

**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 : AAD1712-096

Your Ref : SGE1339H

Date : 06.February 2018

**AIG ASIA PACIFIC INSURANCE**

Dear Sir/Madam,

**ACCIDENT INVOLVING SHF0515E AND SGE1339H ON 11/12/17 03:25 PM ALONG WEST COAST MARKET SQUARE CARPARK**

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)	\$	2,782.00
2.	Loss of Rental for <u>3.5</u> days @ \$ <u>101.46</u> per day	\$	253.65
3.	Loss of Income for <u>3.5</u> days @ \$ <u>50</u> per day	\$	125.00
4.	LTA Search Fee	\$	5.35
5.	Survey Fee	\$	0.00
	Total	\$	3,166.00

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](mailto: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) 67414108

**Our Ref: CC3/AIG17023648/Kea3**

15 JAN 2018

**LAU CHEE MENG PATRICK**  
2C WEST COAST WALK  
SINGAPORE 127138

Dear Sir/Madam,

**ACCIDENT INVOLVING SGE 1339H AND SHF 515E ON 11/12/2017**

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

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,

Asher

Case Handler

DID: 6841 6051

FAX: 6741 4108

Email: [Ashersng@lkkauto.com](mailto:Ashersng@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 SHF0515E and SGE1339H along WEST COAST MARKET SQUARE CARPARK on 11/12/17 03:25 PM.

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 6 (day) of February 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\$2,782.00 (Repair Cost), S\$378.65 (Loss of Use/Rental), S\$5.35 (Disbursement) for vehicle no. SHF 515E that was damaged pursuant to the accident which occurred on 11/12/2017 (date) along WEST COAST MARKET SQUARE CARPARK (location) involving vehicle no/s SGE 1339H.

This is pursuant to the inspection conducted on 12/12/2017 (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 515E 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 515E (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 23 (day) of 02 (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.** : INV1801-216  
**DATE** : 31. January 2018  
**REFERENCE NO** : AAD1712-096  
**TERMS** : Net 30 Days  
**DUE DATE** : 2. March 2018  
**PAGE** : 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHF0515E;DOA 11.12.17(LUMP SUM-18)	1	2,782.00	2,782.00

**Total SGD Excl. GST :** 2,600.00  
**7% GST :** 182.00  
**Total SGD Incl. GST :** 2,782.00

**\*\*\*\* TWO THOUSAND SEVEN HUNDRED EIGHTY TWO SGD ONLY \*\*\*\***

- 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

06 February, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 11/12/17 03:25 PM at WEST COAST MARKET SQUARE CARPARK

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. SHF0515E. The taxi was hired to NEO GEK SENG 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

11-12-2017

Dear Sir/Madam,

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

Date In	Date Out	Vehicle No.
<b>Accident No.</b>	AAD1712-096	<b>Accident Date</b> 11-12-2017
11/12/2017	13/12/2017	SHF0515E

**Yours Faithfully,****Trans-Cab Services Pte Ltd****Jasmine Tan****General Manager**

## Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
SDX1234L	09 Dec 2017 / 08:24:00	TOKIO MARINE INSURANCE SINGAPORE LTD
CB7052H	09 Dec 2017 / 20:15:00	NTUC INCOME INS CO-OP LTD
SJV7802Y	09 Dec 2017 / 20:45:00	SOMPO INSURANCE SINGAPORE PTE. LTD.
GZ5980T	11 Dec 2017 / 02:30:00	NTUC INCOME INS CO-OP LTD
SGE1339H	11 Dec 2017 / 15:25:00	AIG ASIA PACIFIC INSURANCE PTE. LTD.





Singapore Post Limited  
(Reg. No. 190201623M)  
10 Eunos Road 8  
A08-30 Singapore Post Centre  
Singapore 408600

Tel : 1605  
Fax : 6842 5114  
To check delivery status or to raise an enquiry  
on your registered article(s), please visit  
www.singpost.com

## POSTING RECEIPT FOR REGISTERED ARTICLE(S)

### NOTES:

- Separate forms are to be used for Insured and Non-Insured Registered Article.
- Please provide all information required and produce this receipt for all enquiries.
- \* Please tick where applicable. It shall be assumed no Advice of Receipt (AR) is required or delivery by air is requested if relevant \* is left blank.
- Please indicate the return address on the item(s) to ensure prompt return in event of non-delivery to the addressee(s).
- Please post item(s) at the post office counter according to the sequence stated below.

1. Name & Address of Addressee LAU CHEE MENG PATRICK 2C WEST COAST WALK SINGAPORE 127138		For Official Use Only (Item numbers are printed in order of posting at counter)	
AR* : ( ) Y ( ) N	By* : ( ) AIR ( ) SUR	RA TSN Ref: 1926/004/00059	
Insurance* : ( ) Y \$	( ) N	Date : 04 Jan 2018	
Contents:		RA No: RC26122068556	
AR* : ( ) Y ( ) N	By* : ( ) AIR ( ) SUR		
Insurance* : ( ) Y \$	( ) N		
Contents:			
2. Name & Address of Addressee OL VEH: SGE 1339H / TP VEH: SHF 515E			

### Sender's Agreement

I have read, understood and agreed to the terms and conditions of posting aforesaid. I accept the maximum liability payable for Registered Mail Service and certify that all information provided by me is true and the item(s) does not contain any hazardous or prohibited item(s).

P116

09/2014

SINGAPORE POST  
MACPHERSON RD  
GST Reg. Add: SINGAPORE POST CENTRE  
10 EUNOS ROAD 8  
SINGAPORE 408600  
GST Reg. No : M2-0105651-9  
Date: 04 Jan 2018 Time: 10:40:46

Description Amount(\$\$) GST@7%

Ref. No: PSL01/1926/004/0052

Postage Label

LOCAL

3 X 2.54 7.62 0.50

SUB TOTAL 7.62 0.50

TOTAL AMOUNT 7.62  
GST COLLECTED BY SINGPOST 0.50

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\*Exempt

+Out of Scope

\*\*Supplier Item

Price inclusive of 7% GST where applicable

I have checked & confirmed the product is visually good, functional & performed within expectation.