

KARZ WORKS PTE LTD
53 UBI AVENUE 1 #01-34, PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934
(TEL) 6 8 4 4 1 1 3 0 (FAX) 6 8 4 4 2 4 7 4
(E-MAIL) KARZWORKSSG@GMAIL.COM

12th October 2021

Our reference: KK2109-18

Your reference: SH8116E

AXA Insurance Singapore Pte Ltd

BY EMAIL

8 Shenton Way
#27-01 AXA Tower
Singapore 068811

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant : LEW JIA XUAN

Address : 813 JURONG WEST STREET 81 #11-170 S(640813)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **07/09/2021** along **BUKIT TIMAH ROAD BEFORE KING ALBERT MRT** involving our client's vehicle registration number **JQV3804** and vehicle registrations number **SH8116E** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 1,000.00
Loss of Use (\$40 x 14 days)	:	\$ 560.00
LTA search	:	\$7.45
Total	:	\$ 1,567.45

A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Certificate of Insurance;
- e) Letter of Authorization;
- f) LTA search invoice;
- g) Tax invoice;
- h) Satisfaction of repaired vehicle;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



Karz Works Pte Ltd

Encl

LETTER OF AUTHORIZATION

To : AXA and Carz works pte ltd (Third party insurance & Workshop)
Claimant : Lew jia xuan

Dear Sirs,

I/We, Lew jia xuan owner of vehicle no. JQV3804
hereby authorize my/our repairer, carz works pte ltd
act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or
loss of use ("claim") for my/our vehicle no. JQV3804 that was damage pursuant to the
accident which occurred at/along
Butit timah road before king albert mrt
involving vehicle nos. SH8116F

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies
pertaining the above mentioned accident due to me/us to my/our repairer/solicitors
carz works pte ltd. I/We hereby authorize you to forward and release all
compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors
carz works pte ltd pertaining to above said accident whom I/we
authorized and assigned to collect the said compensation monies.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the
personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein
should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured
losses claim arising of the subject matter in the action.

Thank you.

Dated this _____ day of 07/09/2021 (month) 20____ (year)

Signature of owner vehicle (claimant): [Signature]

Name of owner of vehicle (claimant) : _____

NRIC Number (claimant): _____



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SH 8116E (Insd veh)	Model: YAMAHA FZ 1501
	JQV 3804 (TP veh)	
Date of Accident/ Time:	07/09/2021	

Repair Estimate	: \$		
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	: \$	1,200.00	GLOBAL SUM
Payee Name : KARZ WORKS 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:


- 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 / Workshop stamp Name of Representative: Date: 15/12/2021	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: Date: 15/12/2021
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 Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 15/12/2021

This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in the action.

> Back to OneMotoring



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

Print Date/Time : 09 Sep 2021 / 10:34:44

Receipt Date/Time : 09 Sep 2021 / 10:34:44

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210909-000832

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 - XD6443K				
As at 07 Sep 2021/18:28:00				
Insurance Co: LONPAC INSURANCE BHD				
1	Insurance Enquiry - XD6443K Enquiry Fee 20210909103344033881	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SH8116E				
As at 07 Sep 2021/23:05:00				
Insurance Co: INDIA INT'L INS PTE LTD				
2	Insurance Enquiry - SH8116E Enquiry Fee 20210909103344122586	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - GBH8131L				
As at 08 Sep 2021/08:00:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
3	Insurance Enquiry - GBH8131L Enquiry Fee 20210909103344211292	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	21.00	1.47	22.47
	Rounding Difference			0.02
	Total Amount Payable			22.45
	Paid By			
	540191XXXXXX6572	eNETS Credit Card		22.45
	Total			22.45
	Cash Change			0.00
	Tendered Amount			22.45
	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:RE: Re:<MANDATE IA>

Type

Question

Message

Please proceed

Reply