

**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 SHD0067S and SKV2483E along Buangkok Green on 04/10/15 09:30 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 9 (day) of April 2019

Yours Faithfully

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager



## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKV 2483E	(Insd veh)	Model: CHEVROLET EPICA 2.0 (A)
	SHD 67S	(TP veh)	
Date of Accident/ Time:	04/10/2015		

Repair Estimate	: S	18,908.27	
Final Repair Cost	: S		
Loss of Use	: S		days at S per day
Rental (if any)	: S		days at S per day
LTA / GIA Search Fee	: S		
Others	: S		
Final Settlement Sum (Global Sum)	: S	1,800.00	
Payee Name : TRANS-CAB AUTO SERVICES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability	(%)
B)	For GIA Registered Workshop:	BOLA Applicable: <del>Yes</del> No	BOLA Scenario No: <u>NIL</u>
	BOLA Liability: (%)	Assessed Liability (*):	50 (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

## NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are *not received within 7 days* of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a full and final settlement that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

 Signature of workshop representative: <u>NG WAH YIN</u> Date: <u>13 JAN 2020</u>  	Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Amanda my</u> Date: <u>13/01/2020</u>
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>13/01/2020</u>	

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09 April, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 04/10/15 09:30 PM at Buangkok Green

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. SHD0067S. The taxi was hired to MOKSIN BIN MOKIM a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate ~~\$85.07~~<sup>\$81.01</sup> per day (inclusive of GST).
2. Please be advised that the Taxi is insured with FIRST CAPITAL INSURANCE LIMITED 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

*This is a computer generated print-out. No signature is required.*

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04-10-2015

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
<b>Accident No.</b>	AAD1510-044	<b>Accident Date</b> 04-10-2015
5/10/2015 12:05	12/10/2015 15:00	SHD00675

Yours Faithfully,

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

**Enquire Vehicle & Owner Information ( Vehicle No. SKV2483E As At 04 Oct 2015 / 21:30:00 )****Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: TCS(ROEL)SHD67S

**Current Owner Details**

Owner ID Type: Company

Owner ID: 201504621K

Owner Name: LION CITY RENTALS PTE. LTD.

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 50

Registered Street Name: UBI AVENUE 3

Registered Unit No.: # 01 - 12

Registered Building Name: FRONTIER

Registered Postal Code: 408866

**Current Vehicle Details**

Vehicle No.: SKV2483E

Make Description/Model: TOYOTA / COROLLA ALTIS CLASSIC 1.6 CVT

Insurance Company Name: AXA INSURANCE SINGAPORE PTE LTD



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