



WITHOUT PREJUDICE

Our Ref: SMT 5100C

Your Ref: SH 9940K

12th March 2021

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

Dear Jasper,

Accident Involving: SMT 5100C and SH 9940K

Date of Accident: 18 January 2021

Location of Accident: Near Eng Neo Flyover, PIE towards Changi Airport

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

Cost of Repair as agreed	\$	5,457.00	\$5100 COR + \$357 GST 7%
TOTAL LOR/U DAYS		8 DAYS	2 Days PRS (21/22 Jan) + 5 Repair Days Agreed + 1 Sunday (24 Jan)
Add Loss of Rental	\$	963.00	5 Days - In#223819
Add Loss of Use	\$	360.00	3 Days
Total	\$	6,780.00	
Add LTA Search Fee	\$	7.45	
GRAND TOTAL	\$	6,787.45	

Kindly pay the Grand Total Amount of **\$6,787.45** 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.: SMT 5100 C
and SH 9940 K and
and and
@ PIE TOWARDS CHANGI
dated 18/01/2021.

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: 21/01/2021



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SH 9940K (Insd veh)	Model: Lexus White (1998cc)
	SMT 5100C (TP veh)	
Date of Accident/ Time:	18/01/2021 16:30	

Repair Estimate	: \$	16,072.21	
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	: \$	6,000.00	(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 <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:

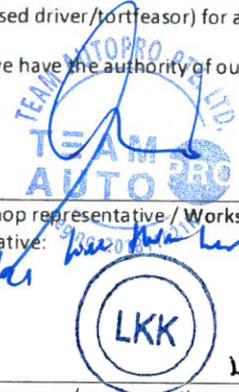
- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY 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: David Seow
 Date: 24/06/2021



Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: David Seow
 Date: 24/06/2021



Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 24/06/2021

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
UEN: 201811621K / GST Number: 201811621K

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:	24-Jun-21
INVOICE NOS:	TAP5100C-21/2153
Your Reference:	SMT 5100C
Date Of Accident:	18-01-21

Billed To: AXA Insurance Singapore Pte Ltd

On Behalf Of: Zee Way Keong
Invoice Type: 3rd Party PD Claim

INVOICE TOTAL IN SGD
\$ 5,457.00

DESCRIPTION	AMOUNT (\$S)
Lump Sum Amount Payable for Supply of Spare Parts & Labour Pertaining to Accident Repair of: <u>SMT 5100C</u>	\$ 5,100.00
	Add 7% GST \$ 357.00
	GRAND TOTAL DUE \$ 5,457.00

- 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
no: 201811621K

PAYMENT DETAILS



友立旅遊服務私人有限公司
UNIQUE TOURIST SERVICE (PTE) LTD

1, Rochor Road, #02-574,
 Rochor Centre Singapore 18000
 Tel: 6292 7656 Fax: (65) 6293 9
 E-mail: uniqtour@singnet.com.sg
 STB LIC TA/00076

Co. Reg. No.: 197401067R
 GST Reg. No.: M2-0019671-6

Mr Zee Way Keong
 Blk 684C Edgedale Plains
 # 15-649
 Singapore 823684

20, Sin Ming Lane,
 #08-51, Midview City
 Singapore 573968
 Tel: 6292 7656

TAX INVOICE

NO. 223819

Singapore, 26.01.2021 20

DATE	PARTICULARS	@	\$	cts
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Rental of one unit Audi Q3 2.0T Auto
 Registration no. SKL 1390 Z self driven
 as from 20.01.2021 to 25.01.2021.

5 days at \$180.00 per day

\$ 900.00

Add GST at 7%
 Amount Due

\$ 900.00

\$ 63.00

\$ 963.00

(SIN DOLLARS: NINE HUNDRED AND SIXTY THREE ONLY)

Standard Rated Supplies:\$ 900.00
 Total Amount of GST:\$ 63.00

AUTHORISED SIGNATURE



UNIQUE TOURIST SERVICE (PTE) LTD.

20, Sin Ming Lane, #08-51, Midview City, Singapore 573968

TEL: 6292 7656 EMAIL: unigtour@singnet.com.sg

COMPANY REG NO: 197401067R

GST REG NO: M2-0019671-6

CAR RENTAL AGREEMENT

RA No. **22757**

VEHICLE NO.

SKL 1390 Z

MAKE/MODEL

BUDI D3

NAME OF HIRER

MR. ZEE WAY KEONG

ADDRESS

BLK 684C EDGEDALE PLAINS
#15-649

SINGAPORE

823684

OFFICE TEL

RES TEL

HP

9823 2022

NAMED DRIVER

MR. ZEE WAY KEONG

OCCUPATION

NATIONALITY

S'POREAN

PASSPORT / NRIC

S 8022148G

DATE OF BIRTH

130780

DRIVING LIC NO.

S 8022148G

PLACE OF ISSUE

S'PORE

DATE PASS/EXPIRY

100699

ADDITIONAL NAMED DRIVER

ADDRESS

SINGAPORE

OFFICE TEL

RES TEL

HP

OCCUPATION

NATIONALITY

PASSPORT / NRIC

DATE OF BIRTH

DRIVING LIC NO

PLACE OF ISSUE

DATE PASS/EXPIRY

BY INITIATING MARK "X" HIRER AGREE TO PAY THE FOLLOWINGS

A. COLLISION DAMAGE WAIVER (CDW) AT \$ _____ PER DAY / WEEK / MONTH "X"

B. SURCHARGE OF \$ _____ FOR USE IN MALAYSIA FROM _____ TO _____ "X"

• THE HIRER IS RESPONSIBLE FOR ANY DAMAGES UP TO THE EXTENT OF TOTAL LOSS OF CAR, LOSS OF INCOME AND COST OF RECOVERY OF VEHICLE IF THE CAR IS DRIVEN INTO MALAYSIA WITHOUT PRIOR CONSENT FROM THE COMPANY.

COMPULSORY EXCESS, DOLLAR

\$ 1200/-

NOTE:

HIRER IS LIABLE FOR ALL PARKING & TRAFFIC VIOLATIONS.

YOUR ATTENTION IS DRAWN TO TERMS & CONDITIONS

PRINTED OVERLEAF.

FOR SINGAPORE DRIVE ONLY

DATE OUT

2001/21

TIME OUT

550PM.

PETROL OUT

E

1/4

1/2

3/4

F

DATE IN

250121

TIME IN

450PM

PETROL IN

E

1/4

1/2

3/4

F

RENTAL RATES:

\$

¢

MONTHLY @ \$

WEEKLY @ \$

DAILY @ \$

C.D.W. FEE

PETROL CONSUMPTION

DELIVERY CHARGE

COLLECTION CHARGE

SUB-TOTAL

GST @ 7%

RENTAL DEPOSIT

TOTAL:

963 00

DEPOSIT REFUND

PAYMENT BY: BILL CO / CREDIT CARD / CASH

ATTENDED BY:

OF UNIQUE TOURIST SERVICE (PTE) LTD

DECLARATION

I HEREBY DECLARE THAT NO MOTOR ACCIDENT HAD OCCURED DURING MY HIRE OF YOUR MOTOR VEHICLE AS STATED IN THE ABOVE MENTIONED SCHEDULE * OR TO ANY SUBSTITUTED VEHICLE AS STATED IN THE MEMORANDUM DATED.

REPLACEMENT VEHICLE NO:

1. _____ ON _____ TIME _____

2. _____ ON _____ TIME _____

3. _____ ON _____ TIME _____

DATE:

SIGNATURE OF HIRER

DATE:

SIGNATURE OF HIRER

> Back to OneMotoring



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

Print Date/Time : 20 Jan 2021 / 18:07:27

Receipt Date/Time : 20 Jan 2021 / 18:07:27

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210120-003276

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 - SH9940K				
As at 18 Jan 2021/16:30:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SH9940K Enquiry Fee 20210120180508106314	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.



Re:RE: Re:RE: Re:RE: Re:<TP - MANDATE IA> -S1M03566
[ACCIDENT INVOLVING SH 9940K(OI) & SMT 5100C(TP) ON
18/01/2021]

Type

 Question

Message

revise \$6,000.00

Reply

RE: Re:RE: Re:RE: Re:<TP - MANDATE IA> -S1M03566
[ACCIDENT INVOLVING SH 9940K(OI) & SMT 5100C(TP) ON
18/01/2021]

Type

 Question

Message

TP rejected our offer. TP propose as below :COR(w/gst): 5,457.00+ LOR \$650.00 + LTA Search Fee \$7.45 , Total = \$6,114.45. Kindly let us have your approval/instruction. Jasper Chua – 23/06/2021

Reply