

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1712-058

Your Ref : FBF4085Z, SLJ7018J, SGU3032U

Date : 05.April 2018

AIG ASIA PACIFIC INSURANCE

Dear Sir/Madam,

**ACCIDENT INVOLVING SHF0513K AND FBF4085Z, SLJ7018J, SGU3032U ON 06/12/17
08:40 AM ALONG PIE (PAYA LEBAR WAY)**

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	4,547.50
2.	Loss of Rental for ____ days @ \$_____ per day	\$	304.38
3.	Loss of Income for ____ days @ \$_____ per day	\$	150.00
4.	LTA Search Fee	\$	5.35
5.	Survey Fee	\$	0.00
	Total	\$	5,007.23

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC3/AIG17023449/Kpa3

23 MAY 2018

JOHANN MOHAMED SALLEH MOSBIT
BLK 902 JURONG WEST ST 91
#12-113
SINGAPORE 640902

Dear Sir/Madam,

ACCIDENT INVOLVING FBF 4085Z & SHF 513K ON 06/12/2017

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

We have received a claim from SHF 513K against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

CHEW HSIAO TONG

Case Handler

DID: 6742 3197

FAX: 6741 4108

Email: chewht@lkkauto.com

c.c. AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

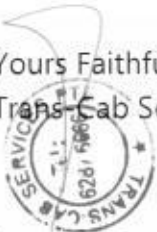
We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHF0513K and FBF4085Z, SLJ7018J, SGU3032U along PIE (PAYA LEBAR WAY) on 06/12/17 08:40 AM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 5 (day) of April 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

"We/I, **Trans-Cab Auto Services Pte Ltd** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$5,000.00** (Global Sum) for vehicle no. **SHF 513K** that was damaged pursuant to the accident which occurred on **06/12/2017** (date) along **PIE** (location) involving vehicle no/s **FBF 4085Z**. This is pursuant to the inspection conducted on **07/12/2017** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **Trans-Cab Services Pte Ltd** ("the third party claimant") of vehicle no. **SHF 513K** make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SHF 513K** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this 19 (day) of JUNE (month) 2018 (year)



KSC

Signed by appointed surveyor

Signed by "the workshop" (with chop)

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666**Fax:** 6287 7764**Co. Reg. No.:** 201019626G**GST Reg. No.:** 201019626G**Tax Invoice / Debit Note**

TO: AIG ASIA PACIFIC INSURANCE PTE LTD 78 Shenton Way #07-16 CHARTIS Building 079120 Singapore ATTENTION:	INVOICE NO. : INV1712-320 DATE : 29. December 2017 REFERENCE NO : AAD1712-058 TERMS : Net 30 Days DUE DATE : 28. January 2018 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHF0513K;DOA 06.12.17(LUMP SUM-17)	1	4,547.50	4,547.50

Total SGD Excl. GST : 4,250.00**7% GST :** 297.50****** FOUR THOUSAND FIVE HUNDRED FORTY SEVEN AND FIFTY SGD ONLY************Total SGD Incl. GST :** 4,547.50

1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"

2) Please quote our Invoice Number during payment.

3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.

4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

05 April, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 06/12/17 08:40 AM at PIE (PAYA LEBAR WAY)

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHF0513K. The taxi was hired to SOH CHIN LIANG PETER a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$101.46 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

06-12-2017

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD1712-058	Accident Date 06-12-2017
6/12/2017 13:00	8/12/2017 18:00	SHF0513K

Yours Faithfully,

Trans-Cab Services Pte Ltd**Jasmine Tan****General Manager**

Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
* FBF4085Z	06 Dec 2017 / 08:40:00	AIG ASIA PACIFIC INSURANCE PTE. LTD.
SLA6087M	05 Dec 2017 / 22:37:00	LIBERTY INS P L

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**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/65337/2017
Date : 13 February, 2018

ROYHANN MOHAMED SALLEH, MOSBIT
BLK 550A SEGAR ROAD
#09-612
SINGAPORE 671550

Dear Sir/Madam

**ACCIDENT INVOLVING FBF4085Z, SGU3032U, SHF513K AND SLJ7018J ON 06.12.2017 AT 0833
HRS, ALONG PAN ISLAND EXPRESSWAY 21.2KM**

I refer to the above accident.

2. Please be informed that we have completed our investigations which shows that the driver of SLJ7018J has committed an offence of Driving without reasonable consideration for other persons using the road under Section 65(b) Road Traffic Act, Chapter 276. Action has been initiated against the driver for the said offence.
3. If you have any queries, please contact the Investigation Officer, Syed Zayid Muhammad at telephone number 6547 6394.

Yours faithfully

SITI AFIQAH
FOR HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE