DING AUTOMOTIVE PTE LTD
OUR REF: 50111405/TP/SHC7628H/AD/11/02/2019/DD HASHIM
YOUR REF: SH7651H/-8TH MARCH 2019

MOTOR CLAIMS DEPARTMENT INDIA INTERNATIONAL INSURANCE 64 CECIL STREET #04-#05 IOB BUILDING SINGAPORE 049711

ACCIDENT INVOLVING: SHC7628H AGAINST SH7651H ON 11/02/2019

LOCATION ALONG: AIRPORT BOULEVARD
We refer to the above matter:

	Rate per day	Repair/ Claim days	AMOUNT BEFORE GST	GST 7%	AMOUNT AFTER GST	
Cost of Repair	s -	7	\$ 1,500.00	\$ 105.00	\$ 1,605.00	
Loss Of Rental	\$ 91.82	7	\$ 642.74	s -	\$ 642.74	
Loss Of Income	\$ 80.00	7	\$ 560.00	s -	\$ 560.00	
LTA/GIA Search Fee	s -	0	\$ 6.96	\$ 0.49	\$ 7.45	
Towing Fee	s -	0	s -	s -	s -	
Surveyor Fee	s -	0	s -	s -	S -	
Total	\$ 171.82	7	\$ 2,709.70	\$ 105.49	\$ 2,815.19	

The accident was caused solely by the negligence of your insured and as a results, We had incurred the following costs of repair and losses of our insurer:

Enclosed are copies of the following documents for your perusal:

0	Repair Estimate	0	Discharge Voucher
0	GIA/Accident Police Report	0	Certificate Of Insurance
0	LTA 3rd Party Search Fee	0	Final Bill/Repair Tax Invoice
0	Milleage Record	0	Confirmation Finalize/Liability Email Copy
© ©	Rental Rates Agreement	0	Letter Of Demand
0	Letter Of Authority	(3)	

Our insurer has authorized DING AUTOMOTIVE PTE LTD to deal with the claim in this accident case and also to receive and deal/negotiate with all payment as stated above.

Please look into our client's claim and revert soonest as possible.

Your Sincerely, DD HASHIM DING AUTOMOTIVE PTE LTD HP:81160811 OFFICE:64521208 FAX:64520614 TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

12/02/2019 15:35

JOB-NO: 50111405

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE

64739522

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHC7628H

TRANS: AUTO

CHASSIS: KMHET41VMBA813680

. MAKE / MODEL: HYUNDAI / Sonata 2.0 CRDi

ENGINE: D4EAB977339

OWNER'S INSURER: MS First Capital Insurance Limited JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND SUR.DISP	REV PRICE
LABOUR					0	
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	1,200.00	0.00	1,200.00	· Y	500
2 R&R BOOTLID COMPONENTS	1.00	150.00	0.00	150:00	Y	60
3 R&R SPARE TYRE ,BOARD , CARPET,TRIM AND ETC	1.00	150.00	0.00	150.00	Y	60
4 CHECK WIRING	1.00	100.00	0.00	100.00	Y	X
5 RUSH PROOFING	1.00	100.00	0.00	100.00	Y	60
6 SPRAY REAR BUMPER	1.00	250,00	0.00	250.00	Y	200
7 SPRAY BOOTLID	1.00	250.00	0,00	250.00	Y	200
8 SPRAY REAR END PANEL	1.00	250.00	0.00	250.00	Y	200
9 SPRAY REAR FENDER LH / RH , SPARE TYRE PANEL	1.00	600.00	0.00	600.00	(1280)	
TOTAL:		3,050.00	0.00	3,050.00	1.200	
MATERIALS					788)	
1 REAR BUMPER PE	1.00	523.93	104.79	419.14	L Y	
2 - REAR BUMPER RETAINER LH	1,00	42.68	8,54	34.14	L Y	
3. REAR BUMPER RETAINER RH	1.00	42.68	8.54	34.14	L Y	
4 REAR BUMPER REINF . 2.	1.00	462,30	92.46	369.84	L Y	
5 REAR BUMPER REINF SPONGE	1,00	113,52	22.70	90.82	L Y	
6 BOOTLID 74	1.00	1,139.00	227.80	911.20	L Y	
7 BOOTLID EMBLEM LOGO NO	1.00	40.95	8.19	32.76	L Y	
8 BOOTLID EMBLEM HYUNDAI	1.00	40.95	8.19	32.76	L Y	
9 BOOTLID EMBLEM SONATA	1.00	40.95	8.19	32.76	L Y	- 22
10 BOOTLID EMBLEM CRDI ALC	1.00	40.50	8.10	32.40	L Y	
11.BOOTLID LOCK X	1.00	109,45	21.89	87.56	L Y	
12 BOOTLID LOCK CATCH X	1.00	108,45	21,69	86.76	L Y	
13 BOOTLID RUBBER BEADING	1.00	155,10	31.02	124.08	L Y	
14 REAR END PANEL CHOIL	1.00	323.29	64.66	258.63	-L)079.38	
15 REAR END PANEL TOP GARNISH	1.00	42.02	8.40	33.62	L Y	
16 REAR BUMPER CLIPS No.	1.00	35,00	0.00	35.00	S Y	
17 REAR BUMPER ADS STICKER	1.00	150.00	0.00	100 150.00	Sygny	
18 BOOTLID ADS STICKER MA	1.00	180.00	0.00	120 100.00	s 290.00	
19 REAR END PANEL TOP GARNISH CLIPS	1.00	35.00	0.00	35.00	S Y	
20 END PANEL SEALANT 🖌	1,00	50.00	0.00	50.00	S Y	
TOTAL:		3,675.77	645.16	3,030.61		
TOTAL PARTS & LABOUR :		6,725.77	645.16	6,080.61		

CLAIM DETAILS			QUOTED	DISCOUNT	DISC PRICE			REV
DESCRIPTION		QTY	COSTS			IND	SUR.DISP	PRICE
EXCESS/LOADING:S\$	0.00							
No. Of Day:	5 days	- 0						
RE-SURVEY: BEFORE	UMP SUM S\$					8		
DATE OF SURVEY:	13 102 11	9 616	15		5.			
SURVEYED BY:	Roll		-					
CONTACT NO:	90010068	FAX NO:			_			
NOTE: LUMP SUM AN	MOUNT WOULD BE RE	EVISED IF S	UPPLEME	NT REPAIR	S REQUIRED			
Ding Auto User 1								
ESTIMATOR STA AUTOCENTRE								
TEL:	FAX:							

LKK Auto Consultants hence notify the Repairer of the following:

- . To resurvey before after spray painting
- To display damaged part(s) during resurvey
- · Parts prices are subject to confirmation
- · Third party survey is on a "Without Prejudice" basis
- · No illegal modification(s) is allowed
- · Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SN \$ 290.00

Parts offer Discout 20% \$ 2079.38

Total \$ 3649.38 - 20%

= 2919.50

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

atoresato.		
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	ACCIDENT STATEMENT	
Date Of Report	12/02/2019 13:25	
Date Of Accident	11/02/2019 22:40	
Exact Location Of Accident	AIRPORT BOULEVARD	
Country/State of Loss	SINGAPORE	
Country	DETAILS OF OWN VEHICLE	

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHC7628H

Insured/Policyholder

Name Of Registered Owner

CITYCAB PTÉ LTD

Co Reg No

199502839G

Email Address

NOEMAIL

Mobile Phone No

Alternative Phone No.

OFFICE-65508768

Vehicle Particulars

Manufacturer

HYUNDAI

Model

SONATA-2.0 CRDI (A)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

vehicle Category

TAXI

Insurance Company

Name of Insurance Company

MS FIRST CAPITAL INSURANCE LTD

Type Of Coverage

YES

Fleet Policy

THIRD PARTY FIRE AND/OR THEFT

Policy Number

D-18088937MFSH

Cover Note Number

Driver

LOW JUAY SEAH Name of Driver

NRIC No Date Of Birth

Occupation

S1178326J

16/07/1955 OUTDOOR

Date Of Driving Pass

26/07/1976

Driving Experience

42 YEARS AND 6 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-92376506

Fax Number

Contact Number

Address

BLK664A JURONG WEST ST 64 #13-252

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - RELIEF

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

1000

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

mber of vehicles (including own vehicle)

3

___.Jived in the accident
Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

- Annexas

ambulance?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

NANYANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7929999 - FAX NO: 67912972

as notice of intended Prosecution given?

NO

Tr Yes, against whom?

Circumstances of Accident

REFER TO ATTACH POLICE REPORT (T/20190212/2013)

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FILE NOT SUITABLE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SH7651H

Vehicle Make/Model/Colour

Details Of Properties

TAXI

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Dantanda

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKX5536G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE HIRE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

UNKNOW

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SH7651H

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

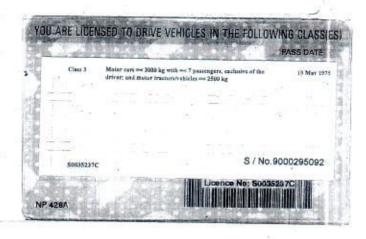
Postcode

YES











This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive. Singapore 575701.

Type Description Issue Date

02 TAXI VL 10/10/1985

Vehicle No: SHC 7628	H (Hirer / Relief)	(8)			
Reporting Date:/_		*** **********************************		0 2 232	
Accident Date:/	/Time:hrs				
	[PG:]*[SPD:Km/H] [Weather Condition : Clear	Mileage:][Road surface: We	ot / Dry / Other:]
TP1: Number Plate	Name:	NRIC:	HP:		ē ,,
ΓΡ2: Number Plate	Name:	NRIC:	HP:	*St 800 100	-
FP3: Number Plate	Name:	NRIC:	HP:		
Withness:] [HP:] [Tow: Y/N]	25	**	

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1178326J



Name



LOW JUAY SEAH



刘銳声

CHINESE Date of birth

SINGAPORE

Se M

16-07-1955 Country/Place of birth strade)-



NRIC No. S1178326J



27-06-2018

Address

APT BLK 664A JURONG WEST STREET 64 #13-252 SINGAPORE 641664







This card is not transferable and is the property of the Land Transport
Authority (LTA). It must be surrendered to the LTA on request. If found,
please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description Issue Date
02 TAXT VL 06/11/1987

And another property of the					
vehicle No: SHC 7628	H (Hirer/Relief)				
Reporting Date: 12/2	19 Time: 1015 hrs	50 to 12 to		31 S	
Accident Date: 11/2/	19 Time: 2240hrs		1-30502		
[OD / FP/ WC / Cash]	[PG: 2] [SPD: 2Km/H]	Mileage:	1 50 302	10	
	[Weather Condition : Clear /	Raining / other:][Road surface: We	et / Dry / Other:	j
[Location: Air Dor	+ Boulevard			1.4] >>
TP1: Number Plate St 76	5/Fl_Name:	NRIC:	HP:		
TP2: Number Plate S X 5	5367_Name:	NRIC:	HP:		2
TP3: Number Plate	Name:	NRIC:	HP:	117	

[Withness:

] [HP:

] [Tow: Y/N]

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

Policyholder's Signature Date & Time:

SKETCH PLAN					
			A:S B:S	HC7628 F1 765 SKX55	14 14 36G
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT				
Reder to	Police R	epoil (T/20190	0212/2013	
	у.				
				W.	
DECLARATION I/We declare the foregoing partic	culars are true in every	respect.		//	7

Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:





T/20190212/2013

1 of 4

Report No. T/20190212/2013

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

REPORT OF A TRAFFIC ACCIDENT		
Date/Time Report Made:	Vide Report No.:	Station Diary No.:
12/02/2019 04:40	P/20190211/0078	39

12/02/20	10 0 1. 10					
Informa	nt's Partic	ulars	別的學問。從問題的問題的	(1) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		
Name of Informant: LOW JUAY SEAH			Address: APT BLK 664A JURONG WEST STREET 64 #13-252 SINGAPORE 641664			
ID Type	/ ID No.: 0 / S11783:	26J	Contact No.: Home/Office:	Mobile: 92376506		
Nationali			Email:			
Sex: Age: Date of Birth:			Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/02/2019 22:40	Type of Location Straight Road	
Location: Along Road 1 AIRPORT BO Towards Airp Weather:	I DULEVARD port Terminal 2	Road Surface:	I F	Road Speed Limit:	
Clear		Dry		Treffic Volume:	
LISTRIC FIDW.		Traffic Control: Not Controlled	i l	Traffic Volume: Heavy	
Type of Collis	eion:			Anyone conveyed by ambulance:	

Vehicle No.	ehicle Involved	Make	Model	Color	Bandition	No of Passenge
SH7651H	Car	HARACTE TO HERE			Seriously Damaged	0
SHC7628H	Car			30 12	Seriously Damaged	0
SKX5536G	Car				Seriously Damaged	0





T/20190212/2013

2 of 4

Report No. T/20190212/2013

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

CONTINUATION OF REPORT

A my Dadactrian in	volved. No				
Any Pedestrian In No. of Pedestrian	s Injured: NIL	Use of Peo	lestrian	Cross	ing: NA
Drivere Contract		and an electrical states		1 32 mg	
Name	AN CHIN KWANG		ID No.		S1581649Z
Related Vehicle	SH7651H (Car)		Contac	ct No.	NIL
Hospital/Clinic	NIL	((*)	Class Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL - "	Date Disc	-	NIL	
No. of Days grant	ted Medical Leave NIL	Degree of		Slight	Management of the second of th
Driver	red Medical Ecove				
Name	LOW JUAY SEAH		ID No.		S1178326J
Related Vehicle	SHC7628H (Car)		Conta	ct No.	92376506
Hospital/Clinic	NIL		Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
	NIL Date I		harge	NIL	
Date Treatment	ted Medical Leave NIL	Degree of		NIL	
	Ted Medical Education	ALC: UNITED BY			建筑建筑器 是1911年
Driver	JEENA BINTE ABDUL KADIR	The part of the pa	ID No		S7326577J
Related Vehicle	SKX5536G (Car)		Contact No.		NIL
Hospital/Clinic	NIL		Class Drivin Licens Expin	g	Class: NIL Date of Expiry: NIL
Data Taratasant	NIL	Date Disc	_	NIL	
Date Treatment	ited Medical Leave NIL		ee of Injury NIL		

Brief Details.

On 11/02/2019, at about 2240hrs, I was driving my Taxi, bearing registration number SHC7628H, along Airport Boulevard towards Changi Airport Terminal 2. I then stopped my Taxi on the 2nd lane from the left as there was a slight traffic jam in front of me. Suddenly I heard a loud car crash sound coming from the back and subsequently, I felt an impact from the back of my Taxi. I then came down from my Taxi and saw a Silver Toyota vehicle bearing registration number SKX5536G clashed into another Taxi, bearing registration number SH7651H, who was behind me. The impact led to the said Taxi behind me clashing into the back of my Taxi.





3 of 4

Report No. T/20190212/2013

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

CONTINUATION OF REPORT

I wish to state I do not know what happened between the said Silver Toyota car and the Taxi behind me. Traffic police was at scene and I was given a report number vide P/20190211/0078 under IO Tan Chin Yong (DID: 65476178). Ambulance was also at scene and the driver of the said taxi behind me namely An Chin Kwang was conveyed to hospital, however I do not know which hospital or what kind injury did he suffer from the accident. My car only have a front in-car camera.

I am lodging this report for my company purpose and under the instruction of the TP officer.





4 of 4

Report No. T/20190212/2013

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Singapore Police Force

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have

Signature Of Officer Recording The Report: J / Sgt 2 CHONG JIA WEI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/02/2019 04:40
Officer In Charge Of Case: TP / GIT / Insp TAN CHIN YONG Contact No.: 65476178	Classification Of Case:
Alfin No Stamp	

> Back to OneMotoring

Land Transport

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

12 Feb 2019 / 14:08:26

Receipt Date/Time: 12 Feb 2019 / 14:08:26

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190212-001897

Previous Receipt No.:

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at	It of Insurance Enquiry - SH7651H 11 Feb 2019/22:40:00 ance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - SH7651H Enquiry Fee 20190212140750130450		7.00	0.49	7.49
		Sub-Total	7.00	0.49	7.49
		Total Before Rounding	7.00	0.49	7.49
		Rounding Difference			0.04
		Total Amount Payable			7.45
		Paid By			
		xxxxxxxxxxxxxx1322	Credit Card: Visa/MasterCard		7.45
		Total			7.45
		Cash Change			0.00
		Tendered Amount			7.45
		Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

1879K2 HS

					MILEAGE	HOUNG OF	HOURS OPERATED (TIME)
DATE	NAME OF DRIVER	Z	MILEAGE READING	ADING	RAVEL ED.	FROM	tot.
2/2/19	Accident Reporting (IN)				•	1015)
21/2	Accident Reporting (DUT)	1			1	ì	Oc.81.
						٠	
The second second second	· ·			-	A. C. A.		
		-			22.5		
	2		·		<u>.</u>		
				J. Sa			
,	1				in t		10

Our Ref: CC19020316

Date: 12 February 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

11/02/2019 @ 22:40 hrs

ALONG

AIRPORT BOULEVARD

INVOLVING

SH7651H, SKX5536G

We refer to the above-mentioned accident and wish to inform that CityCab Pte Ltd is the registered owner of the taxi bearing vehicle registration number SHC7628H (the "Taxi"). The Taxi was hired to CHEE SEE HWA IC NO S0035237C a registered hireroperator of CityCab Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$98.25 per day (inclusive of GST).

Please be advised that the Taxi was insured with MS First Capital Insurance Ltd on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

LETTER OF AUTHORITY

ACCIDENT INVOLVING	&		_ON	
citycab pte Itd owne No. SH 4 7628 H Ltd to submit, corres cost of repair and un accident.	r/ hirer of the hereby author spond, negoti	Vehicl orize Di ate and	ng Automotive P	for
I further authorize the repair, loss of incomparty vehicle insurare in favour of the Ding payment be forward my claim.	e and rental,s nce particulars Automotive	survey i s enqui Pte Lto	report fee, third iry fee etc. Be ma d and that the sai	de d
SIGNED BY:	Xul	DATE:	1 2 FEB 2019	

Satisfaction Voucher

Date: 18/02/2019		
MS First Capital Insurance Limited		
Attention: MOTOR CLAIMS DEPT	18FEB'19	15:58
Dear Sir/Madam Lee See Hwa	+2Hours Deset	405
I/We hereby acknowledge having received from Singapore Technologies Kinetics Ltd.,249 Jalan Boon Lay,Singapore 619523, my/our vehicle number SHC7628H	- 800	
which has been repaired to my/our satisfaction and acceptance. I/We admit that	1	
the payment of SGD account for such repairs is in full discharge		
of my/our claim upon the corporation under the policy number D-18088937MFSH		
reference claim number 50111405 in respect of the damage caused to the said vehicle in an accident that occurred thereto or about the 11/02/2019		
at AIRPORT BOULEVARD		
Dated this day of,201 Company Stamp if applicable		
Signature:		
NRIC No:		
Name: CityCab PTE LTD (Fleet)		
Address: 383 SIN MING DRIVE SINGAPORE 575717 0		

Form G-STAR-WI-FC-005-01- Rev00

First Capital Insurance Limited

Company Reg. No. 195000106C GST, Reg. No. M2-0001676-9

Date Issued

12/10/2017

CERTIFICATE REF. :

MZ400A

CERTIFICATE OF INSURANCE (MASTER)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE NO.

D-18088937MFSH

Index Mark and Registration

All CityCab taxis operating in the Republic of Singapore.

Number of Vehicle Name of Insured

CityCab Pte Ltd

Coverage

Third Party Fire and Theft

Effective date of the Commencement of

Insurance for the purpose of the Act

01/01/2018

Date of Expiry of Insurance

31/12/2020

Persons or Classes of Persons entitled to drive

a) Any licensed taxi driver driving on the insured's order or with their permission.

b) Any person provided he is in the insured's employ and is driving on their order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitations as to use:

Use as a taxl.

Use for social, domestic and pleasure purposes.

The Policy does not cover

Use for racing, pace-making, reliability trial or speed-testing,

Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

Excess: All Claims \$2,000.00 each and every accident

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

> First Capital Insurance Limited (Approved Insurers)

> > Authorised Signature

A/C NO .:

B0101

DING AUTOMOTIVE PTE LTD BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645

Tel: 6452 1208 Fax: 6452 0614

FINAL BILL

M/S: INDIA INTERNATIONAL INSURANCE

OIC:--

ACCIDENT DATE:11/02/2019 REF:--

OUR REF: SHC7628H

DATE:

8/3/2019

ITEM NO.	DESCRIPTION	UN	NIT PRICE	2 - 11	AMOUNT
1	Repair Cost	\$	1,500.00	\$	1,500.00
2	LTA/Merimen Search Fee	\$	6.96	\$	6.96
2	Loss of Rental (w/o GST)				
	[91.82X07]	\$	642.74	\$	642.74
4	Loss of Income (w/o GST)				
	[80X07]	\$	560.00	\$	560.00
5	Towing Fee	\$	(*)	\$	
6	Surveyor Fee	\$	(<u>2</u>)	\$	-
REMARKS :		SUB	TOTAL:	\$	2,709.70
		7% 0		\$	105.49
		GRAI	ND TOTAL:	\$	2,815.19

Yours faithfully,

Authorise Signature of Ding Automotive Pte Lte

ACCIDENT INVOLVING SHC7628H AND SH7651H ON 11/02/2019 ARRANGE SURVEY

Taxis Customer Service to: motorclaim

Tue 12 Feb 2019 03:42 PM

Cc ACCOUNTS, ADMIN, carlor.chan, "Dd hashim"

[This e-mail is confidential and may also be privileged. If you are not the intended recipient, please delete it and notify us immediately; you should not copy or use it for any purpose, nor disclose its contents to any other person. Thank you.]

[We encourage everyone to do his / her part in helping to preserve the environment. Kindly refrain from printing this email unless it is absolutely necessary.]

Dear Officer,

Please arrange surveyor come survey SHC7628H ASAP

The vehicle SHC7628H already in 31 Corporation Road 649825.

receipt-20190212-140849.pdf SAS2550732.PDF

Thanks

Best Regards

Ding Automotive Pte Ltd Jing Feng Hp: 62657130

NOTE !!!

All mailed letter & cheque payment is to be mailed to our main office address : BLOCK 10 #01-20 SIN MING INDUSTRIAL EST. SEC C SINGAPORE 575645

This e-mail is confidential and may also be privileged. If you are not the intended recipient, please delete it and notify us immediately; you should not copy or use it for any purpose, nor disclose its contents to any other person. Thank you]



Dd hashim <dd.hashim@dingauto.sg>

50111405/SHC7628H - Finalize Amount & After Repair Photo .

10 messages

taxiscs@stengg.com <taxiscs@stengg.com>

Tue, Feb 19, 2019 at 2:18 PM

To: rasul@lkkauto.com, sur@lkkauto.com, admin-a@lkkauto.com, cs-a@lkkauto.com
Cc: "ACCOUNTS@DINGAUTO.SG" <ACCOUNTS@dingauto.sg>, "ADMIN@DINGAUTOMOTIVE.COM.SG"
<ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Dd hashim
<dd.hashim@dingauto.sg>

Dear OFFICER,

Please see below for the finalize according to our conversion to finalize for SHC7628H

Kindly check the attach Estimate & After Paint Photo .

TAKE NOTED Question Mark item No 4, 5 and 15 is damage

Please check the attach file for above pic

Total Repair - 05 Days

L/S

LABOUR = \$1280.00 S/N = \$290.00 PARTS AFTER - 20% = \$2079.38 TOTAL (L+S+P) = \$3649.38

FINALIZE AMOUNT-20% = \$2919.50

Please help to close this case ASAP

Thanks

Best Regards Ding Automotive Pte Ltd FENG Hp :62657130

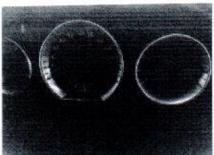
NOTE !!! All mailed letter & cheque payment is to be mailed to our main office address : BLOCK 10 #01--20 SIN MING INDUSTRIAL EST. SEC C SINGAPORE 575645

[This e-mail is confidential and may also be privileged. If you are not the intended recipient, please delete it and notify us immediately; you should not copy or use it for any purpose, nor disclose its contents to any other person. Thank you]

30 attachments



SHC7628H Q MARK (22).jpeg 186K





SHC7628H AFTER PAINT (4).jpeg 121K



SHC7628H AFTER PAINT (5).jpeg



SHC7628H AFTER PAINT (6).jpeg 130K

Scanned Documents.pdf 421K

Dd hashim <dd.hashim@dingauto.sg>

Fri, Feb 22, 2019 at 12:49 PM

To: "Rasul (LKKAuto)" <rasul@lkkauto.com> Cc: "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

DING AUTOMOTIVE PTE LTD

Salam Sejahtera,

Mr Rasul kindly help to confirm this case finalize amount as soon as possible.

Please feel free to contact us for further assistance.

Terima Kasih. ~Gong Xi Fa Cai~ HAVE A GREAT DAY TO YOU AHEAD.. SINCERELY

DD HASHIM +6581160811

[Quoted text hidden]

Rasul (LKKAuto) <Rasul@lkkauto.com>

Fri, Feb 22, 2019 at 12:51 PM

To: Dd hashim <dd.hashim@dingauto.sg>

Cc: "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg"

<Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

Hi DD,

This vehicle requires to check book value. KIV first

Will let u know by monday

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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

LKK Save the Earth. Print only when necessary.

[Quoted text hidden]

Dd hashim <dd.hashim@dingauto.sg>

Fri, Feb 22, 2019 at 12:52 PM

To: "Rasul (LKKAuto)" <Rasul@lkkauto.com>

Cc: "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

Hi Mr Rasul,

Sure. Thank you.

~Gong Xi Fa Cai~ HAVE A GREAT DAY TO YOU AHEAD.. SINCERELY DD HASHIM +6581160811

[Quoted text hidden]

Rasul (LKKAuto) <Rasul@lkkauto.com>

Mon, Feb 25, 2019 at 9:56 AM

To: Dd hashim <dd.hashim@dingauto.sg>

Cc: "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

HI DD,

Kindly take note repair limit for this taxi is 1K only

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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

LKK Save the Earth Print only when necessary.

[Quoted text hidden]

Rasul (LKKAuto) <Rasul@lkkauto.com>

Tue, Feb 26, 2019 at 9:48 AM

To: Dd hashim <dd.hashim@dingauto.sg> Cc: "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@dingautomotive.com.sg>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

HI DD,

As spoken, repair limit that can be given is \$ 1,200 only

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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

IKK Save the Earth Print only when necessary.

From: Rasul (LKKAuto)

Sent: Monday, 25 February, 2019 9:57 AM

To: 'Dd hashim'

Cc: ADMIN@DINGAUTOMOTIVE.COM.SG; Carlor.chan@dingauto.sg; Kelly Ding; Ding Ding Auto

Subject: RE: 50111405/SHC7628H - Finalize Amount & After Repair Photo .

HI DD,

Kindly take note repair limit for this taxi is 1K only

Best	Regard	ls
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Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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



IKK AND Save the Earth. Print only when necessary.

[Quoted text hidden]

Tue, Mar 5, 2019 at 5:47 PM Admin@Ding Automotive <admin@dingautomotive.com.sg> To: "Rasul (LKKAuto)" <Rasul@lkkauto.com>, Dd hashim <dd.hashim@dingauto.sg>, SUR <sur@lkkauto.com>, "Admin(LKK)" admin-a@lkkauto.co>

_c: Carlor.chan@dingauto.sg, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>

Dear Rasul,

Good day to you.

We would like to check and follow up on our finalize amount for this case as we have not hear from you.

Kindly provide us your finalize amount for us to close this case on our end.

We sincerely look forward to receive your finalize for our repair.

Thank you so much

Best Regards,

Kenneth Ding

HP: 92313123

Fax: 6452 0614

[Quoted text hidden]



Virus-free. www.avast.com

Rasul (LKKAuto) <Rasul@lkkauto.com>

Thu, Mar 7, 2019 at 12:03 PM

To: "Admin@Ding Automotive" <admin@dingautomotive.com.sg>, Dd hashim <dd.hashim@dingauto.sg>

Cc: "Carlor.chan@dingauto.sg" <carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dinga <ding@dingauto.sg=""></kelly.ding@dinga></carlor.chan@dingauto.sg>	uto.sg>, Ding Ding Auto
Hi Kenneth,	
I've already check the repair limit that can be given is 1500	
Best Regards,	
Rasul Assessor	
LKK Auto Consultants Pte Ltd	
Phone: 6256-3561 email: Rasul@lkkauto.com fax: 6841-4315	
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 S(408933)	
Save the Earth Print only when necessary	
[Quoted text hidden]	
Admin@Ding Automotive <admin@dingautomotive.com.sg> To: "Rasul (LKKAuto)" <rasul@lkkauto.com>, Dd hashim <dd.hashim@dingauto.sg> Cc: Carlor.chan@dingauto.sg, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg></ding@dingauto.sg></ding@dingauto.sg></kelly.ding@dingauto.sg></dd.hashim@dingauto.sg></rasul@lkkauto.com></admin@dingautomotive.com.sg>	Fri, Mar 8, 2019 at 10:07 AM @dingauto.sg>, You jingfeng
Dear Rasul,	
Good day to you.	
We would like to confirm this repair cost at \$1500 and 5 repair days.	
Dear DD,	
Please issue LOD.	
Thank you so much.	
Best Regards,	
Kenneth Ding	
HP: 92313123	

Ding Auto Mail - 50111405/SHC7628H - Finalize Amount & After Repair Photo .

3/8/2019

Fax: 6452 0614

[Quoted text hidden]

, Virus-free. www.avast.com	

Rasul (LKKAuto) <Rasul@lkkauto.com>

Fri, Mar 8, 2019 at 10:21 AM

To: "Admin@Ding Automotive" <admin@dingautomotive.com.sg>, Dd hashim <dd.hashim@dingauto.sg> Cc: "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, Kelly Ding <kelly.ding@dingauto.sg>, Ding Ding Auto <ding@dingauto.sg>, You jingfeng <jingfeng@dingauto.sg>

Hi DD,

Noted with thanks

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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

LKK Save the Earth Print only when necessary

From: Admin@Ding Automotive [mailto:admin@dingautomotive.com.sg]

Sent: Friday, 8 March, 2019 10:08 AM To: Rasul (LKKAuto); 'Dd hashim'

[Quoted text hidden]

[Quoted text hidden]