

# CN MOTORS PTE LTD

Our Ref : CNPL2105-0055 / SLP7702K  
Your Ref : S1M035WW / SH8761S  
Date : 20<sup>th</sup> May 2021

1 Kaki Bukit Avenue 6  
Blk C #01-41 Autobay@KB  
Singapore 417883

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

WITHOUT PREJUDICE

Dear Sirs,

**RE: ACCIDENT INVOLVING SLP7702K & SH8761S AT JURONG PORT ROAD TOWARDS CORPORATION ROAD ON 19.03.2021 @ 17:55HRS**

We are instructed by **CHIA GEK LIANG** to claim damages and losses against you in connection with the above captioned road traffic accident which our client's vehicle **SLP7702K** was damaged by vehicle **SH8761S** driven by your insured at the material time.

We are instructed that the said accident was caused by your insured's 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 expenses, particulars of which are as follows:

1) Repair Costs (Inc 7% GST)	\$ 71,262.00
2) Loss of Use for 27 days (21 + 2 PRI + 3 Weekends + 1PH)	\$ 6,750.00
3) LTA Search Fees	\$ 7.45
	<u>\$ 78,019.45</u>

A copy each of the following supporting document is enclosed:

- 1) Final Repair Bill
- 2) LTA Receipt
- 3) Warrant to Act
- 4) PIR

Please let us have your cheque for the sum **\$ 78,019.45** made payable to us, **CN MOTORS PTE LTD** in the next 14 days.

Yours faithfully,



CN MOTORS PTE LTD



# LETTER OF AUTHORISATION

**CN Motors Pte Ltd**

1 Kaki Bukit Avenue 6  
Blk C #01-41 Autobay  
Singapore 417883

Dear Sir,

Accident on

19.03.2021 @ 1755 HRS

Involving Vehicles

SLP7702K & SH8761S

Along

Jurong Port Road Towards Corporation Road

I/We, the registered owner/driver of vehicle registration no: SLP7702K  
have involved in the above accident.

I/We hereby authorize **CN Motors Pte Ltd** to commence repairs of the said vehicle forthwith.

I/We agree to assign the whole proceeds of my/our comprehensive/third party claim to you and our solicitor, \_\_\_\_\_, to act on my/our behalf in respect of the above matter. And if applicable, my/our solicitors shall accept this as my/our irrevocable authority to pay the amount as deemed compensated direct to you after deduction of their costs on a Solicitor and client basis.

I/We undertake to co-operate fully with you and our solicitors to ensure that claim is successful.

I/We also authorize you to sign all discharge vouchers/indemnity forms and all necessary papers in relation with the above claim in my/our absence.

Your kind co-operation in this matter will be much appreciated.

Yours truly,



Owner's Signature

(Company's stamp if applicable)

Name:

Chia Gek Liang

NRIC No.:

S6920842H

Date:

19.3.2021



**WITHOUT PREJUDICE to:**  
 (a) Insurance Subrogated Claim and/or  
 (b) Any Personal Injury Claims  
 [Note: This Notice supersedes any inconsistencies found in this Discharge Voucher]

**AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	SH 8761S (Insd veh)	Model: AUDI A8
	SLP 7702K (TP veh)	
Date of Accident/ Time:	19/03/2021 17:55	

Repair Estimate	: \$	<b>153,795.54</b>	
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	: \$	70,000.00	(global sum)

Payee Name : CN MOTORS 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: <del>Yes</del> 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.



*[Handwritten signature]*

Signature of workshop representative / Workshop stamp  
 Name of Representative: *Sukyi Chong*  
 Date: *27.7.21*

*[Handwritten signature]*

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: *Yunli Khoo*  
 Date: *27.7.21*



Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative:  
 Date: 27/07/2021

# CN MOTORS PTE. LTD.

1 Kaki Bukit Ave 6, Blk C #01-41 Autobay@Kaki Bukit, Singapore 417883

Email: admin@cnmotorspl.com

Tel: 6509 5545 Fax: 6509 5567

UEN: 202026492W GST Reg No: 202026492W

## TAX INVOICE

**AXA Insurance Pte Ltd**

8 Shenton Way,

#B1-01,

Singapore 068811

Client: CHIA GEK LIANG

Invoice No : CNPL2105-0055

Date : 20/05/201

Date of Accident : 19-Mar-21

Vehicle No. : SLP7702K

Model Type : AUDI A8L

Descriptions	Amount
Lump Sum Repair Cost	66,600.00
GST 7% :	4,662.00
<b>Total</b> :	<b>71,262.00</b>

SIN DOLLARS: SEVENTY ONE THOUSAND TWO HUNDRED AND SIXTY TWO ONLY



&gt; Back to OneMotoring



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

Print Date/Time : 20 Mar 2021 / 12:12:12

Receipt Date/Time : 20 Mar 2021 / 12:12:12

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-210320-000983

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 - SH8761S As at 19 Mar 2021/17:55:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SH8761S Enquiry Fee 20210320121103732266	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
Paid By				
	418238XXXXXX4044		eNETS Credit Card	7.45
<b>Total</b>				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: <MANDATE IA> ACCIDENT INVOLVING SH 8761S & SLP 7702K ON 19/03/2021

Type

 Question

Message

PLS ATTEMPT FOR SETTLEMENT AS FOLLOWS: COR \$67,410 W/GST LOU \$2,520.00 21DAYS LTA \$7.45 TOTAL \$69,937.45~ \$70,000.00 ALL IN

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**

<b>Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)</b>	
Name of Policyholder/Claimant :	CN Motors Pte Ltd
Contact Person :	Sukyi Chong
Contact Number :	6509-5545
Email Address :	admin@cnmotorspl.com
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	

<b>Payee's Paynow Details (Please tick <u>only 1 option</u> &amp; provide the Paynow Details)</b>	
Payee's name as per bank account :	CN Motors Pte Ltd
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	202026492W

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)

17/11/2020  
\_\_\_\_\_  
Date (DD/MM/YYYY)



redefining / insurance



### GIRO CREDIT 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:	CN Motors Pte Ltd
Contact Person:	Sukhi Chong
Contact Number:	6509-5545
Email Address:	admin@cnmotorspl.com
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	
Particulars of Policyholder/Claimant's Bank Account	
Name of Bank:	UOB
Bank Code:	7395
Bank Branch Code:	015
Bank Account Number:	355-327-005-5
Name of Account Holder:	CN Motors Pte Ltd

I/We hereby authorise AXA Insurance Pte Ltd to credit the payment due to me/us to the above bank account, and undertake to return to AXA Insurance Pte Ltd immediately upon demand any sum which shall not be so 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 insurance payout once such amounts are credited into the above bank 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 bank account, 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 in bank records)

17.11.2020

\_\_\_\_\_  
Date