



COMPLETE VMS PTE LTD  
176 Sin Ming Drive, #03-14 / 07, Sin Ming Autocare, Singapore 575721  
(Tel) 6455 0012 (Fax) 6554 0012 (Web) www.cometevms.com.sg

The Premier One Stop Vehicle Accident Claims Centre

Your Ref : SHD4362M  
Our Ref : SMT3622B

21 July 2021

By Postage

AXA INSURANCE PTE LTD

8 Shenton Way

#24-01 AXA Tower

Singapore 068811

**Attention: Motor Claim Department**

Dear Sir / Mdm,

**Accident Involving SMT3622B and SHD4362M on 23/4/2021 along Race Cross Road Towards Balestier Road at about 11:40hrs.**

We are the authorized repair workshop for the owner of motor vehicle no. SMT3622B which is involved in the captioned accident with your insured vehicle SHD4362M. The vehicle owner has requested and authorized us to assist him in presenting his / her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of driving, we are submitting these claims for your consideration on behalf of the owner / claimant.

Cost of Repair as agreed with surveyor	S\$1,872.50
2 days of Loss of Rental @ S\$150.00	S\$300.00
LTA Search fee	S\$7.45
Total	S\$2,179.95

We enclosed herewith the following documents to support the claims:-

Performa Invoice

Rental Agreement

LTA Search fee

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

**Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner / claimant.**

Yours Faithfully,

*Lihui*

Complete VMS Pte Ltd

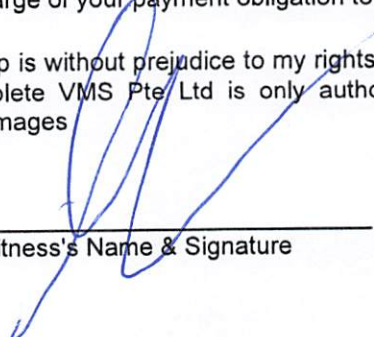
To: Complete VMS Pte Ltd  
176, Sin Ming Drive,  
#03-14, Sin Ming Autocare Complex  
Singapore 575721

**LETTER OF AUTHORIZATION**

RE: ACCIDENT BETWEEN SMT 3622B / SHD 4362 M (Vehicle Numbers)  
ON 23/04/21 (Date of Accident) AT along Race Course Road towards  
Balestier Road

1. I/We, the owner of vehicle no. SMT 3622B hereby appoint you to act for me to repair and recover damages sustained to my vehicle in the above accident from the third party driver and / or his / her insurers.
2. In this respect, I/We have authorized you to repair, correspond, negotiate and settle on my behalf, all claims against the parties involved in the subject accident. All final financial awards in my favor pertaining to the subject accident claim are to be paid to Complete VMS Pte Ltd.
3. By way of this Letter of Authorization, I/We also further authorized you to sign all Discharge Vouchers and any other related documents in settlement of the subject accident claims. I/We hereby undertake to ratify and reaffirm such signing of Discharge Vouchers and/or documents from any third party insurers by us.
4. During the settlement process with the third party insurers / drivers, you may act fully on my behalf and all negotiations and correspondences given by you to the third party insurers / driver are as if given directly from me. With regards to the settlement of the above subject accident claim, I/We agree and undertake to ratify all correspondences and negotiations given by you to the third party insurers / driver and further agree and undertake to be bound by all acts performed or carded out by you.
5. I/We understand that should the subject accident claims fail or not able to reach an amicably settlement with the third party insurers or driver, I/We will have to appointed a solicitors by way of signing a warrant to act in present of the appointed solicitor to further pursue the matter and to commence legal proceedings in Court in my/our name against the third party driver and/or his employers (if applicable). I/We further agrees that should I/We fails or disagrees to appoint a solicitors at that stage, I/We shall be fully liable for all costs incurred to you until that point of time.
6. I/We further confirm my/our understanding that I/We shall render my/our full co-operation pertaining to the settlement of the subject accident and method of repair adopted shall be in accordance to the standard practices of the industry and will be at the full discretion of you.
7. I/We hereby agree that upon settlement of the above subject accident claim, I/We are required to sign Discharge Voucher/s issued by the third party insurers. After which all settlement monies shall be used to settle all costs and fee incurred to carry out the above subject accident repairs and claims. This settlement monies shall constitute a full discharge of your payment obligation to us.
8. Any indemnity / discharge voucher signed by the workshop is without prejudice to my rights to claim for compensation for my personal injury (if any). Complete VMS Pte Ltd is only authorized to negotiate and finalized with Third Party for my property damages

Signature : 

Witness's Name & Signature : 

Name : Lek Kheng Hua

Date : 28/04/21

Company Stamp (if applicable) : \_\_\_\_\_

Email : Adrianlek26@gmail.com





### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 4362M (Insd veh)	Model: TOYOTA COROLLA ALTIS
	SMT 3622B (TP veh)	
Date of Accident/ Time:	23/04/2021	

Repair Estimate	: \$	4,972.83	
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	: \$	1,740.00	(global sum)
Payee Name : COMPLETE VMS 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: <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/TORTEASOR 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: Gan Li Hui  
 Date: 9/10/21

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: Daniel Chin  
 Date: 9/10/2021

Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative:  
 Date: 12/10/2021

This indemnity is signed without prejudice  
 to my rights to claim for compensation  
 for my personal injury.

# TAX INVOICE

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

**Invoice Date**  
08 Oct 2021

**Account Number**

**Invoice Number**  
INV-VM017034

**Reference**  
SMT3622B / DOA:23/4/2021

**GST**  
200416180E



Complete VMS Pte Ltd  
176 Sin Ming Drive, #03-14,  
Sin Ming Autocare  
SINGAPORE SINGAPORE  
575721  
SINGAPORE

Description	Quantity	Unit Price	Discount	Amount SGD
Cost of Repair As Agreed At	1.00	1,469.67		1,469.67
Loss of Rental (Disbursement)	1.00	160.00		160.00
LTA Search Fee (Disbursement)	1.00	7.45		7.45
Subtotal				1,637.12
Total Local supply of goods and services 7%				102.88
Total No Tax 0%				0.00
Invoice Total SGD				1,740.00
Total Net Payments SGD				0.00
Amount Due SGD				1,740.00

**Due Date: 22 Oct 2021**

PayNow / SGQR







35 Eden Grove, Singapore 539085

Co.Reg. No.: 200717924R

SMT 3622B -

## VEHICLE RENTAL AGREEMENT

STA No: 002751

**HIRER'S PARTICULAR**

Name : (as in I/C) Lek Kheng Hua

NRIC / Passport No: 36836541D

Tel & Address: BIK 122 #09-18 Lorong 2

Toa Payoh. S' (2/10/22)

HP: 88753917

### ADDITIONAL DRIVER'S PARTICULARS

Name : (as in I/C)

NRIC / Passport No:

Tel &amp; Address:

## REMARKS

Veh. No: SLX 8373C, Replace Veh. No:

Mileage Out: Mileage Out:

Out : Date 28/04/21 Out : Date

Out: Time 4:55pm Out: Time

RENTAL CHARGES		
Daily	1 @ \$ 156.00	\$ 300.00
Monthly	@ \$	
Delivery Charges	@ \$	POC
Others	@ \$	
SUB TOTAL \$		300.00

PETROL: Empty , 1/8 , 1/4 , 3/8 , 1/2 , 5/8 , 3/4 , 7/8 , Full

## INSURANCE EXCESS PAYABLE ON CLAIM

Hirer is responsible for the first \$ \$ 2 0 0 0 - excess

for Collision / Damages to 1st party (i.e.) COMPLETE LEASING P/L

vehicle (inc. windscreen) and also first \$ \$ 2 0 0 0 - excess

for Collision / Damages to 3rd party's vehicle for each and every

accident / damages.

Hirer's Signature:

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.

## IMPORTANT

1. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. VEHICLE IS STRICTLY FOR USE IN SINGAPORE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT FROM THE COMPANY COMPLETE LEASING PTE LTD
3. IN THE EVENT OF AN ACCIDENT, THE HIRER OF AUTHORIZED DRIVER;
- (i) shall report all accidents involving the said vehicle to the owner immediately,
- (ii) shall NOT admit liability or sign any settlement documents with any 3rd parties
4. THIS AGREEMENT IS SUBJECT TO THE CONDITIONS PRINTED ON THE REVERSE SIDE
- EXCESS:  
ADDITIONAL \$2500  
FOR 23 TO 27 &

EXCESS:  
ADDITIONAL \$2500  
FOR 23 TO 27 &  
ABOVE 65 YEARS OLD

DATE IN	TIME IN	CHECKED BY	 SIGNATURE OF HIRER / DRIVER
30/04/21	5:50pm		

> Back to OneMotoring



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

Print Date/Time : 27 Apr 2021 / 09:49:01

Receipt Date/Time : 27 Apr 2021 / 09:49:01

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-210427-000584

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SHD4362M As at 23 Apr 2021/00:00:01 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHD4362M Enquiry Fee 20210427094832571533	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				
3sbvaajp--9J861522B9541990J			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:<MADATE IA>

Type

Question

Message

Please proceed

Reply