15009

Reference : SEPT-06/2020

Policy No. : GA519780/1 (12/12/2020)

LUMPSUM REPAIR BILL

REF : CLM15009-TWINCAR DATED 08/09/2020

BY DIRECT

Amount S\$

4,700.00



E. & O.E. Sub S\$: 4,700.00

Add GST (7%) S\$: 329.00

Total Amount S\$: 5,029.00

for TWINCAR AUTOMOTIVE PTE LTD

TWINCAR RENTAL

Business Registration Number : 53092815M

Blk 2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 68420051 Fax : 67410510 email: sales@n51.com.sg

Invoice To :

TAN YONG HEE
22 ST. MICHAEL'S ROAD
#02-15
SINGAPORE 327981

INVOICE

Invoice No. 13-3112

Date 12/9/2020

		Hirer's Car No.	VHA No.	Terms
		SMQ9957L	72382	CASH
No. of Day	Description	Per Day	Amount (S\$)	
5	Car Rental from the period of 07/09/2020 to 12/09/2020. Vehicle no. SKT6805U Singapore Dollars Six Hundred Only	120.00	600.00	
		Total	\$600.00	

TWINCAR RENTAL



Authorised Signature



TWINCAR RENTAL
Kaki Bukit Autohub @ 2 Kaki Bukit Ave. 2 #01-18
Singapore 417921 Tel: 6744 0510 / 6842 0051

SMD 99157L (1C)

VHA No: **72382**

ROC NO. 53092815M

VEHICLE RENTAL AGREEMENT

<p>HIRER'S PARTICULAR</p> <p>Name: (as in I/C) <u>TAN YONG HEE</u></p> <p>NRIC/PASSPORT No: <u>S 7126842 Z</u></p> <p>Address (Res): <u>22 ST. MICHAEL'S ROAD</u> <u>#02-15 S(327981)</u></p> <p>Name & Address of Employer: _____</p> <p>Occupation: _____ Driving Exp: _____</p> <p>Driving Licence No: <u>S7126842Z</u> D/L Type: Local / International</p> <p>Pass Date: <u>08/07/1999</u> Date of Birth: <u>12/08/1971</u></p> <p>Tel: (O) _____ (R) _____ HP <u>96356046</u></p> <p>ADDITIONAL DRIVER'S PARTICULARS</p> <p>Name: (as in I/C) _____</p> <p>NRIC/PASSPORT No: _____</p> <p>Address (Res): _____</p> <p>Driving Licence No: _____ D/L Type: Local / International</p> <p>Pass Date: _____ Date of Birth: _____</p> <p>Occupation: _____ Driving Exp: _____</p>	<p>Vehicle No: <u>SKT68054</u> Replace Veh No: _____</p> <p>Mileage Out: _____ Mileage Out: _____</p> <p>Make & Model: <u>Toyota A113</u> Auto / Manual Group: _____</p> <p>OUT: Date <u>10/5/20</u> Time: <u>07/09/2020</u></p> <p>HIRE/PERIOD EXPIRY _____</p> <p>NON-WAIVER EXCESS : \$ _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4">CHARGES</th> <th></th> <th></th> </tr> <tr> <td>Daily</td> <td>@ \$</td> <td><u>120</u></td> <td>per day</td> <td><u>5</u></td> <td><u>600</u> <u>00</u></td> </tr> <tr> <td>Weekly</td> <td>@ \$</td> <td></td> <td>per week</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td>@ \$</td> <td></td> <td>per month</td> <td></td> <td></td> </tr> <tr> <td>Hours</td> <td>@ \$</td> <td></td> <td>per hour</td> <td></td> <td></td> </tr> <tr> <td>Others</td> <td>@ \$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>CDW</td> <td>@ \$</td> <td></td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td>PAI</td> <td>@ \$</td> <td></td> <td>per day/month</td> <td></td> <td></td> </tr> <tr> <td colspan="4">Delivery Service</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SUB-TOTAL \$</td> <td></td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="7">PETROL LEVEL</th> </tr> <tr> <td>Out</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> <td></td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> <td></td> </tr> <tr> <td colspan="7">EXTENSION</td> </tr> <tr> <td colspan="7">Collection Service</td> </tr> <tr> <td colspan="7">Misc.</td> </tr> <tr> <td colspan="5" style="text-align: right;">TOTAL CHARGE \$</td> <td><u>600</u></td> <td><u>00</u></td> </tr> </table> <p>Rented out by: _____</p> <p>Hirer's Signature </p> <p>Addition Driver's Signature _____</p>	CHARGES						Daily	@ \$	<u>120</u>	per day	<u>5</u>	<u>600</u> <u>00</u>	Weekly	@ \$		per week			Monthly	@ \$		per month			Hours	@ \$		per hour			Others	@ \$					CDW	@ \$		per day/month			PAI	@ \$		per day/month			Delivery Service						SUB-TOTAL \$						PETROL LEVEL							Out	E	1/4	1/2	3/4	F		In	E	1/4	1/2	3/4	F		EXTENSION							Collection Service							Misc.							TOTAL CHARGE \$					<u>600</u>	<u>00</u>
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VEHICLE CHECKLIST

D - DENTS
S - SCRATCHES

RIGHT

REAR

FRONT

TOP

INDICATE:
A - ACCIDENTS

LEFT

ACCESSORIES CHECK

☐ Ashtray

☐ Cig Lighter

☐ S/Tyre

☐ STD Tools

☐ Jack

☐ Hub Caps

☐ Radio / Cass

☐ CD

☐ Cartidges

I have read and agree to the terms & condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given TWINCAR RENTAL in connection with this Agreement is true.

*** IMPORTANT**

- ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER, AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN, AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TWINCAR RENTAL.

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO TWINCAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
<u>12/09/2020</u>	<u>11:20HRS</u>				

AUTOBAY TOWING

1 Kaki Bukit Avenue 6
#01-55 AutoBay @ Kaki Bukit
Singapore 417883
Tel: 9616 8988 (Ah Boon)

CASH SALE

No. _____

Date: 7/9/20Sold to: SMQ9957L

Item	Quantity	Description	Unit Price	Amount
		Auto Hub to Auto Bay		100
		Reporting Two Trips		
E. & O. E.			Sub Total :	
			GST Tax :	
			Total :	100

Issued by: _____

CROWN

> Back to OneMotoring



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

Print Date/Time : 07 Sep 2020 / 10:51:02

Receipt Date/Time : 07 Sep 2020 / 10:51:02

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200907-000782

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 - YP7755D				
As at 04 Sep 2020/16:30:00				
Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - YP7755D Enquiry Fee 20200907105030464908	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				
411911XXXXXX0379		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.



RECORDS MANAGEMENT CENTRE

**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-20-108998

Date of Request: 11/09/2020

Your Ref No: PURCHASE BY EMAIL

TWINCAR AUTOMOTIVE PTE LTD - KAKI BUKIT
2 KAKI BUKIT AVENUE 2, #01-17 KAKI BUKIT AUTOHUB
SINGAPORE 417921

Dear Sir/Madam,

Your Vehicle No: SMQ9957L

Date of Accident: 04/09/2020

Place of Accident: MANDAI ESTATE

Involving Vehicle No: YP5577P

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-20-108999
Date of Request: 11/09/2020

Your Ref No: PURCHASE BY EMAIL

TWINCAR AUTOMOTIVE PTE LTD - KAKI BUKIT
2 KAKI BUKIT AVENUE 2, #01-17 KAKI BUKIT AUTOHUB
SINGAPORE 417921

Dear Sir/Madam,

Date of Accident: 04/09/2020
Vehicle No: SMQ9957L
Place of Accident: ALONG MANDAI ESTATE
Involving Vehicle No: YP5577P

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\$)
YP5577P	ALONG MANDAI ESTATE	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

Jasper Chua (LKK Auto)

From: Jasper Chua (LKK Auto)
Sent: Monday, 16 November 2020 10:36 AM
To: ACMC@ACMC.COM.SG
Subject: ACCIDENT INVOLVING YP 5577P & SMQ 9957L ALONG OUTSIDE 18 MANDAI ESTATE ON 04/09/2020

16 NOVEMBER 2020

ACM CONTRACTING PTE LTD

Dear Sir/ Madam,

OUR REF : CC4/ASM20009798/bs3
YOUR REF : YP 5577P

ACCIDENT INVOLVING YP 5577P & SMQ 9957L ALONG OUTSIDE 18 MANDAI ESTATE ON 04/09/2020

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 N-51 AUTOMOTIVE PTE LTD acting on behalf of the owner of **SMQ 9957L** against your motor insurance policy.

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 jasperchua@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
- 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 as at 6841 2928 or jasperchua@lkkauto.com . Please quote our 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)

Asher Sng (LKKAUTO)

From: Su Li (LKK Auto)
Sent: Wednesday, 25 August 2021 5:12 PM
To: Asher Sng (LKKAUTO)
Subject: Fw: New message for service request 180653, vehicle number SMQ9957L

Follow Up Flag: Flag for follow up
Flag Status: Flagged

25/8/21 4:28 PM***PLS PROCEED-NG Stacey

**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.*

Thank you.

Best Regards,

Su Li | Admin Support

LKK Auto Consultants Pte Ltd

-----Original Message-----

From: stacey.ng@axa.com.sg <stacey.ng@axa.com.sg>
Sent: Wednesday, 25 August 2021 4:29 PM
To: Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Subject: New message for service request 180653, vehicle number SMQ9957L

AXA Insurance has sent you a message for claim number SOM02TBA.

Please click here <https://vendor.smartclaims.axa.com.sg/ClaimApplication/dist/html/index-vendor.html> to view the message in Vendor Portal.

This message is confidential; its contents do not constitute a commitment by AXA except where provided for in a written agreement between you and AXA. Any unauthorized disclosure, use or dissemination, either whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.



redefining / standards

GIRO CREDIT AUTHORISATION FORM

This form must be completed and returned to AXA Insurance Pte Ltd. Payment Service fees will be credited directly into the Service Provider's designated bank account stated below. The Service Provider has to complete all fields of Section A and the completed form must be returned by post/hand to:

AXA Insurance Pte Ltd
8 Shenton Way #27-01 AXA Tower, Singapore 068811
Attn:

Section A: Service Provider Details (To be completed by the Service Provider of AXA Insurance Pte Ltd)

Name of Service Provider (Company):	TWINCAR AUTOMOTIVE PTE LTD
Contact Person:	MELODY CHIN
Telephone:	6744 0510
Email Address:	huixin@nsl.com.sg
(An auto-prompt email from the bank will be sent to this email address once this form has been processed by AXA Insurance Singapore Pte Ltd and the payment has been credited)	

Particulars of Service Provider Bank Account (Bank code and Branch code can be found at the bottom of cheque)

Name of Bank:	UOB BANK
Bank Code:	7375
Bank Branch Code:	004
Bank Account Number:	3103081430
Name of Account Holder:	TWINCAR AUTOMOTIVE PTE LTD

I/We hereby authorize AXA Insurance Pte Ltd to credit service payments due to me/us to the above bank account, and undertake to return to AXA Insurance Pte Ltd immediately upon demand, any sum which should not have been 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 service payments once such amounts are credited into above bank account.

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



Authorised Signature & Company Stamp (as in bank records)

10/09/2021

Date