

AXA Insurance Singapore Pte Ltd

Attn: Motor Claims Department

Dear Sir / Madam,

ACCIDENT INVOLVING VEHICLE NO SKS 168 U & FBM 1680 M along Clementi Avenue 6 Junction of Clementi Loop, Singapore on 12/06/2022

We understand that you are the insurer of FBM 1680 M vehicle.

I/We wish to inform you that my/our vehicle SKS 168 U have been completed repairs to my/our satisfaction by M/s GUAN MOTOR WORKS. I/We therefore propose to claim from your as follow:

1.	Cost of Repairs	S\$	6,350.00
2.	Cost of Rental (S\$ <u>120.00</u> per day x <u>10</u> days)	S\$	1,200.00
3.	LTA Search Fee	S\$	7.49
TOTAL		SS	7,557.49

Please let us have your reply soonest possible.

Thank you.

Yours faithfully,

Chiann Koun

In the matter of an accident involving motor vehicles

SKS 168 U & FBM 1680M along Clementi Avenue 6 Junction of

Clementi Loop, Singapore on 12-06-2022

1. WARRANT TO ACT

I/We, NGUAN SOON SENG, (NRIC No.) SXXXX 329E
of BLK 728 Clementi West Street 2 #04-376 Singapore 120728
hereby authorise M/s GUAN MOTOR WORKS to act on my/our
behalf in respect of the above matter.

2. AUTHORITY

- a) I/We hereby authorise you to commence legal proceedings in my/our name(s) and to take instructions from my car-repairers who I/we have appointed as my/our agent(s) in respect of my/our claim.
- b) I/We hereby authorise you to pay to yourselves all Party and Party costs you may at any time receive in connection with the above matter and confirm that there will be no need to pay the same into the Client(s)'s Account with your Bankers
- c) I/We hereby further authorise you to release all proceeds of settlement monies received by you (after deducting of your legal costs) to my repairers
M/s GUAN MOTOR WORKS in settlement of
my outstanding bill/account with them.
- d) I/We only wish to be informed of my/our case when it is necessary on your part.
I/We hereby direct you to keep my car-repairers informed of all matters relating to my claim, as and when it is necessary to do so.
- e) I/We hereby authorise you to deposit in your Firms' client's account any cheques received by you and made in my/our firm's name.
- f) I/We have read and understood the above.



(Signature)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBM 1680M (Insd veh)	Model: HONDA FREED 1.5L E AT
	SKS 168U (TP veh)	
Date of Accident/ Time:	12/06/2022	

Repair Estimate	: \$	9,488.84	
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 (Global Sum)	: \$	7,250.00	
Payee Name : Guan Motor Works			
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:			

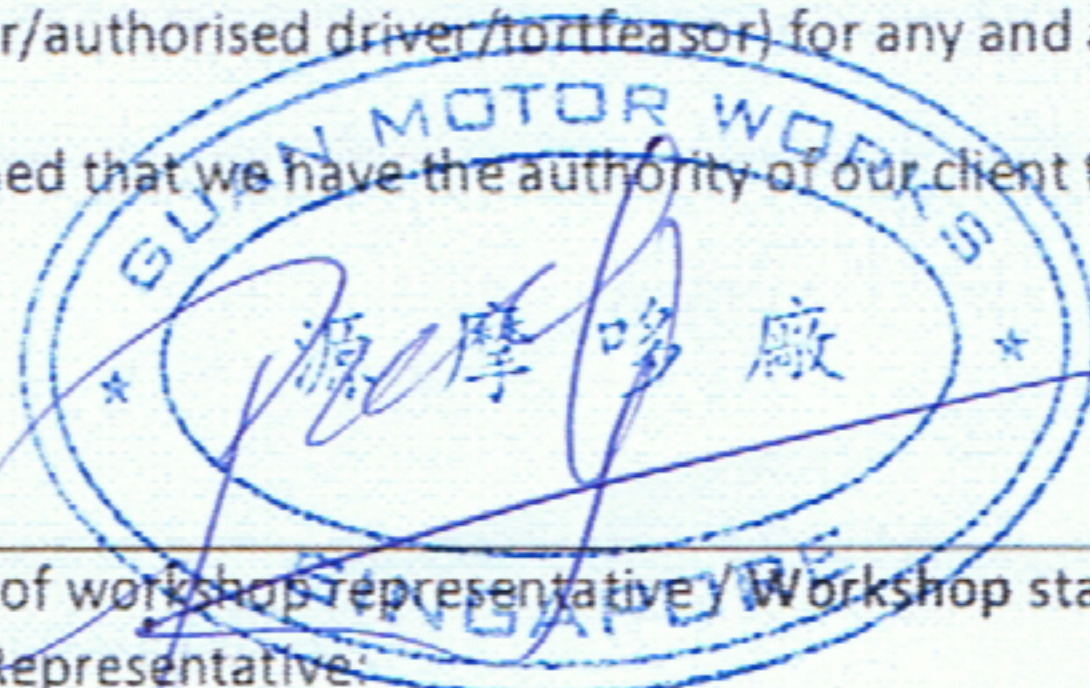
NOTE:

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: 13/10/2022

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: Pang Chiann Koun
Date: 13-10-2022

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: 14/10/2022

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 081026-00E

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 H/P: 9742 6003

Messrs: NGUAN SOON SENG

Invoice No: **5285**

Date : 08-09-2022

HONDA FREED - SKS 168 U

Lump sum repair cost inclusive of spare parts and labour charges.

\$ 6,350.00

Dollars Six thousand Three hundred Fifty only.



E.&O.E.

长彭

LONG PANG LEASING

Company Regn. No: 53255773E
Block 324 Ang Mo Kio Avenue 3 #02-1886 Singapore 560324
Email: longpang53@gmail.com
HP: 9047 2789

OFFICIAL RECEIPT

No 0673

Received from

NGUAN Sook SEN

The sum of Dollars

One Thousand Two hundred only

Date: 22-6-22

Being payment for

SLC 2587C 13-6-22 to 22-6-22 Ref # 0826

\$ 1,200 / ~~xx~~

Cash / Cheque No.:

for LONG PANG LEASING


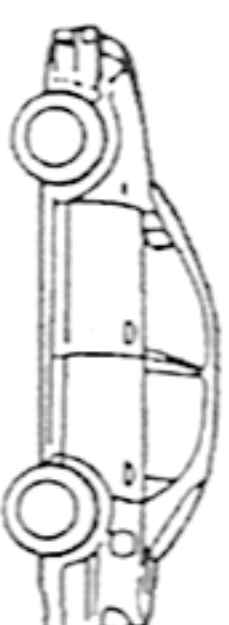
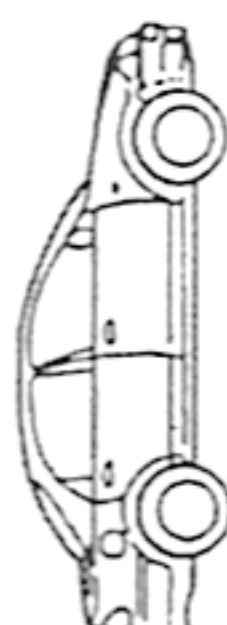

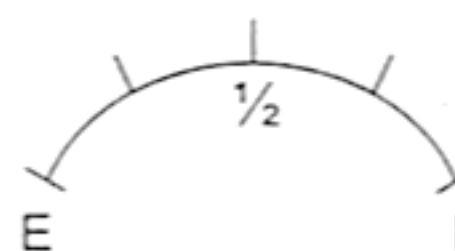
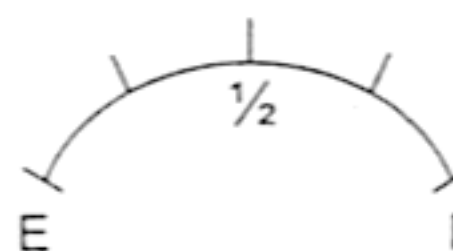
Authorised Signature

长彭 LONG PANG LEASING

Company Regn. No: 53255773E
Block 324 Ang Mo Kio Avenue 3 #02-1886 Singapore 560324
Email: longpang53@gmail.com
HP: 9047 2789

VEHICLE RENTAL AGREEMENT

Nº: 0826

HIRER'S PARTICULAR Name: (as in I/C) <u>NGUAN SOON SENG</u> NRIC / PASSPORT No: <u>3 1432329-E</u> Address (Res): <u>BLK 728 CLEMENTI WEST STREET 2 #04-376 S' 120728</u> Name & Address of Employer: _____ Occupation: _____ Driving Exp: _____ D/L No: <u>S 1432329-E</u> D/L Type: Local/International Pass Date: <u>03-10-1980</u> Date of Birth: <u>0409 1960</u> Tel: (O) _____ (R) _____ HP: <u>90091960</u>		Veh No: <u>SLC 2587C</u> Replace Veh No: _____ Mileage Out: _____ Mileage Out: _____ Make & Model <u>HONDA</u> Make & Model _____ Auto / Manual <u>VEZEL</u> Auto / Manual _____ OUT : Date <u>13/6/22</u> OUT : Date _____ OUT : Time <u>2:40pm</u> OUT : Time _____	
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) _____ NRIC / PASSPORT No: _____ D/L No: _____ D/L Type: Local/International Address (Res): _____ Tel/Hp: _____		RENTAL CHARGES Daily <u>10</u> @\$ <u>120/-</u> <u>1,200</u> 00 Weekly @\$ _____ Monthly @\$ _____ Hours @\$ _____ Others @\$ _____ CDW @\$ _____ PAI @\$ _____ Delivery Service _____ SUB-TOTAL \$ <u>1,200</u> 00	
Refundable Deposit: _____ Cash/Nets/Cheque/VISA/MC Cards No: _____ (A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>FRONT</p>  </div> <div style="text-align: center;"> <p>LEFT</p>  </div> <div style="text-align: center;"> <p>RIGHT</p>  </div> <div style="text-align: center;"> <p>REAR</p>  </div> </div>		<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>OUT</p>  </div> <div style="text-align: center;"> <p>IN</p>  </div> </div> EXTENSION _____ Collection Service _____ Misc. _____ ESTIMATED TOTAL RENTAL \$ _____ Sales Person Code: _____ Hirer is responsible for the first \$ <u>1500</u> excess for collision / damage to first part. (i.e) LONG PANG LEASING Vehicle (including windscreen) and also first \$ <u>1500</u> 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 _____	
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			

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on rental to my/our credit card.

* IMPORTANT

- ONLY PERSONS ABOVE 25 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY LONG PANG LEASING.
- IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORIZED DRIVER:
 - shall report all accidents involving the said vehicle to the Owner immediately;
 - shall take immediate steps to complete and sign Form MAR 1 (Motor Accident Report Form) a and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is report to the Owner);
 - shall report to the police within 24 hours from the occurrence, the following types of accidents:-
 - injury case;
 - non-injury case involving a Government vehicle, or damage to Government property;
 - non-injury case involving a foreign vehicle (to obtain their motor insurance policy. Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax information);
 - 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" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO LONG PANG LEASING 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>22/06</u> <u>2022</u>	<u>4.50 pm</u>					<u>[Signature]</u>

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 12 Jun 2022 / 08:55:00)

Vehicle Insurance Details

Vehicle No.:

FBM1680M

Make Description/Model:

YAMAHA / NMAX155 ABS

Insurance Company Name:

AXA INSURANCE PTE LTD

Business Transaction Reference No.:

20220613095026775003

**Please retain the business transaction reference number for Enquire Vehicle Owner
Details (if required).**

Save as PDF

OK ➔

Print

Hsiao Tong (LKKAUTO)

From: Hsiao Tong (LKKAUTO)
Sent: Wednesday, 14 September 2022 9:17 AM
To: 'Kenneth.Rodrigues@soverus.com.sg'
Subject: Claim Notification - ACCIDENT INVOLVING FBM1680M(AXA) AND SKS168U ALONG/AT CELEMNTI AVE 6 ON 12/06/2022
Attachments: Police Investigation Letter.pdf

14 Sept 2022

SOVERUS PTE LTD [By Email only]
Driver: MOHAMAD ZISHAN BIN ABDUL HALIM

Dear Sirs/ Mdm

OUR REF : CC4/ASM22005723/Kga3 // S2M044AN
YOUR REF : FBM1680M
ACCIDENT INVOLVING FBM1680M(AXA) AND SKS168U ALONG/AT CELEMNTI AVE 6 ON 12/06/2022

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third-party claim against your policy.

We have received a third-party claim(s) from SKS168U against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your rider's favour. The police investigation report reveals that your rider committed an offence of careless driving. We shall proceed to negotiate for an amicable settlement of the third party claim at best to avoid further litigation, which would escalate to even more cost.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third-party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization to confirm that the driver is allowed to drive the vehicle
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this

accident, please forward it to us immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third-party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at chewht@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | Email: chewht@lkkauto.com |

HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |

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