

Your Ref : SH 9013L
Our Ref : SHA 9180D

Quek Song Ang c/o
CHUNNI MOTOR WORK PTE LTD
Blk 10 Ang Mo Kio Industrial Park 2A
#03-19 AMK AutoPoint
Singapore 568047

Date : 11/05/19

The Motor Claims Department

Indira %
LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi 2nd Park
Singapore 408933

WITHOUT PREJUDICE

Dear Sir / Madam,

RE: ACCIDENT INVOLVING SHA 9180D / SH 9013L On 09.04.2019

ALONG River valley Rd TWDS City After Shanghai Rd Junction

I am the owner/hirer of motor vehicle/taxi, SHA 9180D, which was involved in the above-mentioned accident.

The motor vehicle/taxi was surveyed by your appointed appraiser at the premises of M/S CHUNNI MOTOR WORK PTE LTD. The accident was caused by your insured's negligent driving and or management of his vehicle. Therefore, I am claiming damages and losses sustained by me against you in connection with the accident based on the appraiser's recommendation.

Our claim is as follows:

1) Cost of Repair	SS	16,050.00
2) Loss of Rental	SS	1,323.68 (165.46 x 8 days)
3) Loss of Income	SS	320.00 (40 x 8 days)
4) GIA Report Fee	SS	
5) LTA Search Fee	SS	
6) Survey Report Fee	SS	
	SS	<u>17,693.68</u>

We enclose herewith the following relevant supporting documents :

- a) Authorisation Letter
- b) Final repair bill(s)
- c) LTA Search
- d) GIA report(s)
- e) Insurance Certificate

Kindly look into the matter and revert as soon as possible. Thank you.

Yours faithfully



LETTER OF AUTHORITY

To Whom It May Concern :

ACCIDENT INVOLVING **SHA 9180D / SH 9013L**


ALONG River valley Rd TWDS City After Shanghai Rd Junction ON 09.04.2019

I, Quek Song Ang, NRIC NO. S 0363139G of
Blk 110 Spottiswoode Park Road #03-93 Singapore 081110

Owner/hirer of motor vehicle Registration No **SHA 9180D**, insured by
Ms First Capital Insurance Ltd under Policy No. D-18088937MFSH

do hereby authorize M/s **Chunni Motor Work Pte Ltd** as my authorized representative to write,
negotiate and settle claim on my behalf in my claim against the owner and/or Motor Vehicle
Registration No. **SH 9013L** in respect of the above mentioned accident. I also
hereby authorize that the agreed settlement sum (cost of repair, loss of use, earnings and rental,
Survey report fee, LTA fee & GIA report fee) be made in favour of my representative, M/s
Chunni Motor Work Pte Ltd and that the said payment be forwarded to them as full and final
discharge of my claim.

Dated : 09.04.2019

Signature : 
(Company's chop if necessary)

EXPRESS SETTLEMENT

DISCHARGE VOUCHER

III- Direct Settlement (PODS)

India Ref: MCT19040277

Claimant Ref: SHA 9180D

We/I, CHUNNI MOTOR WORK PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 12,340.00 (Global Sum) ~~(S\$ 12,340.00)~~ ~~(S\$ 12,340.00)~~ ~~(S\$ 12,340.00)~~ vehicle no. SHA 9180D that was damaged pursuant to the accident which occurred on 09/04/2019 (date) at ALONG RIVER VALLEY RD TOWARDS CITY (location) involving vehicle no. SH 9013L (insured vehicle). This is pursuant to the inspection conducted on 11/04/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CITYCAB PTE LTD ("the third party claimant") of vehicle no. SHA 9180D to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHA 9180D (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 12,340.00 to CHUNNI MOTOR WORK PTE LTD

Dated this 2 FEB 2020 day of 20

CLAIMANT:

Signature:

Signed by "the workshop" (with chop)

Name:

NRIC:

Address:

Nationality:

Occupation:

WITNESS:

Signature:

Signed by appointed Surveyor

Name:

NRIC:

Address:

Nationality:

Occupation:

Chunni Motor Work Pte Ltd
Bk 10 Ang Mo Kio Industrial Park 2A
AMK Autopoint #03-19
Singapore 568047
Tel: 6542-7162 Fax: 6542-6739
Co. Reg. No: 2008231100

LKK Auto Consultants Pte Ltd

199607198R

51 Ubi Avenue 1

#01-25 Paya Ubi Ind. Park S(408933)

"The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document."

TAX INVOICE

INDIA INTERNATIONAL INSURANCE PL 64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711	VEHICLE NO SHA 9180 D	DATE 08.05.2019
	MAKE MERCEDES	INVOICE NO 9759
	MODEL E220	ACC DATE/TIME 09.04.2019 @ 22:00 HRS

Cost of Repair \$ 15,000.00

Sub-total \$ 15,000.00

Add : 7 % - GST \$ 1,050.00

Total \$ 16,050.00

(SINGAPORE DOLLARS: SIXTEEN THOUSAND AND FIFTY ONLY)



Our Ref: CC19040282



Date: 20 April 2019

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	09/04/2019 @ 22:00 hrs
ALONG	ALONG RIVER VALLEY RD TOWARDS CITY AFTER SHANGHAI RD JUNCTION
INVOLVING	SH9013L

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 **SHA9180D** (the "Taxi"). The Taxi was hired to **QUEK SONG ANG IC NO S0363139G** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$165.46** 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.

SHA 9180D

DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
				FROM	TO
6/4	Gm	10 8 1 305	378	0630	1800
14	Chong	10 6 1 577	272	1415	0606
7/4	Gm	10 6 2037	420	0630	2145
11/4	Chong	10 6 2298	260	2100	0600
8/4	Gm	10 6 2719	412	0620	1845
8/4	Chong 6/11/4/4 w/ker	0 6 2905	185	1850	0606
9/4	Gm	10 6 3233	328	0610	1800
9/11	Chong 6/11/4/4 w/ker	0 6 3539	306	1850	
10/4/2019	In Ketrana work shop			10:00	G
17/4/2019	Out of work shop				12:30