

Ventures Auto Pte Ltd
Letter of Demand

Our Ref: SMT 971 M

4-Aug-2022

AXA Insurance Pte Ltd
9 North Buona Vista Drive
#18-01/06
Singapore 138588

Dear Sir/Mdm:

ACCIDENT INVOLVING SMT971M AND SHA8520M ON 2-MAR-2022 AT ALONG JUNCTION OF FARRER RD AND DUNEARN RD

We are acting on behalf of the owner/driver to recover his vehicle damages and losses sustainer in the above accident from the third party driver/ or insurers.

<u>Description</u>				<u>Amount</u>
Repair Costs				\$ 6,206.00
Loss of Rental	\$120.00	X	5 days	\$ 600.00
Loss Of Use	\$0.00	X	0 days	\$ -
Search Fees (LTA)				\$ 7.45
Surveyor fees				\$ -
Others Claim				\$ -
			Amount	\$ 6,813.45

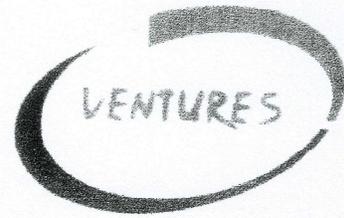
Please look into our client claims and let us hear from you shortly.

Thank you




Kerry Tan
Ventures Auto Pte Ltd
Tel : 8399 6267
email : venturesautopl@gmail.com

VENTURES AUTO PTE LTD
REG: 202143430K



LETTER OF AUTHORIZATION

Accident involving my vehicle SMT971M & SHA8520M on 2/3/2022 at along Junc of Farrer Rd and Dunearn Rd

I/We, Lee Chee Meng Hubert, owner of vehicle no. SMT971M hereby authorize **VENTURES AUTO PTE LTD** to proceed with the repair for my vehicle SMT971M which was damaged in the above accident.

I/We further authorize **VENTURES AUTO PTE LTD** to claim against the driver and/or the owner of the other vehicle(s) involved in the said accident for the repair cost and the loss of use/rental, and etc of my vehicle on my behalf and for the own benefit.

You are further authorized to appoint your solicitor and give instruction in my name for the purpose of seeking recovery of the said cost of repairs and the loss of use/rental, and etc.

I further authorize you and/or your representative(s) to sign all and any documents including but not limited to Release Forms and Discharge Vouchers, so as to effect settlement of the repair costs, loss of use/rental and etc, as well as legal fee and all disbursements related thereof.

I hereby undertake to co-operate with you and render you all the assistance (Including the re-inspection of my vehicle an being a witness at trial) that may be necessary for you to recover the cost of repairs and the loss of use of my vehicle against any party.

Owner Signature / Company Stamp / Date

Name : Lee Chee Meng
NRIC : S7535396J
HP Tel : 9113 6456
Address : 16 Shelford Road,
#02-10
S(288383)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHA 8520M (Insd veh)	Model: BMW X1
	SMT 971M (TP veh)	
Date of Accident/ Time:	02/03/2022 / 13:10	

Repair Estimate	: \$	24,597.87	
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	: \$	6,700.00	Global Sum (all in)

Payee Name : VENTURES AUTO 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:

- 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: Chew Kee Kwang
 Date: 06/09/22



Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: Kerry Tan Hui Lang
 Date: 6/9/2022



Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 06.09.22

"WITHOUT PREJUDICE FOR ANY OTHER CLAIMS"



Ventures Auto Pte Ltd

23 Kaki Bukit Ave 4,
#04-01 (South Wing),
Singapore 415933.
Reg: 202143430K

Bill To: **AXA Insurance Pte Ltd**
9 North Buona Vista Drive
#18-01/06
Singapore 138588

Proforma Invoice: PI0032
Date: 4-Aug-22

Description	Amount
SMT 971 M - BMW X1 Date of Accident: 2/3/2022 Lump Sum Repair for Third Party Claim	\$ 5,800.00
Total	\$ 5,800.00
GST	\$ 406.00
Subtotal	\$ 6,206.00

All cheque payments should be crossed and made payable
to "VENTURES AUTO PTE LTD"
Please indicate the invoice no. on the reverse side



VENTURES AUTO PTE LTD

Auto Star Automotive Pte Ltd
23 Kaki Bukit Ave 4
04-01
Singapore 415933
autostar.automotive@yahoo.com
Company Registration No. 202029008Z



ADDRESS

Pua Yee Kwan
16 Shelford Road
#02-10
Singapore 288383

Invoice 1165

DATE 11/03/2022

DESCRIPTION

AMOUNT

SMN 3745 L - Opel Crossland
Rental Period: 7/3/2022 - 11/3/2022
\$120 x 5 days
(Replacement Vehicle: SMT 971 M)

600.00

Cheque should be crossed and made to Auto Star Automotive Pte Ltd or E-transfer A/C: 601-304835-001 OCBC Bank.

TOTAL

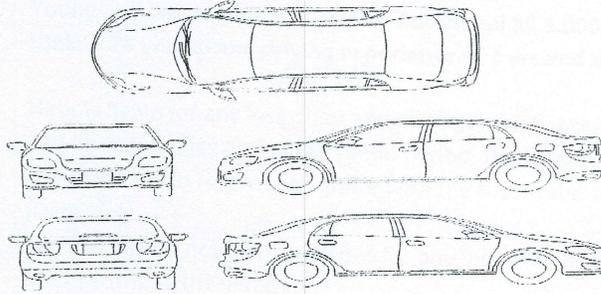
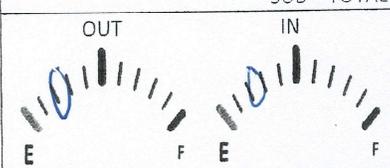
S\$600.00

Accepted By

Accepted Date

We appreciate your business and look forward to serve you again soon.

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULAR Name: (as in I/C) <u>Pua Yee Kwan</u> NRIC / Passport No.: <u>S77036531</u> Address (Res): <u>16 Shelford Rd, #02-10, S1288383</u> Name & Address of Employer: _____ Occupation: _____ Driving Exp: _____ D/L No: _____ D/L Type: Local / International Pass Date: _____ Date of Birth: _____ Tel / HP: _____ ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) _____ NRIC / Passport No.: _____ D/L No: _____ D/L Type: Local / International Address (Res): _____ Tel / HP: _____ Refundable Deposit: _____ Cash/Nets/Cheque/Visa/MC Card No: _____ (A) – ACCIDENTS (D) – DENTS (S) – SCRATCHES <div style="text-align: center;">  </div> ACCESSORIES CHECK <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S / Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD / Cartridges <input type="checkbox"/> S / RIM	Veh No: <u>JMN 3745L</u> Replace Veh No: <u>SM79711</u> Mileage Out: _____ Mileage Out: _____ Make & Model <u>OPEL</u> Make & Model <u>BMW X1</u> Auto / Manual <u>Crossland</u> Auto / Manual _____ OUT: Date <u>7/3/2022</u> OUT: Date _____ OUT: TIME <u>1400</u> OUT: TIME _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2">RENTAL CHARGES</th> <th></th> <th></th> </tr> <tr> <td>Daily</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>Weekly</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>Hours</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>Others</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>CDW</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>PAI</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>Delivery Service</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUB-TOTAL \$</td> <td></td> <td></td> </tr> </table> <div style="text-align: center;">  </div> EXTENSION _____ Collection Service _____ Misc. _____ ESTIMATED TOTAL RENTAL \$ _____ Hirer is responsible for the first \$ _____ excess for collision/damage to first party. (i.e.) Auto Stat Automotive Pte Ltd Vehicle (including windscreen) and also first \$ _____ excess for collision/damage to third party's vehicle for each and every accident/damage. Hirer's Signature: <u>[Signature]</u> Addition Driver's Signature: _____	RENTAL CHARGES				Daily	@ \$			Weekly	@ \$			Monthly	@ \$			Hours	@ \$			Others	@ \$			CDW	@ \$			PAI	@ \$			Delivery Service				SUB-TOTAL \$			
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I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

***IMPORTANT**

1. ONLY PERSONS ABOVE 25 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
2. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY **AUTO STAR AUTOMOTIVE PTE LTD.**
3. IN THE EVENT OF AN ACCIDENT, THE HIRER OF AUTHORIZED DRIVER:
 - (i) shall report all accidents involving the said vehicle to the owner immediately;
 - (ii) shall take immediate steps to complete and sign Form MAR1 (Motor Accident Report Form) and do all others acts required in compliance with the 'NON-INJURY MOTOR ACCIDENT REPORTSCEHEME' (the form will be made available when the accident is report to the owner);
 - (iii) shall report to the police within 24 hours from the occurrence, the following types of accidents:
 - (a) injury case
 - (b) non-injury case involving a Government vehicle, or damage to Government property.
 - (c) non-injury case involving a foreign vehicle (to obtain their motor insurance policy (Passport No./ Name of the driver, vehicle number, Log card a vehicle road tax information.
 - (d) non-injury case involving a pedestrian or cyclist.

RETURN OF VEHICLE. The Hirer/Driver is required to sign in the column "Signature of Hirer/Driver" tailing which the day and time inserted below shall be deemed to be the day and time the vehicle is returned to AUTO STAR AUTOMOTIVE PTE LTD and the same shall be accepted as conclusive evidence of the same and shall not be challenged or questioned on any account whatsoever.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	DEPOSIT REFUND	Signature of Hirer/Driver
<u>11/3/2022</u>	<u>1500</u>					<u>[Signature]</u>

> Back to OneMotoring

sm 7 971 m



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

Print Date/Time : 07 Mar 2022 / 11:59:45

Receipt Date/Time : 07 Mar 2022 / 11:59:45

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220307-001386

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
	Result of Insurance Enquiry - SHA8520M As at 07 Mar 2022/10:00:00 Insurance Co: AXA INSURANCE PTE LTD			
1	Insurance Enquiry - SHA8520M Enquiry Fee 20220307115815503490	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			
	421808XXXXXX7506		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.



Re: MANDATE IA FOR S2M03US6

Type

i Information

Message

Hi Ashley Pls proceed as per IA-VO

Reply