

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

DATE: 13 October 2021

AXA Insurance S'pore Pte Ltd
8 Shenton Way
#27-01 AXA Towers
SINGAPORE 068811

LETTER OF DEMAND

Your Insured: SHC 1717Z
Date of Accident: 22-Feb-21

Location: Blk 286A Car Park Compassvale Crescent

FINAL REPAIR COSTS

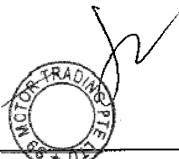
VEHICLE NO. FBN 1073K (Honda CBF 190X)

Cost of Repair for Vehicle No.:	FBN 1073K (lump sum)	\$2,100.00
Loss of Use:	4 days x \$25	\$100.00
Towing Fee:		\$50.00
Total:		\$2,250.00

SINGAPORE DOLLARS: TWO THOUSAND TWO HUNDRED FIFTY ONLY

Notes:

1. All cheque payment should be "Crossed" and made payable to SG 98 MOTOR PTE LTD
2. All cheque should have our "Invoice No" written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



SG 98 MOTOR PTE LTD

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AUTHORIZATION TO ACT

I, Vinayagam S/o Latchminan ("the third party claimant")
of Bik 257 Serangan Central Drive #11-26 Ipoh 550257 (address),
owner of FBN 1073K (vehicle no.) hereby authorize
SG 98 Motor Pte Ltd.

("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. FBN 1073K that was
damaged pursuant to the accident which occurred on 22/3/2021 (date) along
Compassvale Cres Ipoh (location)
involving vehicle no/s SAC 1717Z
("the accident").

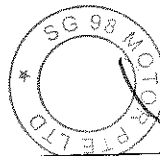
I further authorize the workshop to settle my above mentioned claim in a manner that
they deem fit and the workshop is further authorized to receive payment further to
settlement of my claim with payment cheque/s being made in favour of the workshop.

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 2nd day of March (month) 2021 (year)



Signed by "the third party Claimant"



Signed by "the workshop"



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHC 1717Z (Insd veh)	Model: HONDA CBF 190X
	FBN 1073K (TP veh)	
Date of Accident/ Time:	22/02/2021	

Repair Estimate	: \$	3,738.10	
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	: \$	1,800.00	GLOBAL SUM
Payee Name : SG 98 MOTOR PTE LTD			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A) For Non GIA Registered Workshop:		Agreed Liability 80 (%)	
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:			


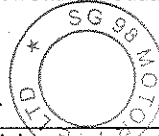




NOTE:

- 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>Rose Yan</u> Date: <u>12/11/2021</u>	  Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Ben Goh</u> Date: <u>12/11/2021</u>
  Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>12/11/2021</u>	Provided 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.

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4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

DATE: 13 October 2021

Invoice No: SG98-21-076

AXA Insurance S'pore Pte Ltd
8 Shenton Way
#27-01 AXA Towers
SINGAPORE 068811

PD - Direct Settlement

Your Insured: SHC 1717Z
Date of Accident: 22-Feb-21

Location: Blk 286A Car Park Compassvale Crescent

FINAL REPAIR COSTS

VEHICLE NO. FBN 1073K (Honda CBF 190X)

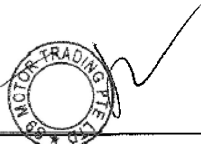
Cost of Repair for Vehicle No.: FBN 1073K (lump sum) \$2,100.00

Total: \$2,100.00

SINGAPORE DOLLARS: TWO THOUSAND ONE HUNDRED ONLY

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Business Reg No. : 53413703B
Hp : 91352000

OFFICIAL RECEIPT

No. : 00267

Date : 02/03/21

Claim Note

photocopy
3/3


Received From : SG MOTOR

Vehicle No. : FBN1073K

From : TAKE PIC / TP COMPOUND

Contact No. : _____

Amount : \$50


Issued by

Note : Vehicle is transported at owner's risk. The company hold no responsibility for damages or other misdemeanor to your vehicle while being transported



Re:<MANDATE IA>

Type

 Question

Message

Please proceed \$1,810.00

Reply