



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

To : M/s EQ INSURANCE COMPANY LTD

Date: 28/05/2019

**THIRD PARTY DIRECT SETTLEMENT**

Vehicle No.	SMA 1356H (Insd Veh)	Your Ref. No. : DM18HO02255
	SHF 615A (TP Veh)	Our Ref. No. : CC3/EQI18015759/Keb3s2
Date of Accident	25/8/2018	

Liability	100%	
Final Repair Cost	: \$ 4,333.50	(W/GST)
Loss of Income	: \$	days
Rental (If any)	: \$ 595.92	6 days
Others:	: \$ 7.49	
	: \$	
	4,936.91	
Final Settlement Sum	: \$ 4,936.91	
Remarks	: PLEASE SEND THE CHEQUE PAYMENT TO TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111	

**Payment Instruction: Payee's Breakdown**

1)	TRANS-CAB AUTO SERVICES PTE LTD	: \$ 4,936.91
		: \$

NUR SHAQILAH

LKK Auto Consultants Pte Ltd

**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 : AAD1808-216

Your Ref : SMA1356H

Date : 21.January 2019

**EQ INSURANCE LIMITED**

Dear Sir/Madam,

**ACCIDENT INVOLVING SHF0615A AND SMA1356H ON 25/08/18 04:23 PM ALONG PIE TOWARDS CITY**

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)	\$	4,333.50
2.	Loss of Rental for <u>7</u> days @ \$ <u>99.32</u> per day	\$	695.24
3.	Loss of Income for _____ days @ \$ _____ per day	\$	0.00
4.	LTA Search Fee	\$	7.49
5.	Survey Fee	\$	0.00
	Total	\$	5,036.23

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)

**Asher Sng (LKKAuto)**

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**From:** Asher Sng (LKKAuto)  
**Sent:** Tuesday, 16 October 2018 12:13 PM  
**To:** SOO.WEI.CHIEH@GMAIL.COM  
**Subject:** ACCIDENT INVOLVING SMA 1356H AND SHF 615A ON 25/08/2018

Our Ref: CC3/EQI18015759/Keb3

16 OCT 2018

**GAY SIEW CHOON / SOO WEI CHIEH**

Dear Sir/Madam,

**ACCIDENT INVOLVING SMA 1356H AND SHF 615A ON 25/08/2018**

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED 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. *EQ INSURANCE COMPANY LIMITED*  
*(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 SHF0615A and SMA1356H along PIE TOWARDS CITY on 25/08/18 04:23 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 21 (day) of January 2019

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>EQ INSURANCE COMPANY LIMITED</b> 5 Maxwell Road #17-00 Tower Block, MND Complex 069110 Singapore  ATTENTION:	<b>INVOICE NO.</b> : INV1812-418 <b>DATE</b> : 31. December 2018 <b>REFERENCE NO</b> : AAD1808-216 <b>TERMS</b> : <b>DUE DATE</b> : 31. December 2018 <b>PAGE</b> : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHF0615A;DOA 25.08.18(LUMP SUM-18)	1	4,333.50	4,333.50

<b>Total SGD Excl. GST :</b>	<b>4,050.00</b>
<b>7% GST :</b>	<b>283.50</b>
<b>Total SGD Incl. GST :</b>	<b>4,333.50</b>

\*\*\*\* FOUR THOUSAND THREE HUNDRED THIRTY THREE AND FIFTY SGD ONLY  
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- 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

21 January, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 25/08/18 04:23 PM at PIE TOWARDS CITY

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. SHF0615A. The taxi was hired to WONG KOK KEE a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$99.32 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

25-08-2018

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 Date
8/25/2018 17:15	8/31/2018 15:30	SHF0615A	25-08-2018

Yours Faithfully,

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

[> Back to OneMotoring](#)**Vehicle Insurance Particulars Result**

Vehicle No.	Incident Date/Time	Insurance Company Name
SMA1356H	25 Aug 2018 / 16:20:00	EQ INSURANCE COMPANY LTD
YM6131B	25 Aug 2018 / 14:10:00	NTUC INCOME INS CO-OP LTD
SDK2485R	26 Aug 2018 / 20:55:00	NTUC INCOME INS CO-OP LTD
SGL7306B	24 Aug 2018 / 21:30:00	LIBERTY INS P L

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