

# BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

WITHOUT PREJUDICE

Our Ref : **SHA 9539 D**  
Your Ref : **SMS 6819 L**

**AXA INSURANCE SINGAPORE PTE LTD**

8 Shenton Way,  
#24-01 AXA Tower,  
Singapore 068811

Attention: Motor Claims Department

Dear Sir/Mdm.

Accident on 07.08.2021 @0420hrs along Yishun Ave 2 involving vehicles SHA 9539 D and SMS 6819 L

We refer to the above-mentioned accident.

We are claiming as per below:-

1. Repair Cost – Lump Sum (With GST)	\$	45,796.00
2. Loss of Income for 32 Days x \$80/- per day	\$	2,560.00
3. Loss of Rental for 32 Days x \$126.47 per day (With GST)	\$	4,047.04
4. LTA/GIA Search fee (With GST)	\$	7.45
5. Towing Fee	\$	80.00
<b>TOTAL</b>	<b>\$</b>	<b>52,490.49</b>

Enclosed herewith a copy each of relevant GIA report, LTA, Proforma Tax invoice, Rental Agreement/Tax invoice, Mileage Record, Towing Fee and Letter of Authorization for your attention. Kindly let us have your reply with the next 14 days upon receipt of this letter.

If you have any enquiries, please contact us @ 9648-8228 or you may email to us at [claims@bifrostauto.com](mailto:claims@bifrostauto.com)

Yours faithfully,  
**BIFROST AUTO 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.

*The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document.*

*GST at 7% is charged where applicable*

BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

**LETTER OF AUTHORISATION**

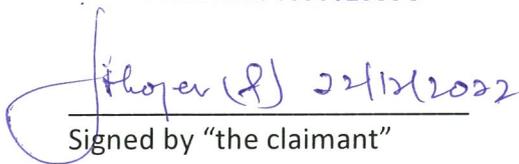
Accident on 07.08.2021 @0420hrs along Yishun Ave 2 involving vehicles SHA 9539 D and SMS 6819 L

In consideration of **Bifrost Auto Pte Ltd, 6001 Beach Road #22-01, Golden Mile Tower Singapore 199589**, repairing my/our motor vehicle no **SHA 9539 D** at my request, I/We, **CITYCAB PTE LTD** ("the claimant") of **383 Sin Ming Drive Singapore 575717** (address) bearing UEN / NRIC No: **199502839G** the owner of motor vehicle no **SHA 9539 D**, hereby authorize 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 solicitors to act for 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 authorized 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.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Bifrost Auto Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Bifrost Auto Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Bifrost Auto Pte Ltd** shall amount to a good discharge of **Bifrost Auto Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

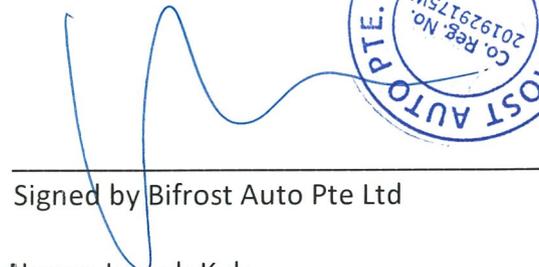
Dated this 22 day of 12 (month) 2022 (year)

**CITYCAB PTE LTD**  
**CO. REG. NO. 199502839G**

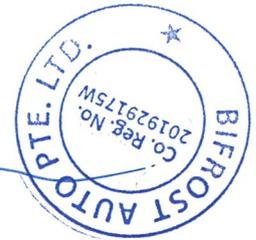
  
Signed by "the claimant"

Name: **CITYCAB PTE LTD**

UEN No: 199502839G

  
Signed by Bifrost Auto Pte Ltd

Name: Joseph Koh





my execution of this Discharge Voucher is only my claim for property damage and not prejudicial to any other claims arising from the same accident

**AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	SMS 6819 L (Insd veh)	Model: Toyota Prius 1798cc
	SHA 9539 D (TP veh)	
Date of Accident/ Time:	07.08.2021@0420hrs	

Repair Estimate	: \$	93,360.92	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
<b>Final Settlement Sum (Global Sum)</b>	: \$	41,760.00	
<b>Payee Name :</b> BIFROST AUTO PTELTD			
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:**

- 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: Janice Sym 

Name of Representative: \_\_\_\_\_

Date: 27/12/2022

Signature of Witness / Workshop stamp (if applicable): [Signature] 

Name of Witness: \_\_\_\_\_

Date: 27/12/2022

Signature of AXA's surveyor/representative: [Signature] 

Name of AXA's surveyor /Representative: \_\_\_\_\_

Date: 27/12/2022

# BIFROST AUTO PTE. LTD.

GST. Reg. No. : 201929175W

## Tax Invoice

**AXA INSURANCE PTE LTD**  
8 Shenton Way,  
#24-01 AXA Tower,  
Singapore 068811

Inv. No. : BA.LT.2212056  
Inv. Date : 23-12-2022  
Ref : 07.08.2021  
Terms : 30 Days  
Veh. No. : SHA 9539 D  
Make & Model : Prius

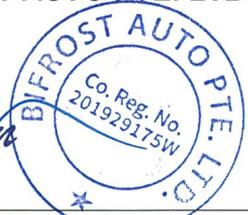
#	Description	Qty	Rate	Total	Tax
1	LUMP SUM REPAIR AS RECOMMENDED BY SURVEYOR	1.0	\$34,000.00	\$34,000.00	\$2,380.00

Subtotal for invoice : S\$34,000.00  
GST (7.0%) : S\$2,380.00  
Total : S\$36,380.00

*I agree to the price as listed above and  
affirm that the goods are received in good  
condition.*

On behalf of **BIFROST AUTO PTE. LTD.**

(Customer's Signature and Company Stamp)

*Janice Syn*  
  
(Authorised Signature)

Please make cheque payable to "BIFROST AUTO PTE LTD" and mail to **6001 BEACH ROAD #22-01, GOLDEN MILE TOWER Singapore 199589** or direct bank transfer to **DBS Bank Current Account 070-902-886-1.**

Our Ref: CC21080123



Date: 18 August 2021

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON            07/08/2021 @ 04:20 hrs  
ALONG                    YISHUN AVE 2  
INVOLVING              SMS6819L

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA9539D** (the "Taxi"). The Taxi was hired to **TOH HENG TECK IC NO SXXXX627A** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$126.47** per day (inclusive of GST).

Please be advised that the Taxi was insured with **AXA Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Philip Chia  
Manager, Fleet Safety

This is a computer generated letter. No signature is required.



> Back to OneMotoring



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

Print Date/Time : 11 Aug 2021 / 10:51:32

Receipt Date/Time : 11 Aug 2021 / 10:51:32

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-210811-001063

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 - SMS6819L As at 07 Aug 2021/04:20:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SMS6819L Enquiry Fee 20210811105014878529	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				
	542550XXXXXX9955		eNETS 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.



47 Jalan Pemimpin Halcyon 2 #C01-02 Singapore 577200 Co. Reg. No. 53152603L HP: 900 900 92 Email: jim.koh@hotmail.com Website: <http://www.gaoexpresstowing.sg>

**CASH SALE/WORK ORDER**

No. **215547**  
Date: 11/8/2021

寶號  
Messrs: LTm

車號  
Vehicle No: SHA 9539 D 車型  
Model No: Pirus

時間(日/夜)  
Time (day/night): \_\_\_\_\_ Contact No: \_\_\_\_\_

由  
Location: S17 AIRPORT RD

到  
To: of Comfort

Cash \$: 807 其他  
Others: \_\_\_\_\_

經手人  
Authorised By: \_\_\_\_\_ Tow Truck  
Driver Name: [Signature]

- Jump Start/Changing of battery
- Tyre Replacement
- Accident/Breakdown
- Multi/Basement
- With Load/Cargo Box
- King Dolly
- Transport Charge
- Low Body Kit
- Door Opening Service
- Crane Up/Winch Out
- Collect Doc/Key
- Repo
- Woodlands and Tuas Checkpoint

注意本公司對所拖之車輛,在進行中如有任何損失或破壞,一概由車主自行負責。  
Note: Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed.



TIAK

# SINGAPORE POLICE FORCE ACKNOWLEDGEMENT SLIP

Ref: Report No: L/20210807 /051

I, SS T140119 DM  
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 X SAMSUNG 128GB MICRO SD
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from TOH HENH TECK S1359627A  
(Name, NRIC or Passport No. / Rank and No.)

of B/174 YISHUN AVE 7 #11-837 760174  
(Address / Police Station / NPC / NPP)

on 07/08/2021 at 0500  
(Date) (Time)

Witnessed by / \* Handed over by:  
(\* Delete if applicable)

Received by:

[Signature]  
(Signature)  
Toh Henry Teck 1359627A  
(Name, NRIC or Passport No. / Rank and No.)

[Signature]  
(Signature)  
T140119 DM  
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: 65476960  
10 JOFI

No Key



## JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition								
1. Date: <u>11/8/21</u> Time Received: _____	3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input type="checkbox"/> Normal Tow <input checked="" type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up						
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : <u>MR YEE</u> Contact No. : <u>94893668</u> Vehicle No. : <u>SUA9539D</u> Make / Model / Colour : <u>PRINS</u> Email : _____	5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery		6. Parts Replaced/Remarks: _____ _____					
7. Location: <u>SIF AIRPORT RD</u>		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi						
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____		10. Odometer Reading : _____ Fuel Level : <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>F</td><td>1/4</td><td>1/2</td><td>3/4</td><td>E</td></tr></table>		F	1/4	1/2	3/4	E
F	1/4	1/2	3/4	E				
11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested								
Job Attended								
12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input type="checkbox"/> QA <input checked="" type="checkbox"/> GAO <input type="checkbox"/> OTHERS Name of Driver : <u>Fook</u> Vehicle No. : <u>G284882</u> Time Dispatch : <u>1050</u> Time of Arrival : <u>1400</u> Time Completed : <u>1505</u>		#: Cracked X : Dented / : Scratched O : Missing  _____ Signature of Customer						
Cash Invoice Details (if applicable)								
13. Cash Invoice No. : _____								
Customer Acknowledgement								
a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc. b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses. c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.								
<u>11/8/21</u> Date		<u>1505</u> Time						
_____ Signature of Customer								
14. WORKSHOP								
_____ Name of Attending Staff/Guard		_____ Date & Time of Arrival						
_____ Signature of Attending Staff/Guard								



Our Ref : TP/IP/37455/2021  
Date : 10 August 2021

**NAME: TOH HENG TECK**  
**NRIC / FIN: S1359627A**

Dear Sir / Madam,

**CASE OF TRAFFIC ACCIDENT ALONG LENTOR AVENUE ON 07/08/2021**

**NOTICE FOR VEHICLE (SHA9539D) COLLECTION**

Please collect the above vehicle, which is registered under your name at **Traffic Police Vehicle Pound located at 517 Airport Road, Singapore 539942** within 30 working days from the date of this notice. The Duty Officer at **Traffic Police Vehicle Pound** can be contacted at **6280 7841**. The collection hours are:

Day of week	Operational hours
Monday	2.00 pm to 4.00 pm
Tuesday to Friday	9.00 am to 12.00pm 2.00 pm to 4.00 pm

2 You have to make your own arrangements to remove your vehicle at your own cost. If you are authorising someone else to collect the vehicle on your behalf, please ensure that he / she produces his / her NRIC / Passport for verification. Please fill up the letter of authorization at Annex 'A'.

3 Take note that the vehicle must be collected within 30 working days from the date of this notice or storage fee will be levied as follows:

Type of vehicle	Storage fee per day
Motorcycle/Scooter	\$20/-
Motorcar	\$40/-
Others	\$80/-

4 Traffic Police will proceed to dispose the vehicle if it remains unclaimed after 30 working days from the date of this notice. Should you require further clarification, please contact the undersigned at telephone number **6547 6960** or via email at [Jofiliano\\_mohamed\\_ali@spf.gov.sg](mailto:Jofiliano_mohamed_ali@spf.gov.sg).

Yours faithfully,

**JOFILIANO**  
**INVESTIGATION OFFICER**  
**TRAFFIC POLICE**



Reference: TP/IP/37455/2021

**ANNEX A: LETTER OF AUTHORISATION FOR VEHICLE COLLECTION**

I, TOH HENG TECK, of NRIC / FIN / Passport Number:

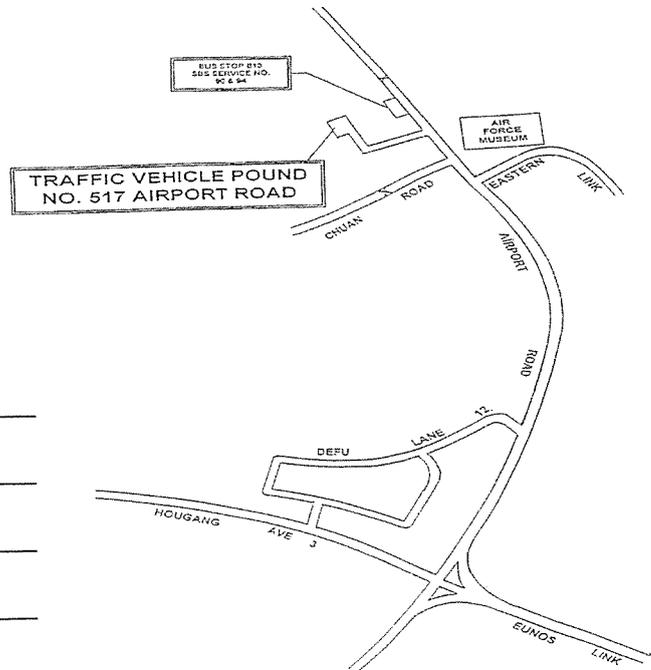
SXXXX 627 A hereby authorise \_\_\_\_\_ of NRIC / FIN /

Passport Number: \_\_\_\_\_ to collect my vehicle bearing registration number:

( SHA 9539 D on my behalf from Traffic Police.

LOCATION MAP FOR TRAFFIC VEHICLE POUND

(Signature)



Name : TOH HENG TECK

NRIC No. : SXXXX 627 A

Contact Number : 96469275

Date : 10.08.2021

**Note: NRIC, FIN CARD OR PASSPORT MUST BE PRODUCED FOR VERIFICATION TOGETHER WITH THE NOTICE FOR VEHICLE COLLECTION.**

\*\*\*\*\*  
 \*\*\* FAX TX REPORT \*\*\*  
 \*\*\*\*\*

TRANSMISSION OK

Tow Truck : YN 3663Y  
 H/P : 90090092

JOB NO. 0760  
 DESTINATION ADDRESS 67481195  
 SUBADDRESS  
 DESTINATION ID  
 ST. TIME 11/08 10:10  
 TX/RX TIME 00' 26  
 PGS. 2  
 RESULT OK



**SINGAPORE  
 POLICE FORCE**

Traffic Police  
 10 Ubi Avenue 3  
 Singapore 408865  
 Tel +65 6547 0000  
[www.police.gov.sg](http://www.police.gov.sg)

Our Ref : TP/IP/37455/2021  
 Date : 10 August 2021

**NAME: TOH HENG TECK**  
**NRIC / FIN: S1359627A**

Dear Sir / Madam,

**CASE OF TRAFFIC ACCIDENT ALONG LENTOR AVENUE ON 07/08/2021**

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2 You have to make your own arrangements to remove your vehicle at your own cost. If you are authorising someone else to collect the vehicle on your behalf, please ensure that he / she produces his / her NRIC / Passport for verification. Please fill up the letter of authorization at Annex 'A'.

3 Take note that the vehicle must be collected within 30 working days from the date of this notice or storage fee will be levied as follows:

Type of vehicle	Storage fee per day
Motorcycle/Scooter	\$20/-
Motorcar	\$40/-
Others	\$80/-

**Claim Notification - ACCIDENT INVOLVING SMS 6819L(AXA) AND SHA 9539D  
ALONG/AT JUNCTION OF LENTOR AVE & YISHUN AVE 1 ON 07/08/2021**

Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Tue 31/8/2021 3:04 PM

To: claims@transcab.com.sg <claims@transcab.com.sg>

31 Aug 2021

**M/s Trans Leasing Pte Ltd**

*[By Email only]*

Driver: Goh Kheng Fong.(Wu QingFeng)

Dear Sirs/ Mdm

**OUR REF : CC4/ASM21008404/Dpa3// S1M03FDF**

**YOUR REF : SMS6819L**

**ACCIDENT INVOLVING SMS 6819L(AXA) AND SHA 9539D ALONG/AT JUNCTION OF LENTOR AVE & YISHUN  
AVE 1 ON 07/08/2021**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third-party claim against your policy.

We have received a third-party claim(s) from BIFROST AUTO PTE LTD acting on behalf of the owner of SHA9539D against your motor insurance policy.

Based on all the available information on hand, we are of the view that liability is not in your driver's favour. We shall proceed to negotiate for an amicable settlement of the third-party claim at best to avoid further litigation, which would escalate to even more cost.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization to confirm that the driver is allowed to drive the vehicle.(Attached is a template)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at [chewht@lkkauto.com](mailto:chewht@lkkauto.com).

Please quote the claim reference when you contact us that we can assist you more effectively.

***Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.***

Best Regards,

**Hsiao Tong, Chew** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742 3197 | email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) | fax: 6741 4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)