

# TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 67440510

Fax: 67410510

Email: sales@n51.com.sg

03 December 2021

Our Ref : CLM15298 / SMV8383Y / AUG-13/2021

**AXA INSURANCE PTE LTD**

8 SHENTON WAY

#24-01 AXA TOWER

SINGAPORE 068811

**ATTN: MOTOR CLAIMS DEPARTMENT**

Dear Sir @ Madam,

**RE: ACCIDENT INVOLVING SMV8383Y & SHA8517Z ON 26/08/2021**  
**ALONG BLK 27 PASIR RIS ST 72 (WHITE WATER CONDO DRIVEWAY)**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SHA8517Z** whose vehicle was insured with you at the material date of the accident.

We are proposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

Cost of repairs	\$	2,889.00	(Include 7% GST)
Loss of use	\$	800.00	(\$100 X 8 Days)
Additional 2 days loss of use for pre repair	\$	160.00	(\$80 X 2 Days)
LTA search fee	\$	7.45	
	S \$	<u>3,856.45</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM15298
- 2) LTA search
- 3) Letter of Authorisation
- 4) GIA report of SMV8383Y

We look forward to your prompt reply.

Yours faithfully



**Twincar Automotive Pte Ltd**

S.Y.NEO

Director

P.I.C - Melody Chin

Reply to :huixin@n51.com.sg

# LETTER OF AUTHORISATION

To: M/s Twincar Automotive Pte Ltd  
Singapore

RE: ACCIDENT INVOLVING VEHICLE NOS: SMV 83834 & SHA 85172  
ALONG BLK 27 PASIR RIS ST 72 (WHITE WATER CONDO DRIVEWAY) ON 26/08/2022 - 9:20 LRS

I/We GLEN YEOW JUN HUNG NRIC/Passport No: T 0019383B  
of BLK 25 PASIR RIS ST 72 #05-11 S(5/2765)  
the owner of vehicle no. SMV 83834 hereby authorise you to commence repair to the said  
vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident' claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are NTUC  
Policy No. 51177790A-01 Expiry Date: 25/08/2022

Date: \_\_\_\_\_

Excess: \_\_\_\_\_

Owner's Signature/Co's stamp (if applicable)

Witness Signature/Name

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





### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHA 8517Z (Insd veh)	Model: HONDA VEZEL
	SMV 8383Y (TP veh)	
Date of Accident/ Time:	26/08/2021	

Repair Estimate	: \$	7,443.69	
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	: \$	3,100.00	(global sum)
Payee Name : TWINCAR AUTOMOTIVE 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: <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:

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:  
Date: 04/03/2022



Signature of AXA's surveyor/representative:  
Name of AXA's surveyor /Representative:  
Date: 04/03/2022

LUP

Signature of Witness / Workshop stamp (if applicable)  
Name of Witness: MELODY CHAN  
Date: 04/03/2022

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

# TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub

2 Kaki Bukit Ave 2

#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27

Singapore 417921

Tel No. : +65 6842 0051 Fax No. : +65 6741 0510

E-Mail : sales@n51.com.sg

Company Reg. No. : 200714616M

GST Registration No. : 200714616M

AXA INSURANCE PTE LTD

8 SHENTON WAY

#24-01 AXA TOWER

SINGAPORE 068811

## TAX INVOICE

Date : 30/11/2021

Date in : 26/08/2021

Vehicle Num. : SMV8383Y

Make/Model : HONDA VEZEL 1.5X CVT-2015

Chassis/Eng# : RU11100387/L15B4020389

Accident Date : 26/08/2021

Claim No : CLM15298

Reference : AUG-13/2021

Policy No. : 5117779017-01 (25/08/2022)

LUMP SUM REPAIR BILL

REF : CLM15298-TWINCAR DATED 30/08/2021

BY DIRECT

Amount S\$

2,700.00



E. & O.E.	Sub S\$ :	2,700.00
	Add GST ( 7% ) S\$ :	189.00
	Total Amount S\$ :	2,889.00

for TWINCAR AUTOMOTIVE PTE LTD

> Back to OneMotoring



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

Print Date/Time : 26 Aug 2021 / 14:56:45

Receipt Date/Time : 26 Aug 2021 / 14:56:45

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-210826-002561

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 - SHA8517Z				
As at 26 Aug 2021/09:20:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHA8517Z			
	Enquiry Fee	7.00	0.49	7.49
	20210826145630861889			
	<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				
	mcva0fwe		Credit Card	7.45
	<b>Total</b>			7.45
	<b>Cash Change</b>			0.00
	<b>Tendered Amount</b>			7.45
	<b>Excess Refundable Amount</b>			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:<MANDATE IA>

Type

 Question

Message

MANDATE APPROVED

Reply





redefining / standards

## GIRO CREDIT AUTHORISATION FORM

This form must be completed and returned to AXA Insurance Pte Ltd. Payment Service fees will be credited directly into the Service Provider's designated bank account stated below. The Service Provider has to complete all fields of Section A and the completed form must be returned by post/hand to:

AXA Insurance Pte Ltd  
8 Shenton Way #27-01 AXA Tower, Singapore 068811  
Attn:

### Section A: Service Provider Details (To be completed by the Service Provider of AXA Insurance Pte Ltd)

Name of Service Provider (Company):	TWINCAR AUTOMOTIVE PTE LTD
Contact Person:	MELODY CHIN
Telephone:	6744 0510
Email Address:	huixin@nsl.com.sg
(An auto-prompt email from the bank will be sent to this email address once this form has been processed by AXA Insurance Singapore Pte Ltd and the payment has been credited)	

### Particulars of Service Provider Bank Account (Bank code and Branch code can be found at the bottom of cheque)

Name of Bank:	UOB BANK
Bank Code:	7375
Bank Branch Code:	004
Bank Account Number:	3103081430
Name of Account Holder:	TWINCAR AUTOMOTIVE PTE LTD

I/We hereby authorize AXA Insurance Pte Ltd to credit service payments due to me/us to the above bank account, and undertake to return to AXA Insurance Pte Ltd immediately upon demand, any sum which should not have been 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 service payments once such amounts are credited into above bank account.

This authorization shall continue in force until I/we have expressly revoked it by notice in writing to you. In the event of a change of bank account, I/we shall inform you in writing 30 days in advance before such change.



Authorised Signature & Company Stamp (as in bank records)

04/02/2022

Date