

ADVANCE AUTO GARAGE

23 Kaki Bukit Avenue 4, #04-01 Vicom Kaki Bukit Inspection Center,
Singapore 415933

Tel: 9007 9247

Email: advanceag@hotmail.com

UEN: 53395571L

Date : 20 March 2023
Your Ref : SHC376E
To : AXA Insurance Pte Ltd
Attn : Motor Claims Department

Dear Sir/Mdm,

RE: Accident on 26/05/2022 between SMU8798P & SHC376E at/along Bras Basah Road Junction

We refer to the above matter and would like to settle it directly in an amicable manner.

Please find attached copies of the below mentioned for your kind perusal:

- 1) Invoice No. AAGCL-277 @ S\$5,500.00
- 2) Loss of Use @ S\$1,000.00 (10 Days x S\$100)
- 3) Authorization to Act
- 4) GIA Report

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

Tax invoice will be issued upon amount finalization.

Thank you.

Yours faithfully,



Xavier Lim

Advance Auto Garage

LETTER OF AUTHORITY

Name : Lee Zi Siong
Address : 46 Eastwood Road #04-20
: Singapore 486 356
Contact No : _____

To (Insurance): AXA Insurance Pte Ltd

Dear Sirs,

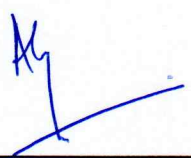
ACCIDENT INVOLVING SMU 8T98P AND SHC3T6E ON 26/05/2022
AT/ALONG Bras Basah Road Junction

I/We, Lee Zi Siong, am/are the registered owner of
motor car no. SMU 8T98P


Please note that I have assigned all compensation monies due to me/us in the above stated accident to **ADVANCE AUTO GARAGE**.

I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned accident to **ADVANCE AUTO GARAGE** and forward your settlement cheque to **ADVANCE AUTO GARAGE** whom I had authorized to collect the said compensation monies.

Thank You



Signature of Claimant



Witness By



HSBC Life (Singapore) Pte. Ltd.
10 Marina Boulevard,
Marina Bay Financial Centre Tower 2 #48-01,
Singapore 018983
☎ +65 6880 4888
☐ www.hsbc.life.com.sg
cc.gi@mail.life.hsbc.com.sg

HSBC Life Third Party Direct Settlement

Vehicle No:	SHC 376E (Insd veh)	Model: MAZDA 2 - 1496cc
	SMU 8798P (TP veh)	
Date of Accident/ Time:	26/05/2022	

Repair Estimate	: \$		
Final Repair Cost	: \$	5,500.00	
Loss of Use	: \$	480.00	8 days at \$ 60 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum	: \$	5,980.00	
Payee Name: ADVANCE AUTO GARAGE			
Is Third Party Workshop GIA Registered? [] YES [X] NO (Kindly indicate below)			
A) Workshop:	For Non GIA Registered	Agreed Liability <u>100</u> (%)	
B) Workshop:	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 HSBC Life and their client/tortfeasor in any manner whatsoever.
3. HSBC Life 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 (HSBC Life 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: 31/07/23

Signature of Witness / Workshop stamp (if applicable)
Name of Witness:
Date: 31/07/23

Signature of HSBC Life's surveyor & stamp / representative
Name of HSBC Life's surveyor / Representative:
Date: 31/07/2023

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

Internal

DATE: 20/3/2023
INVOICE NO.: AAGCL-277
VRN: SMU8798P



THANK YOU FOR YOUR BUSINESS