



MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #04-01 Singapore 415933

Tel: 6243 1373 Fax: 6243 1376

(GST Reg. No. 201427944N)

Date : 10/11/2021
Your Ref : **SHA6585P**
To : **AXA INSURANCE PTE LTD**
Attn : Motor Claims Department

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE SDY1311S & SHA6585P ON 26/08/2021 AT JUNCTION OF ANG MO KIO AVENUE 1 AND ANG MO KIO AVENUE 10.

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No. **218171 @ S\$2,461.00 (Inclusive Of 7% GST)**
- 2) Loss of Use @ **S\$1,200.00 (6 Days x S\$200)**
- 3) LTA Search @ **S\$7.45**
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

Thank You.

Yours faithfully,



Sharon Chia

HP: 8121 1373

E-mail: mg3solution@gmail.com

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

AUTHORIZATION TO ACT

I, CHUA CHOR PIN ("the third party claimant")
of 26 BUKIT BATOK EAST AVE 2 #05-06 S(659920) (address),
owner of SDY 1311S (vehicle no.) hereby authorize
MG SOLUTION PTE LTD
("The workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
Vehicle No. SDY 1311S that was damaged pursuant to the
accident which occurred on 26/08/2021 (date) along JUNCTION OF
ANG MO KIO AVE 1 AND ANG MO KIO AVE 10 (location)
involving Vehicle No/s SHA 6585 P
("The accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 27 day of AUG (month) 2021 (year)

✓/31

Signed by "the third party claimant"



Signed by "the workshop"

LETTER OF AUTHORITY

Name : CHUA CHOR PIN
Address : 26 BUKIT BATOK EAST AVE 2
#05-06 S(659920)
Contact No : _____
TO: AXA INSURANCE PTE LTD

Dear Sirs,

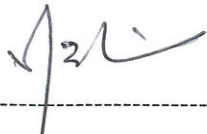
ACCIDENT INVOLVING SDY 1311S AND SHA 6585P ON 26/08/2021
AT/ALONG JUNCTION OF ANG MO KIO AVE 1 AND ANG MO KIO AVE 10

I/We, CHUA CHOR PIN, am/are the registered owner of
motor car no. SDY 1311S

Please note that I have assigned all compensations monies due to me/us in the above said accident to **M/S MG SOLUTION PTE LTD.**


I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned accident to **M/S MG SOLUTION PTE LTD** and forward your settlement cheque to **M/S MG SOLUTION PTE LTD** whom I had authorized to collect the said compensation monies.

Thank you



Signature of Claimant





Witness By



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHA6585P (Insd veh)	Model: MAZDA 3 5-DOOR HATCHBACK
	SDY1311S (TP veh)	
Date of Accident/ Time:	26/08/2021	

Repair Estimate	: \$	7,653.67	
Final Repair Cost	: \$	2,461.00	
Loss of Use	: \$	360.00	6 days at \$ 60 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	2,828.45	
Payee Name :			
Is Third Party Workshop GIA Registered? [] YES <input checked="" type="checkbox"/> 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: *WONG SUTIM*
 Date: 16/11/2021

Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: *SHARON CHIA*
 Date: 16/11/2021

Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative: ADRIAN LING WAI PING
 Date: 16/11/2021

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.



MG SOLUTION PTE LTD

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Tel: 6243 1373 Fax: 6243 1376

(GST Reg. No. 20-1427944-N)

TAX INVOICE

Bill To:

AXA INSURANCE PTE LTD

8 SHENTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

INVOICE No : TI 219208

PB No : 218171

Date : 16-November-2021

ATTN : MOTOR CLAIMS DEPARTMENT

Vehicle Number : SDY 1311S

QTY	DESCRIPTION	AMOUNT
1	To carried out accident repair as per surveyor's recommendation (Lump Sum)	\$ 2,300.00
BEFORE GST		2,300.00
7% GST		161.00
TOTAL		\$ 2,461.00

Cheque should be made payable to **MG Solution Pte Ltd**



Co's stamp & Authorised Signature

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 26 Aug 2021 / 11:23:18

Receipt Date/Time : 26 Aug 2021 / 11:23:18

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210826-001400

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 - SHA6585P				
As at 26 Aug 2021/05:30:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHA6585P Enquiry Fee 20210826112208904003	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				
20210826112239298		Direct Debit: eNETS Debit (Internet Banking)		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:<TP - Mandate IA> - S1M03GI1 [ACCIDENT INVOLVING
(SHA 6585P) & (SDY 1311S) ON 26/08/2021]

Type

 Question

Message

Please proceed

Reply