

**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 : AAD1310-115

Your Ref : SJC5933R

Date : 03.April 2018

**AXA INSURANCE S PTE LTD**

Dear Sir/Madam,

**ACCIDENT INVOLVING SHD5149G AND SJC5933R ON 09/10/13 03:50 PM ALONG IMM 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)	\$	2,889.00
2.	Loss of Rental for ____ days @ \$_____ per day	\$	577.80
3.	Loss of Income for ____ days @ \$_____ per day	\$	0.00
4.	LTA Search Fee	\$	6.00
5.	Survey Fee	\$	0.00
	Total	\$	3,472.80

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)

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03 April, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 09/10/13 03:50 PM at IMM 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. SHD5149G. The taxi was hired to NG HOCK LIANG a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$96.3 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with FIRST CAPITAL INSURANCE LIMITED 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

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**Authorization To Act**

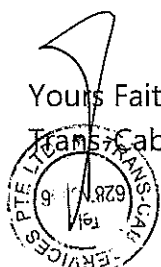
We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHD5149G and SJC5933R along IMM CARPARK on 09/10/13 03:50 PM.

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 3 (day) of April 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

**Trans-Cab Services Pte Ltd**

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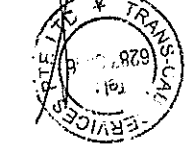
09-10-2013

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>	AAD1310-115	<b>Accident Date</b> 09-10-2013
9/10/2013 17:45	14/10/2013 15:15	SHD5149G

Yours Faithfully,

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

**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**

<b>TO:</b> <b>AXA INSURANCE (S) PTE LTD</b>  <b>ATTENTION:</b>	<b>INVOICE NO.</b> : INV1311-035 <b>DATE</b> : 12. November 2013 <b>REFERENCE NO</b> : AAD1310-115 <b>TERMS</b> : <b>DUE DATE</b> : 12. November 2013 <b>PAGE</b> : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	Repair Cost(lumpsum-13)SHD5149G DOA:09.10.13	1	2,889.00	2,889.00

**Total SGD Excl. GST :** 2,700.00  
**7% GST :** 189.00  
**Total SGD Incl. GST :** 2,889.00

\*\*\*\* TWO THOUSAND EIGHT HUNDRED EIGHTY NINE 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

**Enquire Vehicle & Owner Information ( Vehicle No. SJC5933R As At 09 Oct 2013 / 15:50:00 )****Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: TCS(ANDREA)SHD5149G

**Current Owner Details**

Owner ID Type: Singapore NRIC

Owner ID: S0119279E

Owner Name: CHUA AH GUAN

Registered Address Type: HDB / HUDC

Registered Block/House No.: 111

Registered Street Name: JURONG EAST STREET 13

Registered Unit No.: # 24 - 336

Registered Building Name: -

Registered Postal Code: 600111

**Current Vehicle Details**

Vehicle No.: SJC5933R

Make Description/Model: MAZDA / MAZDA6 2.5L SDN R

Insurance Company Name: AXA INSURANCE SINGAPORE PTE LTD



Please read through the Privacy Statement, Conditions of Use and Disclaimer.

Please do not use the Back or Forward buttons on your browser as this may alter the results of the transactions.

Best viewed with IE 6.0 SP3 and above, 800 X 600 resolution

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