



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

29 AUGUST 2019

**YAP CHIN PO**  
APT BLK 124 PENDING ROAD  
#06-10  
SINGAPORE 670124

Dear Sir/ Mdm

**OUR REF : CC3/ASM19013868/Kwb3**

**YOUR REF : SMK 7258R**

**ACCIDENT INVOLVING SMK 7258R AND SHC 5973Z ALONG/AT NEAR JUNCTION OF  
TAMPINES AVE 7 & ST 45 ON 05/08/2019**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a third party claim(s) from TRANS-CAB AUTO SERVICES PTE LTD acting on behalf of the owner of SHC 5973Z against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your driver's favour as your vehicle changed lane and collided with third party. Under Motor Accident Guide, vehicles should keep in the proper lane and change lane only when it is safe. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to [vivianlau@lkkauto.com](mailto:vivianlau@lkkauto.com) within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) or deliver it by hand to AXA Customer Care Centre.

This letter should not be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact as at Ms. Vivian Lau (LKK Handler) 6841 8625 or [vivianlau@lkkauto.com](mailto:vivianlau@lkkauto.com). Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Vivian Lau  
Case Handler  
DID: 6841 8625  
FAX: 6741 4108  
EMAIL: [vivianlau@lkkauto.com](mailto:vivianlau@lkkauto.com)

cc AXA INSURANCE 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

**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 SHC5973Z and SMK7258R along TAMPINES AVENUE 7 on 05/08/19 07:35 AM.

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 16 (day) of August 2019

Yours Faithfully  
Trans-Cab Services Pte Ltd



Jasmine Tan  
General Manager



## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SMK7258R (Insd veh)	Model: RENAULT LATITUDE-2.0 D DCI (A)
	SHC5973Z (TP veh)	
Date of Accident/ Time:	05/08/2019	

Repair Estimate	: \$	63,280.54	
Final Repair Cost (WGST)	: \$	3,317.00	
Loss of Use (Less <del>Loss</del> Taken Sum)	: \$	150.00	3 days at \$ 50.00 per day
Rental (if any)	: \$	290.97	3 days at \$ 96.99 per day
LTA / GIA Search Fee	: \$	7.49	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	3,765.46	
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: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No BOLA Scenario No: 15	
	BOLA Liability: 100 (%)	Assessed Liability (*): _____ (%)	
* 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 WALYIN</u> Date: <u>16 OCT 2019</u>   Signature of AXA's surveyor/representative: <u>LKK</u> Name of AXA's surveyor /Representative: <u>KSC</u> Date: _____	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Irene Tan</u> Date: <u>16 OCT 2019</u>
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**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

16 August, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 05/08/19 07:35 AM at TAMPINES AVENUE 7

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. SHC5973Z. The taxi was hired to ONG CHEOW HIN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$96.99 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

05-08-2019

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>	AAD1908-030	<b>Accident Date</b> 05-08-2019
8/5/2019 13:00	8/7/2019 15:00	SHC5973Z

**Yours Faithfully,**

**Trans-Cab Services Pte Ltd**



**Jasmine Tan**

**General Manager**

### Vehicle Insurance Particulars Result

Save as PDF

8/5/2019

Receipt

&gt; Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 05 Aug 2019 / 17:05:44

Receipt Date/Time : 05 Aug 2019 / 17:05:44

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190805-002432

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - GBD317S				
As at 02 Aug 2019/13:45:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
1	Insurance Enquiry - GBD317S Enquiry Fee 20190805170412090018	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
Result of Insurance Enquiry - SMK7258R				
As at 05 Aug 2019/07:35:00				
Insurance Co: AXA INSURANCE PTE LTD				
2	Insurance Enquiry - SMK7258R Enquiry Fee 20190805170412134318	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		14.00	0.98	14.98
<b>Rounding Difference</b>				0.03
<b>Total Amount Payable</b>				14.95
Paid By				
	xxxxxxxxxxxx8127	Credit Card: Visa/MasterCard		14.95
<b>Total</b>				14.95
<b>Cash Change</b>				0.00
<b>Tendered Amount</b>				14.95
<b>Excess Refundable Amount</b>				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.