

Joy Irene (LKKAuto)

From: Hwang Shiang Yi <shiangyi.hwang@sg.cntaiping.com>
Sent: Wednesday, 8 August 2018 2:19 PM
To: Joy Irene (LKKAuto); Admin A
Subject: RE: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

Dear Joy,

Please proceed offer the sum of \$5,436.77.

Thanks & Regards,

Hwang Shiang Yi
Motor Division
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
Direct (65) 6389 6541
Fax (65) 6224 7175 /62247478
Website :www.sg.cntaiping.com
Email :claimsdept@sg.cntaiping.com
shiangyi.hwang@sg.cntaiping.com



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From: Irene Tay
Sent: Wednesday, 8 August, 2018 10:54 AM
To: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>; Hwang Shiang Yi <shiangyi.hwang@sg.cntaiping.com>
Cc: Chee So Chow <sochow.chee@sg.cntaiping.com>
Subject: RE: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

SY,

Please assist to revert.

Thank you.

Irene Tay
Executive

Claims Department (Motor Division)

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6192

Fax (65) 62247478/62247175

Email: claimsdept@sg.cntaiping.com

www.sg.cntaiping.com



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From: Joy Irene (LKKAuto) [<mailto:JoyIrene@lkkauto.com>]

Sent: Wednesday, 8 August, 2018 10:13 AM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Irene Tay <irene.tay@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>

Subject: RE: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

Dear Ms. Irene,

Kindly advise mandate on our approval request sent on 25/07/18.

Thank you.

Best Regards,

Joy Irene | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108

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

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From: Joy Irene (LKKAuto)

Sent: Tuesday, 31 July 2018 2:46 PM

To: 'Claims Dept of CTI' <claimsdept@sg.cntaiping.com>; Irene Tay <irene.tay@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>

Subject: RE: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

Dear Ms. Irene,

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Thank you.

Best Regards,

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DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108

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From: Claims Dept of CTI [<mailto:claimsdept@sg.cntaiping.com>]

Sent: Thursday, 26 July 2018 10:04 AM

To: Irene Tay <irene.tay@sg.cntaiping.com>; Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>

Subject: FW: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

Irene

Please assist to look into the mater.

Best Regards

Alfred Toh

Senior Executive

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

DID: +65 6389 6183

FAX: +65 6224 7478/6224 7175

Email: claimsdept@sg.cntaiping.com

alfred.toh@sg.cntaiping.com

www.sg.cntaiping.com



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From: Joy Irene (LKKAuto) [mailto:JoyIrene@lkkauto.com]
Sent: Wednesday, July 25, 2018 10:48 AM
To: Alfred Toh <alfred.toh@sg.cntaiping.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: CTI: SNM18D02067C02/6 (SGN 4579P AND SHB 8256X ON 21.04.2018)

CTI: SNM18D02067/C02/6
LKK: CC3/CTI18007571/K1jb3q2

Dear Sirs,

This is a 3 vehicle chain collision scenario where our insured vehicle was 2nd in line. Bola 28-100% ; Assessed:0% .

Insured agreed to settle and aware of NCD issue.

Summary of offer to repairer M/s **PREMIER AUTOMOTIVE SERVICES PTE LTD** is as follows:

	TP CLAIMED	OUR REVISED TO OFFER
Cost of Repairs + 7% GST	\$ 8,954.20 (per estimate)	\$ 4,853.31
Loss of Rental	\$ 634.32 (\$105.72 x 6 days)	\$ 581.46 (5.5 days)
LTA/GIA Search	\$ 2.00	\$ 2.00
TOTAL	\$ 9,590.52	\$ 5,436.77

- 4 days recommendation for repair + SAT AND SUN

Relevant supporting claim documents attached for your perusal and reference.

The above summary is subject for your approval.

Kindly advise.

Thank you.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHB8256X/GS

WITHOUT PREJUDICE

23rd May 2018

(By Email Only)

Attn: The Motor Claims Department

China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road #16-00

Springleaf Tower

Singapore 079909

Dear Sir/Madam

ACCIDENT INVOLVING SHB8256X, SGN4579P & SJS2353A ALONG ANG MO KIO AVE 3 INTO CTE/CITY ON 21.04.18

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHB8256X, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: SGN4579P at the material time of the accident with the driver of our client's vehicle, Mr Ng Yong Kang

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SGN4579P, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	4853.31 (Incl. GST)
(2) Loss of Rental - 6Days @\$105.72per day	\$	634.32
(3) GIA search fee	\$	2.00
	\$	<u>5489.63</u>

A copy of each of the following supporting documents is enclosed:

- (1) Final Repair Bill, GIA report & sketch plan of SHB8256X
- (2) Driver's I/C and Driving Licence
- (3) Vehicle Registration card, Certificate of Insurance
- (4) Check In/Out Voucher, GIA search

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHB8256X/GS

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,





Claims Department – Gary Shi

Email: gary.shi@premiertaxi.com

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd

Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Monday, 30 April 2018 1:25 PM
To: peter6696@hotmail.com
Cc: Admin A
Subject: ACCIDENT INVOLVING SGN 4579P AND SHB 8256X AND OTHERS ON 21/04/2018

Our ref: CC3/CTI18007571/K1jb3

TAN HUA MONG PETER

Policy Holder

Dear Sir,

ACCIDENT INVOLVING SGN 4579P AND SHB 8256X AND OTHERS ON 21/04/2018

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you under the Auto Insurance policy taken up with them.

Pursuant to the above said accident wherein you 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 call us if you have further queries.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6841-2409 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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AUTHORISATION TO ACT

I/We, **PREMIER TAXIS PTE LTD** ("the third party claimant") of **23 CHANGI SOUTH AVENUE 2 #03-02 SINGAPORE 486443** (address), owner of **SHB 8256X** (vehicle no.) hereby authorize **PREMIER AUTOMOTIVE SERVICES 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. **SHB 8256X** that was damaged pursuant to the accident which occurred on **21/04/2018** (date) along **ANG MO KIO AVE 3 BEFORE CITY** (location) involving vehicle no/s **SGN 4579P** ("the accident").

I/We further authorize the workshop 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/We 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 14 (day) of August (month) 2018 (year)



Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

This Settlement excludes any
bodily injuries arising out of the
above said accident and pertains
to property damage only

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN1678791701

Claim No : SNM18D02067/C02/6

Claimant : PREMIER TAXIS PTE LTD

Amount : S\$5,383.91

SINGAPORE DOLLARS FIVE THOUSAND THREE HUNDRED EIGHTY THREE
AND CENTS NINETY ONE.

I/We agree to accept the above mentioned amount to be paid to me/us in full &
final settlement of all claims, costs & disbursements for injuries / damages
sustained by me/us through an accident involving

Claimant Vehicle No. : SHB 8256X

Insured Vehicle No. : SGN 4579P

Date of Loss : 21.04.2018

Place of Accident : ANG MO KIO AVE 3 BEFORE CTE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to
discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : TAN HUA MONG PETER

Driver Name : TAN HUA MONG PETER

from all claims, present or future in respect of all loss, injury or damage
sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the
part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Repair Cost (with GST)	S\$ 4,853.31
(2) Loss of Rental	S\$ 528.60
(3) GIA/LTA Search Fee	S\$ 2.00
	=====
TOTAL	S\$ 5,383.91
	=====

Claimant Name :



NRIC No :

20030497511

Signature :

Date :

14/8/18

TAX INVOICE

 PREMIER TAXIS PTE LTD
 23 CHANGI SOUTH AVENUE 2 #03-02
 SINGAPORE 486443

 DATE 23-May-2018
 PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8256 X			\$ 4,535.80
TOTAL REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 4,535.80
GST @ 7%				\$ 317.51
GRAND TOTAL				\$ 4,853.31



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)



26 April 2018

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Ng Yong Kang of NRIC Number S6815436G is a registered driver of SHB8256X. Ng Yong Kang is paying daily rental rate of \$105.72 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Chin Bee Lian".

Chin Bee Lian (Ms)
Assistant Vice President
Taxis Administration

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 200304975H



REPLACEMENT VEH GIVEN YES / NO

VEH NO.

JOB NO.

CHECK IN / OUT VOUCHER

DRIVER'S NAME <u>Ng Yong Kang</u>		HANDPHONE <u>9661055</u>											
NRIC <u>S 6815436G</u>		MAKE / MODEL <u>KO2</u>											
TAXI REGN NO. <u>S HB 8256X</u>													
DATE IN <u>210418</u>	TIME IN <u>1500</u>	DATE OUT <u>260418</u>	TIME OUT <u>1530</u>										
KILOMETRES IN	FUEL IN	KILOMETRES OUT	FUEL OUT										
	<table><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr></table>	E	1/4	1/2	3/4	F		<table><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr></table>	E	1/4	1/2	3/4	F
E	1/4	1/2	3/4	F									
E	1/4	1/2	3/4	F									

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED IN TO WORKSHOP

D D M M Y Y H H M M

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION

D D M M Y Y H H M M

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN

Ng Yong Kang
DRIVER'S NAME 23/4/2018
S 6815436G
DRIVER'S SIGNATURE / DATE / TIME

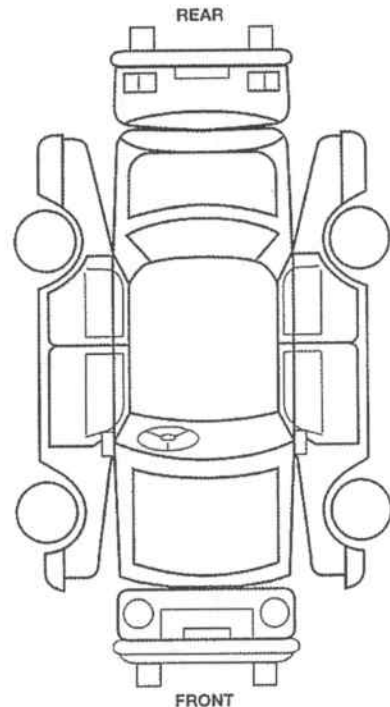
CHECKED IN BY
(PREMIER'S AUTHORISED WORKSHOP)

CHECK OUT

Ng Yong Kang X
DRIVER'S NAME
Chen X
DRIVER'S SIGNATURE / DATE / TIME

CHECKED OUT BY
(PREMIER'S AUTHORISED WORKSHOP)

INDICATE AREA OF DAMAGE HERE:



BODY MARKINGS

- | | |
|---------------------|-------------|
| 1 - Light Dent | 5 - Damaged |
| 2 - Serious Dent | 6 - Chip |
| 3 - Light Scratch | 7 - Crack |
| 4 - Serious Scratch | 8 - Peeling |

SERVICE / REPAIRS DONE	DRIVER'S REMARKS																				
<table><tr><td><input type="checkbox"/> SERVICING</td><td><input type="checkbox"/> OTHERS:</td></tr><tr><td><input type="checkbox"/> T / BELT</td><td></td></tr><tr><td><input type="checkbox"/> AIRCON SYSTEM</td><td><input checked="" type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT:</td></tr><tr><td><input type="checkbox"/> TURBO</td><td><u>260418 1320</u></td></tr><tr><td><input type="checkbox"/> BRAKE SYSTEM</td><td><u>TP/G</u></td></tr><tr><td><input type="checkbox"/> CLUTCH SYSTEM</td><td></td></tr><tr><td><input type="checkbox"/> BULB</td><td></td></tr><tr><td><input type="checkbox"/> UNDER CARRIAGE</td><td></td></tr><tr><td><input type="checkbox"/> CPF</td><td></td></tr><tr><td><input type="checkbox"/> BATTERY</td><td></td></tr></table>	<input type="checkbox"/> SERVICING	<input type="checkbox"/> OTHERS:	<input type="checkbox"/> T / BELT		<input type="checkbox"/> AIRCON SYSTEM	<input checked="" type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT:	<input type="checkbox"/> TURBO	<u>260418 1320</u>	<input type="checkbox"/> BRAKE SYSTEM	<u>TP/G</u>	<input type="checkbox"/> CLUTCH SYSTEM		<input type="checkbox"/> BULB		<input type="checkbox"/> UNDER CARRIAGE		<input type="checkbox"/> CPF		<input type="checkbox"/> BATTERY		
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<input type="checkbox"/> BULB																					
<input type="checkbox"/> UNDER CARRIAGE																					
<input type="checkbox"/> CPF																					
<input type="checkbox"/> BATTERY																					



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-060836
Date of Request: 23/04/2018

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date 23/04/2018
Enquiry By GARY SHI GUO RONG
Vehicle No. SGN4579P
Accident Date 21/04/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGN4579P	China Taiping Insurance (Singapore) Pte. Ltd.	18/11/2017-17/11/2018	6389 6111

Thank You.

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RECORDS MANAGEMENT CENTRE**
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-060836
Date of Request: 23/04/2018

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date 23/04/2018
Enquiry By GARY SHI GUO RONG
☐ Vehicle No. SGN4579P
Accident Date 21/04/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

