

CAR PRO AUTO

Blk 6, No. 399J Woodlands Road, Yew Tee Industrial Estate, Singapore 678008
H/P: 93392859 / Fax: 6893 9984

Our Ref : SLB188P

23th JULY 2021

Motor Claims Department
AXA INSURANCE

Dear SIR / MDM

ACCIDENT INVOLVING SLB188P & SKC6639Y ON 01/02/2021

We refer to the above matter.

We confirm settlement at \$3,450.00 for costs of repairs.

We forward herewith our invoice and appreciate your cheque payment for the sum of **\$3,810.00** made in favor of **"CAR PRO AUTO"**.

Breakdown for the sum of \$3,810.00 is as follows:

Costs of repairs		\$3,450.00
LOR 3 days x \$120	\$360.00	
		<u>\$3,810.00</u>

Yours faithfully,

CAR PRO AUTO

LETTER OF AUTHORITY

I, GOH KWEE BOON ID: S1703874E (the third paid' claimant') of owner of SLB 188P (vehicle no. thereby authorize Car Pro Auto ("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 SLB 188P that was damaged pursuant to the accident which occurred on 01/02/2021 (dale) at cheong chin nam road open space carpark(location) involving vehicle no SKC 6639Y.

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/oper/insurers of the other vehicle/s is concerned.

Dated this __23__ day of __JULY__ 2021



Goh Kwee Boon

S1703874E

Signed by 'be third party claimant'
(with chop if applicable)



Wilson Tan

S8827639F

Signed by be worltshop
(with chop)





AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKC 6639Y (Insd veh)	Model: VOLVO XC90 T5 MOMENTUM (A) AWD
	SLB 188P (TP veh)	
Date of Accident/ Time:	01/02/2021 16:30	

Repair Estimate	: \$	21,387.10	
Final Repair Cost	: \$	3,450.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	360.00	3 days at \$ 120 per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum	: \$	3,810.00	
Payee Name : CAR PRO AUTO			
Is Third Party Workshop GIA Registered? [] YES [✓] 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: <u>Winston TAN</u> Date: <u>30/07/2021</u>  	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Sini TAN</u> Date: <u>30-07-2021</u>
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>03/08/2021</u>	

CAR PRO AUTO

BLK 6, 399J YEW TEE INDUSTRIAL ESTATE
WOODLANDS ROAD
S'PORE 678008
HP: 98264959 FAX: 68942883
ROC: 201611525M

INVOICE #

DATE:
INVOICE #

July 23, 2021
R210723

AXA INSURANCE

SLB188P
VOLVO XC90

DESCRIPTION	AMOUNT
Being payment for:	
Lump sum repair cost for damages	3450.00
TOTAL	\$ 3,450.00

Make all checks payable to **CAR PRO AUTO**
DBS A/C 0669030908

THANK YOU FOR YOUR BUSINESS!

CAR PRO AUTO

BLK 6, 399J YEW TEE INDUSTRIAL ESTATE
WOODLANDS ROAD
S'PORE 678008
HP: 93382859 FAX: 68942883
Co Reg No. 53251538B

INVOICE

DATE: March 26, 2021
INVOICE # R210326

GOH KWEE BOON
188 VERDE CRESCENT
S'PORE 688508
SLB188P

DESCRIPTION	AMOUNT
Vehicle No: SKS 9619B Make Model: TOYOTA ALTIS Rental Dates: 24/03/2021 - 26/03/2021 Rental Rate: \$120per day x 3	
TOTAL	\$ 360.00

Make all checks payable to **CAR PRO AUTO**
DBS Current A/C 0669030908

THANK YOU FOR YOUR BUSINESS!

RENTAL AGREEMENT 0281

Hirer's Name Goh Kuee Boon		Date of Birth	Passport/ NRIC No. S1703874E	Nationality Singapore
Address 188 VERDE CRESCENT		Occupation Indoor	Driving Licence No S1703874E	Date of Expiry
	Postal Code 689508	Contact No	Mobile Phone No. 9654 0220	
Joint Hirer's / Guarantor's Name		Date of Birth	Passport/ NRIC No.	Nationality
Address		Occupation	Driving Licence No	Date of Expiry
	Postal Code	Contact No	Mobile Phone No.	

CHECK OUT

Date 24/03/2021	Time 10.00 AM	Mileage KM	E 1/4 1/2 3/4 F
Date 26/03/2021	Time 14.00 pm	Mileage KM	Remarks

CHECK IN

IMPORTANT NOTES:-

- Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance.
- No refund will be given for vehicle that returns early.
- Own Damage Liability – First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- Third Party Liability – First \$2000 for any Third Party Accident Claim.
- Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience.
- Hirer is responsible for all parking fines & traffic summons.
- Extension:- One day's advance notice is required otherwise no extension will be allowed.
- Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- Vehicle returned after office hour will be charged to the next working day.
- Hourly extension is charged at 1/5 of the daily rate.
- As preventive maintenance, please check water & engine oil daily.
- Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle.
- Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed.

	UNIT		RATE (\$)	TOTAL (\$)
RATE	03	@	\$120.00	\$360.00
DISCOUNT				
GST @ 7%				
TOTAL				
EXTENSION				
DEPOSIT (refundable) S\$				
CHANGED OVER FROM VEH.			DATE	

I/We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.

I/We declare that all information given on this form is true and accurate.


Hirer's Signature

Joint Hirer's/ Guarantor's Signature


for CAR PRO AUTO

VEHICLE NO. SKS 9619B

MODEL TOYOTA ALTIS



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

20 APRIL 2021

Abdul Rahman Bin Bujang
Blk 305 Bukit Batok St 31
#11-87
SINGAPORE (650305)

Dear Sir/ Madam,

OUR REF : CC4/ASM21001669/Qba3
YOUR REF : SKC 6639Y
ACCIDENT INVOLVING SKC 6639Y AND SLB 188P ALONG Cheong Chin Nam Road
side Parking Lot ON 01/02/2021

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 CAR PRO AUTO acting on behalf of the owner of SLB 188P 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.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

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.

Jasper Chua
DID: 6841 2928
FAX: 6741 4108
Email: jasperchua@lkkauto.com

c.c. *AIG Asia Pacific Insurance Pte Ltd*
(Motor Claims Dept)



RE: Please be informed that vehicle not in the workshop,
repairer will arrange.

Type

 Question

Message


Liability: 100%. Insured driver hit parked third party. Inform OI about third party claim. Agreed to settle at best and aware NCD issue. We seek your mandate at \$4,051.50(ALL IN). TP-Mandate IA had been uploaded in Smartclaims. Kindly let us have your approval/instruction. Jasper Chua – 23/07/2021

Reply



DS -MANDATE

Type

 Question

Message

Please proceed as per mandate \$4051.50

Reply



PAYNOW AUTHORISATION FORM

This form must be completed and returned to AXA Insurance Pte Ltd. Payment will be credited directly into the policyholder/claimant's designated bank account stated below. The Policyholder/claimant has to complete **all fields** of this form and return to:

AXA Insurance Pte Ltd
8 Shenton Way, #24-01 AXA Tower
Singapore 068811

Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)	
Name of Policyholder/Claimant :	Goh Kwee Boon
Contact Person :	Goh Kwee Boon
Contact Number :	9654 0220
Email Address :	Winson_tingwei@hotmail.com
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	

Payee's Paynow Details (Please tick <u>only 1 option</u> & provide the Paynow Details)	
Payee's name as per bank account :	Winson TAN TING WEI
<input checked="" type="checkbox"/> Mobile :	9750 6777
<input type="checkbox"/> NRIC :	
<input type="checkbox"/> UEN :	

I/We hereby authorise AXA Insurance Pte Ltd to credit the payment due to me/us to the bank account linked to above Paynow account, and undertake to return to AXA Insurance Pte Ltd immediately upon demand any sum which shall not be so credited into such Paynow account. I/We agree that AXA Insurance Pte Ltd shall be fully absolved of any liability to pay me/us such insurance payout once such amounts are credited into the bank account linked to above Paynow account.

This authorisation shall continue in force until I/we have expressly revoked it by notice in writing delivered to you. In the event of a change of PayNow details, I/we shall inform you in writing 30 days in advance before the change.

In connection with my/our and/or the claimant's claims, I/We give consent for AXA Insurance Pte Ltd ("AXA") and their respective representatives or agents to collect, use, store, transfer and/or disclose the information (including that provided by sources other than myself) concerning me/us and/or the claimant, to or with all such persons (including any member of the AXA Group or any third party service provider, and whether within or outside of Singapore and the Policyholder when claiming under a Group Policy) for the purpose of enabling AXA and their respective representatives or agents to provide me/us and/or the claimant (where applicable) with services required of an insurance provider, including the evaluating, processing, administering and/or managing my/our and/or the claimant's claims or the Policyholder Group Policy(ies) with AXA (as the case may be), and for the purposes set out in AXA's Data Use Statement which can be found at <http://www.axa.com.sg> ("Purposes").


Authorised Signature & Company Stamp (as per bank records)



30-7-2021
Date (DD/MM/YYYY)