

JWG INTERNATIONAL PTE. LTD.

Co. & GST Reg. No.: 201837488H

Blk 10, Ang Mo Kio Ind Park 2A, #03-08 AMK AutoPoint, Singapore 568047

Tel: 6909 8882 | Fax: 6909 9592

E-Mail: jwg.claims@yahoo.com

Our Ref : **SMY3708L**

Your Ref : **SHD7190Y**

Date : **4/3/2022**

BY MAIL WITHOUT PREJUDICE

AXA INSURANCE PTE LTD

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claims Department

Dear Sir/Madam,

ACCIDENT INVOLVING : SMY3708L & SHD7190Y

DATE OF ACCIDENT : 18/5/2021

LOCATION : SENGKANG COMMUNITY HUB

We refer to the above-mentioned accident.

We are claiming as follows :

Cost of Repairs	:	\$	428.00
Loss of Rental	:	\$	600.00
Search Fees	:	\$	29.00
Towing	:	\$	-

Grand Total : **\$ 1,057.00**

The above-mentioned settlement is in respect for our client of damage pertaining to his motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his personal injuries.

For any further inquiries, please kindly contact Mr. Ong Jun Wu @ 6909 8882, or email to jwg.claims@yahoo.com

Yours faithfully,

JWG International Pte Ltd

NOTE: # Please note that the Loss of Use will be paid based on negotiation and on the NIMA Protocol (Court Guideline).

*This is a computer-generated letter and does not need a signature.

LETTER OF AUTHORISATION

Accident on 18/05/2021 @ 1010 hrs along Sengkang Community Hub
involving vehicles nos. SMY3708L & SHD7190Y

In consideration of JWG International Pte Ltd, Blk 10, Ang Mo Kio Industrial Park 2A, #03-08 AMK Autopoint, Singapore 568047, repairing my/our motor vehicle no. SMY3708L at my/our request, I/We, Singapura Leasing Private Limited ("the claimant") of Blk 985A, Buangkok Crescent #07-10, Singapore 531985 (address) bearing NRIC no. 201528975D the owner of motor vehicle no. SMY3708L hereby authorise them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc, to any of their appointed advocates to act of me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorised them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by JWG International Pte Ltd I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith. In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instruction to clear the said cheque on my/our behalf by presenting the same for payment directly into JWG International Pte Ltd account. Upon clearance of the said cheque, I/we further authorise JWG International Pte Ltd and/or their appointed law firm to utilise the monies to pay their charges without further reference to me. I confirm that the payment to JWG International Pte Ltd shall amount to a good discharge of JWG International Pte Ltd and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 18 day of 05 (month) 2021 (year).



"The Claimant's" Signature



JWG International Pte Ltd

Name: Singapura Leasing Private Limited

NRIC No.: 201528975D

Name: Xin Yu



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 7190Y (Insd veh)	Model: Toyota Yaris Cross (1490cc)
	SMY 3708L (TP veh)	
Date of Accident/ Time:	18/05/2021	

Repair Estimate	: \$	12,590.16	
Final Repair Cost	: \$	428.00	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	300.00	3 days at \$ 100 per day
LTA / GIA Search Fee	: \$		
Others:	: \$	29.00	
	: \$		
Final Settlement Sum	: \$	757.00	

Payee Name : JWG International 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: ____
	BOLA Liability: ____ (%)	Assessed Liability (*): ____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.		
Remarks:		

NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. 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.
3. 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: LOH XIN YU

Date: 29/03/2022



Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: 30/03/2022

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Cynthia Lim

Date: 29/3/2022

"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

JWG INTERNATIONAL PTE. LTD.

Co. & GST Reg. No.: 201837488H

10, Ang Mo Kio Ind. Park 2A, #03-08 AMK AutoPoint, Singapore (568047)

Tel: 6909 8882 | Fax: 6909 9592

E-Mail: jwg.claims@yahoo.com

Bill To : AXA INSURANCE PTE LTD

Motor Claims Department

DATE : 28-02-2022

TAX INVOICE : 1466

VEHICLE NO: SMY3708L

Attention: Officer-In-Charge

Item	Description	Amount (SGD)
1	Accident Claim Involving Vehicle No. SMY3708L [Our Client] & Vehicle No. SHD7190Y [Your Insured] On 18-05-2021. Total Repair Costs Recommended By Your Appointed Surveyor. Thank You.	\$400.00

Details Of Payment:

Cheque should be crossed and made payable to:

JWG International Pte. Ltd.

For Internet Banking:

Maybank Account No :0410-1076-634

Sub Total :	\$400.00
7% GST:	\$28.00
Total	\$428.00
Less Deposit :	\$0.00
Remaining Balance	\$428.00



JWG International Pte Ltd's Signature

SINGAPURA LEASING PTE LTD
Mailing Address: Blk 985A, Buangkok Crescent #07-10, Singapore 531985
Company Registration Number: 201528975D
Contact: +65 98 900 400



INVOICE

Bill To: Tan Yi Sheng

Address: -

-

-

Phone: 86608799

Invoice No.: 2022SL006

Sales Person: Robinn Khang

Invoice Date: 7/6/2021

Our Ref.: Vehicle Number:

SMY3708L

Make / Model:

Toyota Yaris Cross 1.5A

S/N	Description	Qty	UOM	Rate/Day	Total Amount
1	Rental Charges Start Date: 3/6/2021 End Date: 7/6/2021	4	Day(s)	\$150.00	\$600.00
2	Rebate (if any) Start Date: - End Date: - Remarks: NA	-	-	\$0.00	\$0.00
Total Payable (SGD)					\$600.00

Payments by Cheque should be crossed and made payable to:
Singapura Leasing Pte Ltd

****This is a computer generated copy. No signature is required****



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

C.S.ONG AUTO PTE. LTD. - TAN YI
SHENG

Invoice Number
GR-2021-001770

Invoice Issue Date
20 May 2021

Invoice Due Date
27 May 2021

Total Amount (S\$) 27.10
Total GST 7.00% (S\$) 1.90
Total Amount Incl. of GST (S\$) 29.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	20/05/2021,18/05/2021,SMY3708L,SHD7190Y	27.10	1.90	29.00
Total Amount (S\$)				27.10
Total GST 7.00% (S\$)				1.90
Total Amount Incl. of GST (S\$)				29.00

*This is a computer generated document.
No signature is required.*



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Date of Request: 20/05/2021

Your Ref No: SMY3708L

C.S.ONG AUTO PTE. LTD.

10, Ang Mo Kio Industrial Park 2A, AMK Autopoint #02-16

Dear Sir/Madam,

Date of Accident: 18/05/2021 00:00 (SGT)

Vehicle No: SMY3708L

Place of Accident: Sengkang E Rd, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SHD7190Y	Sengkang E Rd, Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.