

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 : AAD1808-075

Your Ref : GBF8125R

Date : 16 July 2019

AXA INSURANCE S PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHD0384B AND GBF8125R ON 12/08/18 03:10 PM ALONG PIE SLIP ROAD TOWARD TOA PAYOH

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)	\$	5,182.28
2.	Loss of Rental for <u>3</u> days @ \$ 103.60 per day	\$	310.80
3.	Loss of Income for <u>3</u> days @ \$ <u>50</u> per day	\$	150.00
4.	LTA Search Fee	\$	7.49
5.	Survey Fee	\$	0.00
	Total	\$	5,650.57

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)

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: AXA INSURANCE PTE LTD 8 SHENTON WAY, #27-01 AXA TOWER 068811 SINGAPORE ATTENTION:	INVOICE NO. : INV1907-122 DATE : 16. July 2019 REFERENCE NO : AAD1808-075 TERMS : DUE DATE : 16. July 2019 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD0384B;DOA 12.08.18(PART-BY-PART-18)	1	5,182.28	5,182.28

**** FIVE THOUSAND ONE HUNDRED EIGHTY TWO AND TWENTY EIGHT SGD ONLY ****

Total SGD Excl. GST :	4,843.25
7% GST :	339.03
Total SGD Incl. GST :	5,182.28

- 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 AUTO SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666 Fax: 6281 1400

GST Reg No. : 201019626G

Co. Reg No. : 201019626G

Authorization to Act

I, Anwar bin Mohamed Kamari (Hirer), S0230908 D (NRIC
no.) hereby authorize Trans-Cab Services Pte Ltd to act on my behalf to claim for my loss of
earnings for the accident involving SID384B and GBF8125R
along PIE Slip Road towards Toa Payoh
on 12/08/2018 at 15.00hrs.

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

Dated this _____ day of _____ 2018.

Anwar bin Mohamed Kamari

(Hirer's signature)

Name: _____

NRIC Number: _____

Address: _____
