

# 輝陽汽車有限公司

## HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

GST Reg No. 201629438M

Date: 19/09/2022

AXA Insurance Singapore Pte Ltd

Motor Claims Department

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

**RE: ACCIDENT INVOLVING SLX8239H & SHD3136G ON 05/09/2022  
ALONG SIN MING DRIVE (NEAR BLK 442 CARPARK)**

**SETTLEMENT OF OUR CLAIM FOR SLX8239H**

Lump sum repair cost as recommended by surveyor (TP1054)	\$ 3,424.00
3 Days Loss of Use @ \$60.00 per day	\$ 180.00
Total	<u>\$ 3,604.00</u>

*\*The above claim applies only to vehicle damage and expressly exclude all personal injuries and other consequential loss.*

*Please let us have your reply soonest possible, thank you.*

Best Regards,

Marco Neo

HUI YANG MOTOR PTE LTD

DID: 64515752

Fax: 64514658

email: hui\_yang\_motor@hotmail.com

## AUTHORIZATION LETTER

TO WHOM IT MAY CONCERN

I/We, Pau Kek Sing hereby declare and agree to use the address of **Hui Yang Motor Pte Ltd**, that is at Blk 176 Sin Ming Drive, #04-09 Sin Ming Autocare Singapore 575721 in all my correspondences with any party in connection with my claim.

Arising from an accident involving my motor vehicle registration number SLX 8239H and other vehicles registration number SAD 31366 along Sin Ming Ave (Near Blk 442 Carpark) on 05/09/22.

I/We, further grant authority to Messrs **Hui Yang Motor Pte Ltd** or any of their representatives to negotiate my/our claim on my/our behalf and to execute, sign discharge voucher / indemnity forms and all necessary documents in connection with and arising of the above accident claim.

I/We wish to inform you that you could issue the cheque payment in favour of my/our repairer Messrs **Hui Yang Motor Pte Ltd**.



.....  
Signature of registered owner and/or Company's stamp



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

### HSBC Life Third Party Direct Settlement

Vehicle No:	SMD31366 (Insd veh)	Model:
	SIX8239H (TP veh)	Honda Vezel Hybrid
Date of Accident/ Time:	05/09/22 / 18:20 hrs	

Repair Estimate	: \$	9,807.96	
Final Repair Cost	: \$	3424.00	
Loss of Use	: \$	180.00	3 days at \$ 60 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum	: \$	3604.00	
Payee Name:	Hui Yang Motor Pte Ltd		
Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)			
A) Workshop:	For Non GIA Registered	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:

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: Marco Neo  
Date: 17/04/23

Signature of Witness / Workshop stamp (if applicable)  
Name of Witness: Bel  
Date: 17/04/23

Signature of HSBC Life's surveyor & stamp / Representative  
Name of HSBC Life's surveyor / Representative:  
Date: 19/04/2023

# HUI YANG MOTOR PTE LTD

**Bill To:**

**AXA Insurance Singapore Pte Ltd**  
Motor Claims Department  
8 Shenton Way  
#27-01 AXA Tower  
Singapore 068811

**TAX INVOICE**

**TP Claim Invoice No: TP1054**  
**Bill Date: 19/09/2022**

	Description	Amount
	Date of Accident : <b>05/09/2022</b> Owner : <b>PAU KEK SING</b> Vehicle No : <b><u>SLX8239H</u></b> Make & Model : <b><u>HONDA VEZEL HYBRID</u></b>	
	<u>Lump Sum repair cost as recommended by surveyor</u>	\$ 3,200.00
	Sub-Total :	\$ 3,200.00
	Add 7% GST :	\$ 224.00
	Total Amount SGD :	<b>\$ 3,424.00</b>

Reg No.:201629438M

GST No:201629438M

**HUI YANG MOTOR PTE LTD**



\_\_\_\_\_  
Authorised Signature

**Hui Yang Motor Pte Ltd**

Sin Ming Autocare Blk 176 Sin Ming Drive

#04-02 Singapore 575721

Email: hui\_yang\_motor@hotmail.com

H/P: 98625891 Office: 64515752 Fax : 64514658



### Paynow Authorisation Form

This form must be completed and returned to HSBC Life (Singapore) Pte. Ltd. Payment will be credited directly into the policyholder/claimant's designated bank account stated below. The Policyholder/claimant has to complete **all fields** of this form and return to:

**HSBC Life (Singapore) Pte. Ltd.**  
**Robinson Road P.O. Box 1094**  
**Singapore 902144**

<b>Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)</b>	
Name of Policyholder/Claimant :	<i>Hui Yang Motor Pte Ltd</i>
Contact Person :	<i>Maro Neo</i>
Contact Number :	<i>98625891</i>
Email Address :	<i>hui-yang-motor@hotmail.com</i>
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	

<b>Payee's Paynow Details (Please tick <u>only 1 option</u> &amp; provide the Paynow Details)</b>	
Payee's name as per bank account :	<i>Hui Yang Motor Pte Ltd</i>
<input type="checkbox"/> Mobile :	
<input type="checkbox"/> NRIC :	
<input checked="" type="checkbox"/> UEN :	<i>201629438M</i>

I/We hereby authorise HSBC Life (Singapore) Pte. Ltd. to credit the payment due to me/us to the bank account linked to above Paynow account, and undertake to return to HSBC Life immediately upon demand any sum which shall not be so credited into such Paynow account. I/We agree that HSBC Life shall be fully absolved of any liability to pay me/us such insurance payout once such amounts are credited into the bank account linked to above Paynow account.

This authorisation shall continue in force until I/we have expressly revoked it by notice in writing delivered to you. In the event of a change of PayNow details, I/we shall inform you in writing 30 days in advance before the change.

In connection with my/our and/or the claimant's claims, I/We give consent for HSBC Life (Singapore) Pte. Ltd. ("HSBC Life") and its representatives or agents to collect, use, store, transfer and/or disclose the information (including that provided by sources other than myself) concerning me/us and/or the claimant, to or with all such persons (including any member of the HSBC Group or any third party service provider, and whether within or outside of Singapore and the Policyholder when claiming under a Group Policy) for the purpose of enabling HSBC Life and its representatives or agents to provide me/us and/or the claimant (where applicable) with services required of an insurance provider, including the evaluating, processing, administering and/or managing my/our and/or the claimant's claims or the Policyholder Group Policy(ies) with HSBC Life (as the case may be), and for the purposes set out in the Data Use Statement which can be found at [www.hsbclife.com.sg](http://www.hsbclife.com.sg). ("Purposes").

Authorised Signature & Company Stamp (as per bank records)

*17/04/23*  
Date (DD/MM/YYYY)



## GIRO Credit Authorisation Form

This form must be completed and returned to HSBC Life (Singapore) Pte. Ltd. Payment will be credited directly into the policyholder/claimant's designated bank account stated below. The policyholder/claimant's has to complete all fields of this form and return to:

HSBC Life (Singapore) Pte. Ltd.  
Robinson Road Post Office  
P.O. Box 1094  
Singapore 902144

Policyholder/Claimant's Details (To be completed by the Policyholder/Claimant)	
Name of Policyholder/Claimant:	Hui Yang Motor Pte Ltd
Contact Person:	Marco Neo
Contact Number:	98625891
Email Address:	hui-yang-motor@hotmail.com
(An auto-prompt email from the bank will be sent to this email address once the payment has been credited)	
Particulars of Policyholder/Claimant's Bank Account	
Name of Bank:	DBS Bank
Bank Code:	7171
Bank Branch Code:	015
Bank Account Number:	015 905 0084
Name of Account Holder:	Hui Yang Motor Pte Ltd

I/We hereby authorise HSBC Life (Singapore) Pte. Ltd. to credit the payment due to me/us to the above bank account, and undertake to return to HSBC Life immediately upon demand any sum which shall not be so credited into such bank account. I/We agree that HSBC Life shall be fully absolved of any liability to pay me/us such insurance payout once such amounts are credited into above bank account.

This authorisation 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.

In connection with my/our and/or the claimant's claims, I/We give consent for HSBC Life (Singapore) Pte. Ltd. ("HSBC Life") and its representatives or agents to collect, use, store, transfer and/or disclose the information (including that provided by sources other than myself) concerning me/us and/or the claimant, to or with all such persons (including any member of the HSBC Group or any third party service provider, and whether within or outside of Singapore and the Policyholder when claiming under a Group Policy) for the purpose of enabling HSBC Life and its representatives or agents to provide me/us and/or the claimant (where applicable) with services required of an insurance provider, including the evaluating, processing, administering and/or managing my/our and/or the claimant's claims or the Policyholder Group Policy(ies) with HSBC Life (as the case may be), and for the purposes set out in the Data Use Statement which can be found at [www.hsbclife.com.sg](http://www.hsbclife.com.sg) ("Purposes").

  


Authorised Signature & Company Stamp (as in bank records)

17/04/23  
Date