

Our Reference: **SLD9905S/7022033**  
Your Reference: **YN6738X**

**By Email / Mail**

**08/03/2023**

**LONPAC INSURANCE BHD C/O LKK AUTO CONSULTANTS**  
Attn: Third Party Claim Department -

**ACCIDENT INVOLVING SLD9905S & YN6738X ON 28 Dec 2023.**

Dear Officer,

We wish to inform you that the repairs to our client vehicle have been completed.

We hereby submit the claims as follows:

<b>Details</b>	<b>Remarks</b>	<b>Amount (SGD)</b>
Cost of Repairs		\$6,183.60
Loss Of Use	\$100.00 x 3 days	\$300.00
Others		
<b>TOTAL</b>		<b>\$6,483.60</b>

Kindly let us have your offer to [Christine.yow@wearnes.com](mailto:Christine.yow@wearnes.com)

Your soonest reply is much appreciated. Thank you.



Yours faithfully  
Christine Yow  
D (65) 6430 4899  
Wearnes Automotive Pte Ltd  
Bodyshop and Paint Division  
28 Leng Kee Road,  
Singapore 159104

This is a computer generated printout, no signature is required.

## (PAYMENT BREAKDOWN)

Vehicle No	:	SLD99055	Model	:	DISCOVERY SPORT
	:	YN6738X			
Date of Accident	:	28/12/2022			

Global Sum Settlement	:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Liability	:	100 %	(Agreed/Assessed)

Repair Estimate	:	\$7,753.55	
Final Repair Cost	:	\$6,183.60	
Loss of Use	:	\$300.00	3 days at \$100 per day
Rental (if any)	:	\$	days at \$ (incl of GST) per day
Others	:	\$	
	:	\$	
	:	\$	
	:	\$	
Final Settlement Sum	:	\$6,483.60	

Remarks: \_\_\_\_\_

### Payment Instruction: Payee's Breakdown

1)	WEARNES AUTOMOTIVE PTE LTD	:	\$6,483.60
2)		:	\$
3)		:	\$
4)		:	\$

## SERVICE TAX INVOICE

0 - L00002 SL: LONPAC INSURANCE BHD  
 LONPAC INSURANCE BHD  
 300 BEACH ROAD  
 #17-04/07 THE CONCOURSE  
 SINGAPORE 199555

GST Reg.No:M28920628X  
 Inv.No. . : B&P 7022033 Page 1  
 Inv.date. : 14/02/2023  
 WIP No. . : 56691  
 Veh.In/Out: 08/02/2023 11/02/2023  
 \*Tel.No. . : 62507388  
 Reg.No. . : SLD9905S  
 Reg.date . : 01/07/2016  
 Mileage .. : 120,107  
 Chassis No: SALCA2AG2GH564495

Closed by .... : Juan Paulo Bongon Ba  
 Svc Consultant : ACC  
 Remarks ..... : Mr Azmi Bin Saaid

Parts/Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
802	TO REPLACE SIDE MIRROR ASSY	0		1300.00	0		1,300.00	S
LH								
800	TO SPRAY RH SIDE MIRROR COVER,	0		1700.00	0		1,700.00	S
	RH A PILLAR, RH F DOOR							
280	TO CHECK WIRING INCLUDE	0		621.00	0		621.00	S
	RESETTING OF ALL ELECTRICAL							
	MODULES							
LR072953	MIRROR - REAR VIEW -	1.0	EA	1007.50	10		906.75	S
LR048354	COVER - MIRROR HOUSI	1.0	EA	229.20	10		206.28	S
LR048352	LAMP - EXTERIOR MIRR	1.0	EA	214.10	10		192.69	S
LR015051	MIRROR MOTOR LH MEMO	1.0	EA	349.80	10		314.82	S
LR048360	GLASS - REAR VIEW OU	1.0	EA	317.20	10		285.48	S
LR061157	LAMP - EXTERIOR MIRR	1.0	EA	220.60	10		198.54	S

				Gross Total.	5,725.56
Labour Total	3,621.00	Net.....		5,725.56	
Parts Total	2,104.56	GST @ 8.0%		458.04	
Package Total	0.00	Total.....		6,183.60	
				Paid.....	0.00
				Please Pay..	6,183.60

GST: S=StdRated; O=OutOfScope; Z=ZeroRated; P=PreviousRate  
 Enquiries must be lodged within 14 days from the invoice date  
 This is a computer generated invoice. No signature is required.


## AUTHORIZATION TO ACT

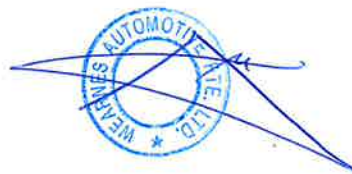
I, AZMI BIN SAAD ("the third party claimant")  
of 21 JALAN PUNAI (address),  
owner of SLD9905S (vehicle no.) hereby authorize  
WEARNES AUTOMOTIVE PTE LTD  
("the workshop") to act for me with respect to my claim for repair costs and / or rental  
and / or loss of use ("claim") for my vehicle no. SLD9905S that was  
damaged pursuant to the accident which occurred on 28/12/22 (date) along  
501 AIRPORT ROAD, PAYA LEBAR OPEN CARPARK (location)  
involving vehicle no. YN6738X ("the accident").

I further authorize the workshop to sign the discharge voucher on my behalf to settle  
my above mentioned claim in a manner that they deem fit and the workshop is further  
authorized to receive payment further to settlement of my claim with payment  
cheque/s being made in favour of the workshop.

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

Dated this 28 day of 12 (month) 2022 (year)

  
Signed by "the third party claimant"  
Policyholder's Signature only  
& Company Chop – (if registered under a company)



Signed by "the workshop"

WIP  
56691  
LOW PAC-TP

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date of Submission	28/12/2022 16:35 (SGT)
Reported by	Both
Date of Accident	28/12/2022 11:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	501 AIRPORT ROAD, PAYA LEBAR OPEN CARPARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLD9905S

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AZMI BIN SAAID
NRIC No	SXXXX657J
Email Address	imansyaqil@yahoo.com.sg
Mobile Phone No	(Phone) +65-98622930
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	LandRover
Model	DISCOVERY SPORT 2.0 SI4 HSE 7STR S/R
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2000

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100473958-06

#### DRIVER

Name of Driver	AZMI BIN SAAID
NRIC No	SXXXX657J
Date Of Birth	18/01/1968
Occupation	Indoor

Date Of Driving Pass	18/02/1997
Driving experience	25 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98622930
Alt. Phone Number	-
Email Address	imansyaqil@yahoo.com.sg
Address	21 JALAN PUNAI
Address complement	-
Postcode	418800
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACHMENT

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN6738X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SHIANG KOK LIANG
NRIC No	-1

Contact Number	(Phone) +65-93464989
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Lonpac Insurance Bhd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### WITNESS DETAILS

##### WITNESS 1

Name	ISMAIL IBRAHIM (PLA GUARDHOUSE)
Phone	-
Email	-

w.p  
56691  
LOW PAC - TP

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorized Reporting Centre ("ARC") for filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorized Driver.
4. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

### ACCIDENT STATEMENT

Date and Time of Accident	Date: 28/12/28 Time: 11:30
Exact Location of Accident	501 AIRPORT ROAD, PAYA
DETAILS OF OWN VEHICLE	VEBAE (539931) OPEN CABERK
Vehicle Registration Number	SLD99055

### INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert)	AZMI BIN SAAD
Personal Identification - NRIC (Singaporean/PR)	S68006573
- FIN/Passport Number	
- Not Applicable	

### VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer <u>VE</u> Model <u>D.SPORT</u>
Type of Vehicle*	<input type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input checked="" type="radio"/> Others, _____
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If No, Please select: <input checked="" type="radio"/> Third Party <input checked="" type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle

### INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company *	ALG
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	2100473959-06
Motor CI	

### DRIVER

	<input checked="" type="radio"/> Same as Insured above
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Date of Birth	18 dd/ 1 mm/ 1968
Driving Date Pass	18 dd/ 2 mm/ 1997
Year of Driving Experience	Year(s) Month(s)
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	98622930



Address of Driver	21 JALAN PUNAT
Email Address	Postcode (418800)
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own	<input checked="" type="radio"/> Yes <input type="radio"/> No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	COLLIDED INTO PARK VEHICLE
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____

#### OTHER INFORMATION

Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Was any other vehicle or property damaged?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was there any video captured by Car Camera?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Number of Passengers (Including Driver)	0

#### DETAILS OF POLICE ACTION

Was the Accident reported to the Police?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. _____ Fax No. _____
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)

#### DETAILS OF OTHER VEHICLE / PROPERTY 1

Vehicle Registration Number	YN 6738X
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	SHIAK KOK LIANG
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	93464989
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### **8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that :

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.


(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date &  
Time 28/12/22  
**Sketch Plan**

\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date  
& Time


  
Witnessed by Reporting Centre  
Personnel

**Describe Circumstances of the Accident**

On 28/12/22 at around 1130 hr, a DTL lorry hit the side mirror of my car while parked. Pls refer to the accident report submitted by our company security officer who witnessed the accident.

**Declaration**

I/We declare the foregoing particulars are true in every respect.

 28/12/22  
Policyholder's Signature / Date & Time

\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

Dear Sir,

Today 28/12/2022 at about 1130hrs while driving Buggy along one way road at Engines Building Spotted 01 yellow lorry belongs to DHL registration number YN6738X .While the lorry was moving along the said road,the lorry hit the left side mirror of 01 staff vehicle registration no SLD9905S. Immediately I horn the lorry to stop.I'll informed the driver that he had hit the said car left side mirror while he was driving along the one way road. I called SE Rizal on this.He instructed me to find out the owner of the said vehicle via LPRS at Guardhouse.I'll managed to cal the car owner and ask him to proceed to the scene.After which he and the lorry driver met up and they will settle among themselves. Below is both the lorry driver and car owner particulars.

1. Car Owner

Name : Azmi Bin Said

I/D : 80201590

Veh No : SLD9905S

H/P no ; 98622936

2. DHL Driver

Name : Shiang Kok Liang

I/C : 606B

Veh No : YN6738X

H/P no : 93464989

Regards,

SGT (APF) 9929 Ismail Ibrahim

PLA Guardhouse

## Juan Paulo Bongon Baldoz

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**From:** Rasul (LKKAUTO) <Rasul@lkkauto.com>  
**Sent:** Friday, 17 February 2023 9:43 am  
**To:** Juan Paulo Bongon Baldoz  
**Cc:** Hsiao Tong (LKKAUTO)  
**Subject:** Re: TP FINALIZED: Direct Settlement involving vehicle SLD9905S (Ours) & YN6738X (Your Insured) DOA: 28/12/2022

Hi Paulo,

We will be advising our principal a cost of repair P/P \$5,725.56/- with 03 days of repair subject to their approval.

Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



*Save the Earth. Print only when necessary.*

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**From:** Juan Paulo Bongon Baldoz <[juan.paulo@wearnes.com](mailto:juan.paulo@wearnes.com)>  
**Sent:** Thursday, 16 February 2023 5:54 pm  
**To:** Rasul (LKKAUTO) <Rasul@lkkauto.com>  
**Cc:** Hsiao Tong (LKKAUTO) <[chewht@lkkauto.com](mailto:chewht@lkkauto.com)>  
**Subject:** TP FINALIZED: Direct Settlement involving vehicle SLD9905S (Ours) & YN6738X (Your Insured) DOA: 28/12/2022

Dear Rasul,

Kindly check & confirm finalized amount \$5,725.56 before GST (part by part). 3 days repair.

Attached before paint & after repair photos.

Thank you

**Paulo**  
Service Consultant  
Bodyshop & Paint



**Wearnes Automotive Pte Ltd**  
45 Leng Kee Road Singapore 159103  
M (65) 98270463  
[www.wearnesauto.com](http://www.wearnesauto.com) | [juan.paulo@wearnes.com](mailto:juan.paulo@wearnes.com)

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If you have received it in error, please notify us immediately by reply email and then delete this message from your system.*

## Juan Paulo Bongon Baldoz

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**From:** Juan Paulo Bongon Baldoz  
**Sent:** Thursday, 16 February 2023 5:54 pm  
**To:** Rasul (LKKAUTO)  
**Cc:** Hsiao Tong (LKKAUTO)  
**Subject:** TP FINALIZED: Direct Settlement involving vehicle SLD9905S (Ours) & YN6738X (Your Insured) DOA: 28/12/2022  
**Attachments:** SLD9905S FINALIZED TP (LONPAC).pdf; B (1).jpeg; B (2).jpeg; B (3).jpeg; B (4).jpeg; B (5).jpeg; A (1).jpeg; A (2).jpeg; A (3).jpeg; A (4).jpeg; A (5).jpeg; A (6).jpeg; A (7).jpeg; A (8).jpeg  
**Importance:** High  
**Follow Up Flag:** Follow up  
**Flag Status:** Flagged


Dear Rasul,

Kindly check & confirm finalized amount \$5,725.56 before GST (part by part). 3 days repair.

Attached before paint & after repair photos.

Thank you

**Paulo**  
Service Consultant  
Bodyshop & Paint

  
**WEARNES** **Wearnes Automotive Pte Ltd**  
45 Leng Kee Road Singapore 159103  
M (65) 98270463  
[www.wearnesauto.com](http://www.wearnesauto.com) [juan.paulo@wearnes.com](mailto:juan.paulo@wearnes.com)

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If you have received it in error, please notify us immediately by reply email and then delete this message from your system.  
Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.*

**From:** Hsiao Tong (LKKAUTO) <chewht@lkkauto.com>  
**Sent:** Monday, 9 January 2023 3:15 pm  
**To:** Juan Paulo Bongon Baldoz <juan.paulo@wearnes.com>  
**Cc:** assignments <assignments@lkkauto.com>; GERALD POH WEE BIN <geraldpoh@lonpac.com>; Admin A <admin-a@lkkauto.com>  
**Subject:** RE: Direct Settlement involving vehicle SLD9905S (Ours) & YN6738X (Your Insured) DOA: 28/12/2022

WITHOUT PREJUDICE

DEAR SIRs,

We refer to the above matter.

## Juan Paulo Bongon Baldoz

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**From:** Hsiao Tong (LKKAuto) <chewht@lkkauto.com>  
**Sent:** Monday, 9 January 2023 3:15 pm  
**To:** Juan Paulo Bongon Baldoz  
**Cc:** assignments; GERALD POH WEE BIN; Admin A  
**Subject:** RE: Direct Settlement involving vehicle SLD9905S (Ours) & YN6738X (Your Insured)  
DOA: 28/12/2022

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

WITHOUT PREJUDICE

DEAR SIRS,

We refer to the above matter.

Please be informed that basing on the accident statements submitted by both parties, the liability is clear / under BOLA (subject to BOLA guideline settlement) and shall proceed with direct settlement for the above mentioned case.

Please note that this e-mail is on without prejudice basis which does not amount to an authorisation of repair to your client's vehicle and admission of any liability to our Insured's part. The final repair cost is subjected to the consistency of the damages according to the nature of the accident. And the days of LOU/ LOR will be based on the number of days of repair as recommended by our surveyor and approved by our principal.

Thank you.

"Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement."

Best Regards,

**Hsiao Tong, Chew (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742-3197 | Email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) |

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

S(408933)