

Without Prejudice  
to our driver's Injury claim

DING AUTOMOTIVE PTE LTD  
OUR REF: 50111585/TP/SHC7805M/AD/18/04/2019/HAILEY  
YOUR REF: SGU1315S/-----  
14 MAY 2019

(Asher)

MOTOR CLAIMS DEPARTMENT  
AXA INSURANCE  
8 SHENTON WAY, #24-01  
AXA TOWER, 068811 SINGAPORE

ACCIDENT INVOLVING: SHC7805M AGAINST SGU1315S ON 18/04/2019  
LOCATION ALONG: SIN MING AVE TOWARDS BISHAN

We refer to the above matter:

	Rate per day	Repair/ Claim days	AMOUNT BEFORE GST	GST 7%	AMOUNT AFTER GST
Cost of Repair	\$ -	7	\$ 4,450.00	\$ 311.50	\$ 4,761.50
Loss Of Rental	\$ 98.64	7	\$ 690.48	\$ -	\$ 690.48
Loss Of Income	\$ 80.00	7	\$ 560.00	\$ -	\$ 560.00
LTA/GIA Search Fee	\$ -	0	\$ 1.87	\$ 0.13	\$ 2.00
Towing Fee	\$ -	0		\$ -	\$ -
Surveyor Fee	\$ -	0	\$ -	\$ -	\$ -
Total	\$ 178.64	7	\$ 5,702.35	\$ 311.63	\$ 6,013.98

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:

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

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,  
HAILEY  
DING AUTOMOTIVE PTE LTD  
OFFICE:64521208  
FAX:64520614

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

22/04/2019 9:45

OWNER'S PARTICULARS

JOB-NO: 50111585

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

VEHICLE DETAILS

LICENSE NO: SHC7805M

TRANS: AUTO

CHASSIS: KMHET41VMDA834577

MAKE / MODEL: HYUNDAI / Sonata 2.0 CRDi

ENGINE: D4EAD306982

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
<u>LABOUR</u>							
1 TO REPAIR FENDER RH ,STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	1,600.00	0.00	1,600.00		Y	800
2 TO RUST PROOFING ON ACCIDENT AFFECTED AREAS	1.00	150.00	0.00	150.00		Y	60
3 TO APPLY SEAL JOINT ON WELDING AFFECTED AREAS	1.00	180.00	0.00	180.00		Y	60
4 REMOVE & REFIX REAR WINDSCREEN	1.00	150.00	0.00	150.00		Y	X
5 REMOVE & REFIX REVERSE SENSOR & CHECK WIRING	1.00	80.00	0.00	80.00		Y	60
6 REMOVE & REFIX REAR SEAT , SEAT BET , SPARE TYRE COMPARTMENT PARTS	1.00	180.00	0.00	180.00		Y	X
7 REMOVE & REFIX BOOTLID COMPARTMENT	1.00	150.00	0.00	150.00		Y	X
8 RESPRAY REAR FENDER LH + FENDER RH	1.00	500.00	0.00	500.00		Y	200
9 RESPRAY REAR BUMPER + BUMPER LOWER	1.00	500.00	0.00	500.00		Y	200
10 RESPRAY REAR BUMPER PROTECTOR LH + PROTECTOR RH	1.00	400.00	0.00	400.00		Y	50
11 RESPRAY SPRAY TYRE PANEL + END PANEL	1.00	500.00	0.00	500.00		Y	400
12 RESPRAY SIDE PANEL LH +SIDE PANEL RH	1.00	400.00	0.00	400.00		Y	200
13 RESPRAY BOOTLID + DOOR REAR LH	1.00	500.00	0.00	500.00		Y	200
TOTAL:		5,290.00	0.00	5,290.00			

MATERIALS

1 BOOTLID <i>repair</i>	1.00	1,139.20	227.84	911.36	L	Y	
2 BOOTLID LOCK	1.00	109.45	21.89	87.56	L	Y	
3 BOOTLID CATCH	1.00	108.90	21.78	87.12	L	Y	
4 BOOTLID LOGO	1.00	21.54	4.31	17.23	L	Y	
5 BOOTLID EMBLEM "CRDI"	1.00	18.70	3.74	14.96	L	Y	
6 BOOTLID EMBLEM- HYUNDAI	1.00	28.12	5.62	22.50	L	Y	
7 BOOTLID EMBLEM -SONATA	1.00	40.92	8.18	32.74	L	Y	
8 BOOTLID LAMP LH	1.00	233.50	46.70	186.80	L	Y	
9 BOOTLID LAMP RH	1.00	233.50	46.70	186.80	L	Y	
10 BOOTLID SEAL STRIP LH	1.00	91.30	18.26	73.04	L	Y	
11 BOOTLID SEAL STRIP RH	1.00	91.30	18.26	73.04	L	Y	
12 BOOTLID DAMPER LH	1.00	114.50	22.90	91.60	L	Y	
13 BOOTLID DAMPER RH	1.00	114.50	22.90	91.60	L	Y	
14 BOOTLID WEATHER STRIP	1.00	124.50	24.90	99.60	L	Y	
15 BOOTLID INSULATOR	1.00	155.10	31.02	124.08	L	Y	



## CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
16 BUMPER REAR <i>OK</i>	1.00	523.93	104.79	419.14	L	Y	
17 BUMPER RETAINER REAR LH <i>re</i>	1.00	42.68	8.54	34.14	L	Y	
18 BUMPER RETAINER REAR RH <i>re</i>	1.00	42.68	8.54	34.14	L	Y	
19 BUMPER SPONGE REAR <i>2RA</i>	1.00	1,133.52	226.70	906.82	L	Y	
20 BUMPER REINFORCEMENT REAR <i>2RA</i>	1.00	462.30	92.46	369.84	L	Y	
21 REINFORCEMENT BRACKET REAR LH <i>HT</i>	1.00	79.75	15.95	63.80	L	Y	
22 REINFORCEMENT BRACKET REAR RH <i>HT</i>	1.00	79.75	15.95	63.80	L	Y	
23 BUMPER LOWER REAR <i>re X repair</i>	1.00	0.00	0.00	0.00	L	Y	
24 BUMPER PROTECTOR REAR LH <i>re</i>	1.00	102.96	20.59	82.37	L	Y	
25 BUMPER PROTECTOR REAR RH <i>X</i>	1.00	102.96	20.59	82.37	L	Y	
26 FENDER REAR LH <i>re repair</i>	1.00	1,598.30	319.66	1,278.64	L	Y	
27 TAIL LAMP LH <i>X</i>	1.00	323.40	64.68	258.72	L	Y	
28 TAIL LAMP RH <i>CH</i>	1.00	323.40	64.68	258.72	L	Y	
29 END PANEL <i>HT</i>	1.00	338.29	67.66	270.63	L	Y	
30 END PANEL TOP GARNISH <i>re</i>	1.00	52.02	10.40	41.62	L	Y	
31 SPARE TYRE PANEL <i>repair</i>	1.00	812.90	162.58	650.32	L	Y	
32 SPARE TYRE INNER TRIM LH <i>X</i>	1.00	164.14	32.83	131.31	L	Y	
33 SIDE PANEL REAR RH <i>repair</i>	1.00	229.30	45.86	183.44	L	Y	
34 SIDE PANEL REAR LH <i>repair</i>	1.00	229.30	45.86	183.44	L	Y	
35 BOOTLID STICKER -BOOKING 65521111 <i>re</i>	1.00	125.00	0.00	<del>125.00</del> 80	S	Y	
36 BOOTLID STICKER -CITYCAB <i>re</i>	1.00	100.00	0.00	<del>100.00</del> 80	S	Y	
37 BOOTLID INSULATOR CLIPS SET <i>re</i>	1.00	35.00	0.00	35.00	S	Y	
38 BUMPER PROTECTOR PAD REAR <i>re</i>	1.00	180.00	0.00	<del>180.00</del> 120	S	Y	
39 REVERSE SENSOR SET <i>re</i>	1.00	250.00	0.00	<del>250.00</del> 200	S	Y	
40 BUMPER CLIPS SET REAR <i>re</i>	1.00	35.00	0.00	35.00	S	Y	
41 FENDER SEALANT REAR <i>X</i>	1.00	50.00	0.00	50.00	S	Y	
42 WINDSCREEN SEALANT REAR <i>X</i>	1.00	50.00	0.00	50.00	S	Y	
43 END PANEL TOP GARNISH CLIPS <i>re</i>	1.00	35.00	0.00	35.00	S	Y	
44 END PANEL SEALANT <i>re</i>	1.00	50.00	0.00	<del>50.00</del> 30	S	Y	
45 SPARE TYRE PANEL SEALANT <i>X</i>	1.00	80.00	0.00	80.00	S	Y	
TOTAL:		10,256.61	1,853.32	8,403.29			
TOTAL PARTS & LABOUR:		15,546.61	1,853.32	13,693.29			

EXCESS/LOADING:\$S\$ 0.00

No. Of Day:

*8 days*RE-SURVEY: BEFORE AFTER PAINTING  
PART-BY-PART OF LUMP SUM \$S\$DATE OF SURVEY: *22 / 04 / 19*

SURVEYED BY:

*Rasul*

CONTACT NO:

*90010068*

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

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:

G-STAR-WI-ET-001-02-Rev00

*Labour \$2230**SN \$ 615**Parts \$2732.05 After 20%**Ltst \$5577.05 - 20% L/S**total \$4461.64*

## 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 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. 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.

### ACCIDENT STATEMENT

Date Of Report	18/04/2019 14:35
Date Of Accident	18/04/2019 10:10
Exact Location Of Accident	ALONG SIN MING AVE TOWARDS BISHAN
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7805M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA-2.0 (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? NO

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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	THERUMARAJ S/O RAMASAMY
NRIC No	S8030086G
Date Of Birth	22/08/1980
Occupation	OUTDOOR
Date Of Driving Pass	05/04/2001
Driving Experience	18 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92271985
Fax Number	
Contact Number	
Email Address	NOEMAIL



Address	APT BLK 677C JURONG WEST STREET 64 #02-287 SINGAPORE
Postcode	643677
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACH STATEMENT .

#### 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	SGU1315S
Vehicle Make/Model/Colour	SUZUKI SWIFT (YELLOW)
Details Of Properties	FRONT PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	LEONG HOI PANG
NRIC/Passport Number	S9735812E
Contact Number	90864719
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8030086G



Name  
THERUMARAJ S/O RAMASAMY

தர்மராஜ் ராமசாமி

Race  
INDIAN

Date of birth  
22-08-1980

Sex  
M

Country/Place of birth  
SINGAPORE



S8030086G



NRIC No. S8030086G



Date of issue  
17-02-2014

Address  
APT BLK 677C JURONG WEST STREET 64  
#02-287  
SINGAPORE 643677

5269395

REPUBLIC OF SINGAPORE DRIVING LICENCE



NRIC No. S8030086G

THERUMARAJ S/O RAMASAMY

Birth Date: 22 Aug 1980  
Issue Date: 11 Feb 2011



001930467H

YOU ARE PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles < 200 CC  
Class 2A Motorcycles between 201 CC and 400 CC  
Class 2 Motorcycles > 400 CC  
Class 3 Motor cars < 3000 kg with < 7 passengers, exclusive of the driver, and motor tractors/vehicles < 2500 kg

21 Jan 2000  
04 Sep 2001  
16 Apr 2015  
05 Apr 2001

S8030086G

S / No. 9000216994



Licence No: S8030086G

NP 428A

Land Transport Authority



VOCATIONAL LICENCE

NRIC No. S8030086G

THERUMARAJ S/O RAMASAMY

Issue Date: 17/02/2014

Please visit www.lta.gov.sg to check the validity of this vocational licence

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	08/12/2010
03	BUS VL	23/01/2008
04	BUS ATTENDANT	23/01/2008



Vehicle No: SHL 7805M (Hirer / Relief)

Reporting Date: 18/4/19 Time: 14:01 hrs

Accident Date: 18/4/19 Time: 16:10 hrs

[OD TP / WC / Cash] [PG: Q] + [SPD: Q Km/H]

Mileage: 18456

[HP: 9227/985] [Weather Condition: Clear / Raining / other: ] [Road surface: Wet / Dry / Other: ]

[Location: Along Sin Ming Ave Towards Bishan]

TP1: Number Plate SL9U1315 Name: Leong Hai Pong NRIC: S9735812E HP: 90864719

TP2: Number Plate \_\_\_\_\_ Name: \_\_\_\_\_ NRIC: \_\_\_\_\_ HP: \_\_\_\_\_

TP3: Number Plate \_\_\_\_\_ Name: \_\_\_\_\_ NRIC: \_\_\_\_\_ HP: \_\_\_\_\_

[Witness: ] [HP: ] [Tow: Y/N]

18 APR 19 14:01



## 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:

- (a) 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) of:
  - (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.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

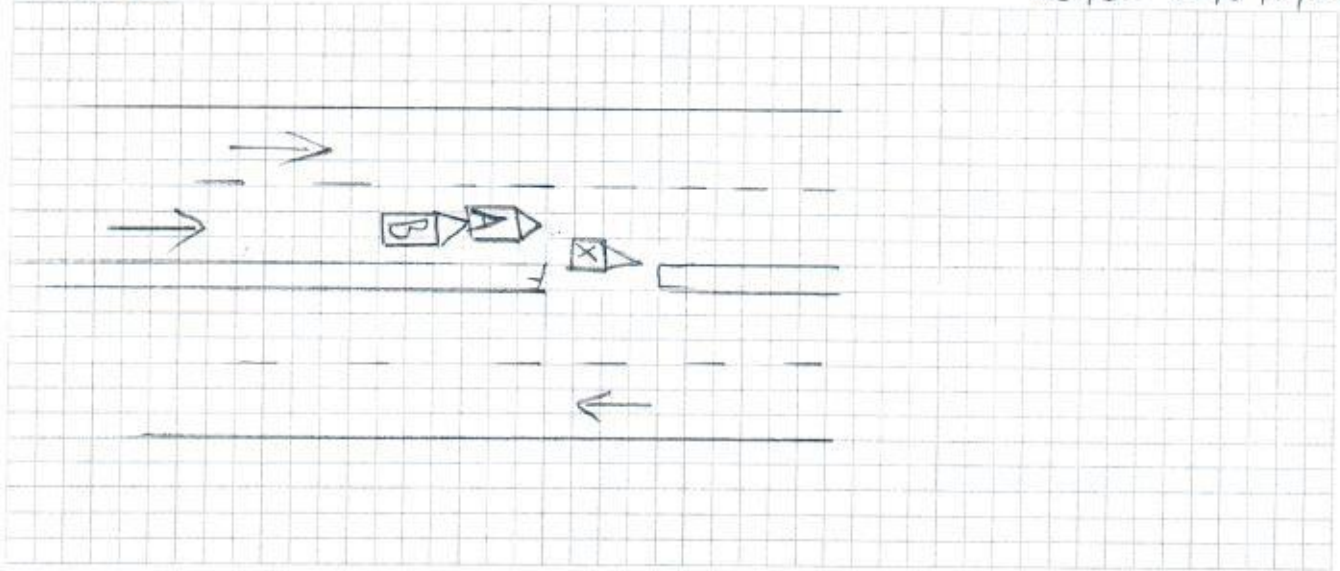
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN

veh A: SHC7805M  
veh B: SGU 13155



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 18 April 2019 at or about 1010 hours, while I was travelling along the Sin uling ave I spotted veh number SHB 6688X Suddenly stopped to make a right turn to the carpark without giving amber time. But I still manage to stop on time. Suddenly I heard a loud bang which is the rear vehicle SGU 13155 hit me from the back to cause an accident, causing damages to my taxi ~~bumper~~ rear portion.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**Third Party Insurer Enquiry**

Our Ref No: GR-19-061444

Date of Request: 18/04/2019

Your Ref No:

Online Purchase

Ding Auto Pte Ltd  
Blk 10, #01-20  
Sin Ming Industrial Estate Sector C  
Singapore 575645

Dear Sir/Madam,

Enquiry Date 18/04/2019  
Enquiry By You Jing Feng  
P Vehicle No. SGU1315S  
Accident Date 18/04/2019

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGU1315S	AXA Insurance Pte Ltd	23/03/2018-01/05/2019	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-19-061444

Date of Request: 18/04/2019

Your Ref No: Online Purchase

Ding Auto Pte Ltd  
Blk 10, #01-20  
Sin Ming Industrial Estate Sector C  
Singapore 575645

Dear Sir/Madam,

Enquiry Date 18/04/2019  
Enquiry By You Jing Feng  
Vehicle No. SGU1315S  
Accident Date 18/04/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ [X] GIRO ☐ [ ] Cash ☐ [ ] Cheque





Our Ref: CC19040512



Date: 18 April 2019

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	18/04/2019 @ 10:10 hrs
ALONG	ALONG SIN MING AVE TOWARDS BISHAN
INVOLVING	SGU1315S

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 **SHC7805M** (the "Taxi"). The Taxi was hired to **THERUMARAJ S/O RAMASAMY IC NO S8030086G** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$105.54** 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 SHC 7805M & SGU 1315 S ON 18/04/19

I, Therumangal s/o Ramasamy NRIC NO. S8030086G of  
citycab pte ltd owner/ hirer of the Vehicle Registration  
No. SHC 7805M hereby authorize **Ding Automotive Pte  
Ltd** to submit, correspond, negotiate and settle my claim for  
cost of repair and uninsured losses arising from the above  
accident.

I further authorize that agreed settlement sum for cost of  
repair, loss of income and rental, survey report fee, third  
party vehicle insurance particulars enquiry fee etc. Be made  
in favour of the **Ding Automotive Pte Ltd** and that the said  
payment be forwarded to them as full and final discharge of  
my claim.

SIGNED BY:



DATE:

18/04/19

## Satisfaction Voucher

Date: 24/04/2019

MS First Capital Insurance Limited

24 APR '19 8:26

Attention: MOTOR CLAIMS DEPT

Dear Sir/Madam

Therumogan

I/We hereby acknowledge having received from Singapore Technologies Kinetics

Ltd., 249 Jalan Boon Lay, Singapore 619523, my/our vehicle number SHC7805M

which has been repaired to my/our satisfaction and acceptance. I/We admit that

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 50111585 in respect of the damage caused to the

said vehicle in an accident that occurred thereto or about the 18/04/2019

at ALONG SIN MING AVE TOWARDS BIE

Dated this day of \_\_\_\_\_, 201 \_\_\_\_\_

Signature: 

NRIC No: 58030086G

Name: CityCab PTE LTD (Fleet)

Address: 383 SIN MING DRIVE  
SINGAPORE 575717 0

Company Stamp if applicable



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 Number of Vehicle	All CityCab taxis operating in the Republic of Singapore.
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 taxi.
- Use for social, domestic and pleasure purposes.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) 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)

A/C NO. : B0101

  
Authorised Signature

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: AXA INSURANCE

ACCIDENT DATE: 18/04/2019

REF: -----

OIC: CLAIMS OFFICER

OUR REF: SHC7805M

DATE: 14/5/2019

ITEM NO.	DESCRIPTION	UNIT PRICE	AMOUNT
1	Repair Cost	\$ 4,450.00	\$ 4,450.00
2	LTA/Merimen Search Fee	\$ 1.87	\$ 1.87
3	Loss of Rental (w/o GST) [98.64X07]	\$ 690.48	\$ 690.48
4	Loss of Income (w/o GST) [80X07]	\$ 560.00	\$ 560.00
5	Towing Fee	\$ -	\$ -
6	Surveyor Fee	\$ -	\$ -
REMARKS :		SUB TOTAL :	\$ 5,702.35
		7% GST	\$ 311.63
		GRAND TOTAL :	\$ 6,013.98

Yours faithfully,



Authorise Signature of Ding Automotive Pte Ltd



**ACCIDENT INVOLVING SHC7805M AND SGU1315S ON 18/04/2019  
ARRANGE SURVEY**

Taxis Customer Service to: Motor.survey

Thu 18 Apr 2019 05:32 PM

Cc: ACCOUNTS, ADMIN, "Dd hashim", Claims, accounts

From: Taxis Customer Service/KAS/CBG/ST Kinetics  
To: Motor.survey@axa.com.sg  
Cc: ACCOUNTS@DINGAUTO.SG, ADMIN@DINGAUTOMOTIVE.COM.SG, "Dd hashim"  
<dd.hashim@dingauto.sg>, Claims@dingautomotive.com.sg,  
accounts@dingautomotive.com.sg

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[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 on to survey SHC7805M .**

**This vehicle SHC7805M already in 31 Corporation Road 649825 .**



SAS2587057 (1).PDF Invoice.html

**Thanks**

**Best Regards**

**Ding Automotive Pte Ltd  
Guang  
94669828 / 62657130**

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**Request Book Value of SHC7805M**

**Taxis Customer Service** to: doris\_lim

Mon 22 Apr 2019 05:12 PM

Cc: wongsk

From: Taxis Customer Service/KAS/CBG/ST Kinetics  
To: doris\_lim@cdgtaxi.com.sg  
Cc: wongsk@stengg.com

[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.]

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Dear Doris ,

The vehicle **SHC7805M** accident date is 18/04/2019

Accident involving vehicle : **SHC7805M**

Kindly send me the Book Value & Projection Value.

Thank you

Best Regards

*Ding Automotive Pte Ltd*

*ARC*

*Alex Khong*

*Hp : 83039588 / 62657130*



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**50111585-SHC7805M - Finalize Amount & After Repair Photo**

**Taxis Customer Service**

to: sur, rasul

Sat 27 Apr 2019 09:43 AM

Cc: "Dd hashim", Claims, ACCOUNTS, ADMIN, "Kelly Ding", "You  
jingfeng", thinthin, vivianlau, AsherSng, admin-a, cs-a

From: Taxis Customer Service/KAS/CBG/ST Kinetics  
To: sur@lkkauto.com, rasul@lkkauto.com  
Cc: "Dd hashim" <dd.hashim@dingauto.sg>, Claims@dingautomotive.com.sg,  
ACCOUNTS@DINGAUTO.SG, ADMIN@DINGAUTOMOTIVE.COM.SG, "Kelly Ding"  
<kelly.ding@dingauto.sg>, "You jingfeng" <jingfeng@dingauto.sg>,

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[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 see below for the finalize according to our conversion to finalize for **SHC7805M**

Please refer below attachment & estimate & after paint for **SHC7805M**

Total Repair - 8 Days

Lump Sum Repair

LABOUR = \$2230

S/N = \$615

PARTS AFTER AAA -20% =\$2732.05

TOTAL (L+S+P) = \$5577.05 -20% Lump Sum

FINALIZE AMOUNT = \$4461.64

Thank You

Best Regards

Ding Automotive Pte Ltd

ARC

ALEX K

Hp : 86891857/ 62657130



DSC07945.JPG



DSC07944.JPG



DSC07943.JPG



DSC07942.JPG



DSC07941.JPG



9f99e464-4c51-4d68-a2bb-37f6a1e96515.jpg 1759ba78-73e0-47bd-887c-23ef8c933612.jpg



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**claims@dingautomotive.com.sg**

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**From:** claims@dingautomotive.com.sg  
**Sent:** Monday, 13 May 2019 4:02 PM  
**To:** 'Rasul (LKKAUTO)'  
**Cc:** 'Dd hashim'; 'ACCOUNTS@DINGAUTO.SG'; 'ADMIN@DINGAUTOMOTIVE.COM.SG'; 'Kelly Ding'; 'You jingfeng'; 'Asher Sng (LKKAUTO)'; 'taxiscs'  
**Subject:** RE: 50111585-SHC7805M - Finalize Amount & After Repair Photo

Dear Mr Rasul,

Thank you for finalize amount.

We confirm this finalize amount and would prepare LOD for submission.

Thank you.

Best Regards,

**Hailey**

Motor Claims Department  
Ding Automotive Pte Ltd  
DID: 81203490

---

**From:** Rasul (LKKAUTO) [<mailto:Rasul@lkkauto.com>]  
**Sent:** Monday, 13 May 2019 2:50 PM  
**To:** [taxiscs@stengg.com](mailto:taxiscs@stengg.com)  
**Cc:** Dd hashim; [Claims@dingautomotive.com.sg](mailto:Claims@dingautomotive.com.sg); [ACCOUNTS@DINGAUTO.SG](mailto:ACCOUNTS@DINGAUTO.SG); [ADMIN@DINGAUTOMOTIVE.COM.SG](mailto:ADMIN@DINGAUTOMOTIVE.COM.SG); Kelly Ding; You jingfeng; Asher Sng (LKKAUTO)  
**Subject:** RE: 50111585-SHC7805M - Finalize Amount & After Repair Photo

Hi Alex,

Finalised amount is at \$ 4450 / 8 days lump sum

Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*

**From:** [taxiscs@stengg.com](mailto:taxiscs@stengg.com) [<mailto:taxiscs@stengg.com>]  
**Sent:** Saturday, 27 April, 2019 9:43 AM  
**To:** SUR; Rasul (LKKAUTO)  
**Cc:** Dd hashim; [Claims@dingautomotive.com.sg](mailto:Claims@dingautomotive.com.sg); [ACCOUNTS@DINGAUTO.SG](mailto:ACCOUNTS@DINGAUTO.SG); [ADMIN@DINGAUTOMOTIVE.COM.SG](mailto:ADMIN@DINGAUTOMOTIVE.COM.SG); Kelly Ding; You jingfeng; Cecilia Chong (LKK Auto); Vivian Lau (LKKAUTO); Asher Sng (LKKAUTO); Admin A; CS A Team  
**Subject:** 50111585-SHC7805M - Finalize Amount & After Repair Photo