

To : M/s EQ INSURANCE COMPANY LTD

Date: 19/05/2020

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	YN 3578K (Insd Veh)	Your Ref. No. : DM19HO02296-JG
	SHD 5318K (TP Veh)	Our Ref. No. : C3/EQI19014000/Kpa3q2
Date of Accident	3/8/2019	

Liability	50%	
Final Repair Cost	: \$ 342.40	
Loss of Income	: \$	days
Rental (If any)	: \$ 141.75	2.5 days
Others:	: \$ 7.45	
	: \$	
	491.60	
Final Settlement Sum	: \$ 470.00	GLOBAL SUM
Remarks	:	

Payment Instruction: Payee's Breakdown		
1)	TRANS-CAB AUTO SERVICES PTE LTD	: \$ 470.00
		: \$

JOANNE LEE
LKK Auto Consultants 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

Our Ref : AAD1908-039

Your Ref : YN3579K

Date : 21.August 2019

EQ INSURANCE LIMITED

Dear Sir/Madam,

ACCIDENT INVOLVING SHD5318K AND YN3579K ON 03/08/19 07:30 PM ALONG UPPER CROSS STREET

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	684.80
2.	Loss of Rental for <u>5</u> days @ \$ <u>113.40</u> per day	\$	567.00
3.	Loss of Income for _____ days @ \$ _____ per day	\$	0.00
4.	LTA Search Fee	\$	7.49
5.	Survey Fee	\$	0.00
	Total	\$	1,259.29

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)



Auto
Consultants
Pte Ltd

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

Our Ref: CC3/EQ19014000/Kpa3

07 OCT 2019

FIBERLAN PTE LTD

11 WOODLANDS CLOSE

#01-27 WOODLANDS 11

SINGAPORE 737853

Attn: The Management

Dear Sir/Madam,

ACCIDENT INVOLVING YN 3578K(EQ) AND SHD 5318K ON 03/08/2019

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

We have received a claim from SHD 5318K against your insurance policy.

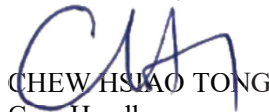
Both parties involved have given conflict of version. Based on the circumstances of accident and both parties damage profile, there is no conclusive evidence to substantiate either's parties version. Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

If you have evidence/information to proof that we should not settle the third party claim, kindly let us have them in writing within the next 10 days i.e. by **17/10/2019**, after we shall proceed with negotiation with Third Party claimant on the without prejudice basis and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please note that your No-Claim Discount (NCD) (if any) will be affected upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,



CHEW HSIAO TONG
Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

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 SHD5318K and YN3579K along UPPER CROSS STREET on 03/08/19 07:30 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 21 (day) of August 2019

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666**Fax:** 6287 7764**Co. Reg. No.:** 201019626G**GST Reg. No.:** 201019626G**Tax Invoice / Debit Note**

TO: EQ INSURANCE COMPANY LIMITED 5 Maxwell Road #17-00 Tower Block, MND Complex 069110 Singapore ATTENTION:	INVOICE NO. : INV1908-158 DATE : 21. August 2019 REFERENCE NO : AAD1908-039 TERMS : DUE DATE : 21. August 2019 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD5318K; DOA 03.08.19(PART-BY-PART-19)	1	684.80	684.80

Total SGD Excl. GST : 640.00
7% GST : 44.80
Total SGD Incl. GST : 684.80

****** SIX HUNDRED EIGHTY FOUR AND EIGHTY SGD ONLY ******

- 1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"
- 2) Please quote our Invoice Number during payment.
- 3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
- 4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

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

21 August, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 03/08/19 07:30 PM at UPPER CROSS STREET

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. SHD5318K. The taxi was hired to FOO SHANG KUAN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$113.4 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

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

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

03-08-2019

Dear Sir/Madam,

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

Date In	Date Out	Vehicle No.
Accident No.	AAD1908-039	Accident Date 03-08-2019
8/8/2019 13:15	8/8/2019 15:00	SHD5318K
8/13/2019 10:00	8/16/2019 15:00	SHD5318K

Yours Faithfully,

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

> Back to OneMotoring



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

Print Date/Time : 06 Aug 2019 / 17:30:21

Receipt Date/Time : 06 Aug 2019 / 17:30:21

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190806-002627

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - YN3578K As at 03 Aug 2019/19:30:00 Insurance Co: EQ INSURANCE COMPANY LTD				
1	Insurance Enquiry - YN3578K Enquiry Fee 20190806172928718190	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				
	xxxxxxxxxxx8127	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.

[> Back to OneMotoring](#)**Vehicle Insurance Particulars Result**

Vehicle No.	Incident Date/Time	Insurance Company Name
YN3578K	03 Aug 2019 / 19:30:00	EQ INSURANCE COMPANY LTD

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