



# MTM AUTOMOTIQ PTE LTD

48 Toh Guan Road East #01-141 Enterprise Hub Singapore 608586

Tel: 6271 2088

ROC No. : 202107073H

Attn : MOTOR CLAIMS DEPARTMENT

Date : 30 Sep 2021

Your Ref : S1M03EZU

To : AXA Insurance Ptd Ltd  
8 Shenton Way  
AXA Tower #24-01  
Singapore 068811

Dear Sir / Mdm,

**RE : ACCIDENT INVOLVING SMY7239Y & SHA9369C on 03 AUG 2021**

We refer to the above matter.

Attached copies of the following for your perusal :

1 )	Letter of Authorisation	
2 )	Tax Invoice No. C210044	\$ 2,750.00
3 )	Loss of use 3 days x S\$100	\$ 300.00
TOTAL		<u>\$ 3,050.00</u>

Please look into the above claim and let us have your payment of the soonest.

Thank you.

Yours faithfully,

Donavan Leong  
Claims Administrator

E-mail : [donavan.leong@mtmperformancegroup.com](mailto:donavan.leong@mtmperformancegroup.com)

Tel : 97974474



## LETTER OF AUTHORITY

To : Axa Insurance .

Dear Sirs,

ACCIDENT INVOLVING MOTOR VEHICLES NO. SMY7239Y AND RHA9369C  
ALONG BLK 287 Yishun Ave 6 carpark. ON 03.08.21

I/We are the owner(s) of Vehicle No. SMY7239Y and hereby agree and authorize you to release the entire third party claim of the full settlement / award / payment disbursement and GST (if any) for my property damage claim in respect of and/or arising out of the abovesaid accident to the workshop, MTM AUTOMOTIQ PTE LTD .

As against me/us, I/we agree to hold harmless and exempt you (and/or any party under your instruction) from any liability whatsoever, from any act, matter or thing that is performed under the directions given in this letter of authority, and as against any third party, I/we agree to and shall indemnify you from any act, matter or thing that is performed under the directions given in this letter of authority.

I/We confirm and declare that this letter of authority is and shall be irrevocable due to the arrangement we have with the abovesaid workshop on the repair costs of my/our vehicle, unless such instruction of revocation is given by both me/us and the abovesaid workshop.

Yours faithfully,



\_\_\_\_\_  
Claimant's signature / company stamp (if applicable)

Name : IAN ZHANG

NRIC / FIN / UEN No. : S7873278D

Date : 04.08.21



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHA 9369C (Insd veh)	Model: BMW 318i SEDAN LED(1499cc)
	SMY 7239Y (TP veh)	
Date of Accident/ Time:	03/08/2021	

Repair Estimate	: \$	6,344.11	
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 (Global Sum)	: \$	2,900.00	
Payee Name : MTM AUTOMOTIQ PTE LTD			
Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)	
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: Doravien Leong  
 Date: 05.10.21



Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: Jessee Chua  
 Date: 05.10.21



Signature of AXA's surveyor/representative:  
 Name of AXA's surveyor /Representative:  
 Date: 11/10/2021





# MTM AUTOMOTIQ PTE LTD

48 Toh Guan Road East #01-141 Enterprise Hub Singapore 608586

Tel: 6271 2088

ROC No. : 202107073H

## INVOICE

TO : AXA Insurance Ptd Ltd  
8 Shenton Way  
AXA Tower #24-01  
Singapore 068811

INV NO : C210044

DATE : 30 Sep 2021

S/N	DESCRIPTION	UNIT PRICE	QTY	AMOUNT
1	Repair for SMY7239Y DOA: 03 AUG 2021 corresponding replacement of parts, spray painting and labour charges.	\$ 2,750.00	1	\$ 2,750.00
TOTAL				\$ 2,750.00





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:	MTM AUTOMOTIQ PTE LTD
Contact Person:	Donavan Leong
Contact Number:	9794 4474
Email Address:	donavan.leong@mtmperformancegroup.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:	United Overseas Bank Limited
Bank Code:	7375
Bank Branch Code:	336
Bank Account Number:	388-322086-0
Name of Account Holder:	MTM AUTOMOTIQ 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)

6/10/2021  
Date





### 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 :	MTM AUTOMOTIV PTE LTD
Contact Person :	Donavan Leong
Contact Number :	9797 4474
Email Address :	donavan.leong@mtmperformancegroup.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 :	MTM AUTOMOTIV PTE LTD
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	202107073H

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)



06/10/2021  
Date (DD/MM/YYYY)