



1st Auto Pro Pte Ltd

We Believe In Service

8 Kaki Bukit Avenue 4 Premier @ Kaki Bukit Office @ #01-49 | WS @ #01-51/52

Tel: 9188 3197 | Email: christina@1ap.com.sg

UEN No: 201702200K

20th May 2021

Our reference: 1AP-202102-05

Your reference: SHD4749G

AXA Insurance Private Limited

8 Shenton way #24-01

AXA Tower

Singapore 068811

Attn: Motor Claims Department

BY MAIL

Dear Sir/ Madam,

Claimant : G.LAI SERVICES

Address : C/O 26 MAS KUNNING TERRACE SINGAPORE 126870

We are instructed by the above named to claim damages against your company/company's worker in connection with an accident between **03 FEB 2021** along **PIE (THOMSON ROAD EXIT)** involving our client's vehicle registration number **SGS1582Y** and vehicle registrations number **SHD4749G** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$2, 650.00
Loss of Rental	:	\$900.00
LTA Search Fee	:	\$7.45
Total	:	<u>\$3, 557.45</u>

A copy of each of the following supporting documents are enclosed:-

- | | |
|-----------------------------------------------|-----------------------------|
| a) Our client's Accident Report/Police Report | b) COE/PARF Certificates |
| c) Owner / Driver's IC & Driving License | d) Certificate Of Insurance |
| e) LTA Search Result & Receipt | f) Satisfaction |
| g) Letter Of Authorisation | h) Invoice |
| i) Rental Agreement | |

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,

1ST AUTO PRO PTE LTD
201702200K
8 KAKI BUKIT AVE 4
#01-49 SPORE(415875)

Christina Tan

1st Auto Pro Pte Ltd

LETTER OF AUTHORISATION

AXA INSURANCE PTE LTD

Attention to Motor Claims Department

Dear Sirs,

Accident involving SGS1582Y / SHD4749G
on 03/02/2021 @ PIE (THOMSON ROAD EXIT)

☐ I/We am/are the registered owner/driver of vehicle number SGS1582Y which was involved in the above mentioned accident together with vehicle number SHD4749G which was insured by you.

I/We have/has irrevocably appoint and authorize **1st Auto Pro Pte Ltd** to demand claim (settle/receive) on behalf of us from the 3rd party/parties involved in the accident above.

As such, we hereby agree that any payment due to me/us from the aforesaid claim is to be paid to **1st Auto Pro Pte Ltd** directly. All payment cheques should be issued in favour of **1st Auto Pro Pte Ltd** and any inter-bank transfer payment shall be credited directly to their account number; **OCBC Current 712-058379-001**.

I/We hereby indemnify **1st Auto Pro Pte Ltd** against all claims and/or damages which may arise from all action taken for and/or my/our behalf.

☐ I/We affirmed that the above mentioned statement are true and correct. This document was signed by me/us in a clear state of mind.

Dated this 04 day of FEB (month) 20 21 (year)

Vehicle's owner name: G.LAI SERVICES

Vehicle's owner NRIC: 5XXXX160L

G.LAI SERVICES
53353160L

Signature of vehicle's owner (claimant)
(Company chop if applicable)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 4749G (Insd veh)	Model: HONDA CIVIC
	SGS 1582Y (TP veh)	
Date of Accident/ Time:	03/02/2021 10:30	

Repair Estimate	: \$	9,781.20	
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	: \$	3,100.00	(global sum)
Payee Name : 1ST AUTO PRO 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: 27	
	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]
 201702200K
 8 KAKI BUKIT AVE 4
 #01-49 SPORE(415875)
 Signature of workshop representative / Workshop stamp
 Name of Representative: CHRISTINA TAN LI LING
 Date: 03 AUG 2021

[Signature]
 201702200K
 8 KAKI BUKIT AVE 4
 #01-49 SPORE(415875)
 Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: GAVIN LI
 Date: 03 AUG 2021

Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 03/08/2021

my execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims arising from the same accident.

THANK YOU FOR YOUR BUSINESS!



Service Requests

Messages

Claims



Re:RE: Re:<MANDATE IA> ACCIDENT INVOLVING SHD 4749G & SGS 1582Y ON 03/02/2021

Type

Question

Message

REVISED \$3,100.00 AND MAINTAIN

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 :	1ST AUTO PRO PTE LTD
Contact Person :	CHRISTINA TAN LI LING
Contact Number :	9188 3197
Email Address :	CHRISTINA@1AP.COM.SG
(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 :	
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	201702200K

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").

1ST AUTO PRO PTE LTD
201702200K
8 KAKI BUKIT AVE 4
#01-49 SPDRF(415875)

Authorised Signature & Company Stamp (as per bank records)

03 AUG 2021

Date (DD/MM/YYYY)