

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

To: M/s EQ INSURANCE COMPANY LTD

Date: 10/01/2020

THIRD PARTY DIRECT SETTLEMENT

Vahiala Na	GBE 991P	(Insd Veh)	Your Ref. No. : DM19HO02614-JG
Vehicle No.	SHC 5072Z	(TP Veh)	Our Ref. No. : CC3/EQI19016754/K1ga3s2
Date of Accident	19/9/2019		

Liability		100%			
Final Repair Cost	: \$	5,992.00	(W/GST)		
Loss of Income	: \$	300.00	6 days		
Rental (If any)	: \$	486.78	6 days		
Others:	: \$	7.49	*		
	: \$				
		6,786.27			
F: 10 III 10		0.700.07			
Final Settlement Sum	: \$	6,786.27			
Remarks	: F	PLEASE SEND THE	ASE SEND THE CHEQUE PAYMENT TO TRANS-CAB AUTO SERVICES PTE LTD		
		NO.2 ANG MO KIO ST 63 SINGAPORE 569111			

Pay	ment Instruction: Payee's Breakdown		
1)	TRANS-CAB AUTO SERVICES PTE LTD	: \$	6,786.27
		: \$	
	(χ	

NUR SHAQILAH 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

: AAD1909-177

Your Ref

: GBE991P

Date

: 19.November 2019

EQ INSURANCE LIMITED

Dear Sir/Madam,

ACCIDENT INVOLVING SHC5072Z AND GBE991P ON 19/09/19 01:15 PM ALONG GAMBAS AVE SLIP RD TOWARDS WOODLANDS AVE 12

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)	\$ 5,992.00	
2.	Loss of Rental for $\frac{6}{}$ days @ $\frac{81\cdot13}{}$ per day	\$ 486.78	
3.	Loss of Income for $\frac{6}{}$ days @ \$ $\frac{50}{}$ per day	\$ 300.00	
4.	LTA Search Fee	\$ 7.49	
5.	Survey Fee	\$ 0.00	
	Total	\$ 6,786.27	

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.sq (6603 1259)



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

Our Ref: CC3/EQI19016754/K1ga3

19 NOVEMBER 2019

ZONGZEN ELECTRICAL ENGINEERING 311B ANCHORVALE LANE #17-24 SINGAPORE 542311

Dear Sir/Madam.

ACCIDENT INVOLVING GBE 991P AND SHC 5072Z ON 19/09/2019

We refer to the above accident. We are the Appointed Surveyor and Loss Adjuster Company by your Motor Insurer (EQ INSURANCE COMPANY LIMITED) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

This is to inform you that we received a Third Party Claim from SHC 5072Z.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) 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. (NO ACTION IS REQUIRED)

Yours faithfully.

CECILIA CHONG

Case Handler

DID: 6749 4274 FAX: 6741 4108

EMAIL: ceciliachong@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 SHC5072Z and GBE991P along GAMBAS AVE SLIP RD TOWARDS WOODLANDS AVE 12 on 19/09/19 01:15 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 30 (day) of September 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.

: INV1911-042

DATE

: 19. November 2019

REFERENCE NO : AAD1909-177

TERMS

DUE DATE

: 19. November 2019

PAGE

: 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
		Invoice No. INV1909-207:			
1.	6050101	REPAIR-SHC5072Z; DOA 19.09.19(LUMP SUM-19)	1	5,992.00	5,992.00

Total SGD Excl. GST:

5,600.00

7% GST:

392.00

Total SGD Incl. GST:

5,992.00

**** FIVE THOUSAND NINE HUNDRED NINETY TWO 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.

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 30 September, 2019 To Whom It May Concern Dear Sir / Madam, Accident on 19/09/19 01:15 PM at GAMBAS AVE SLIP RD TOWARDS WOODLANDS AVE 12 We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the 1. registered owner of the taxi bearing vehicle registration no. SHC5072Z. The taxi was hired to CHNG ENG HOON a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$81.13 per day (inclusive of GST). Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the 2. material time of the accident. Please liaise with us directly for any settlement of claims in respect of the said accident. 3. 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

19-09-2019

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.	AAD1909-177		Accident Date	19-09-2019
9/19/2019 14:40	9/24/2019 16:00	SHC5072Z		

Yours Faithfully,

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

19 Sep 2019 / 17:20:36

Receipt Date/Time: 19 Sep 2019 / 17:20:36

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190919-002543

Previous Receipt No.:

Pievi	ous Receipt No				
S/N	Item Description/ Business Transaction Reference		Amount Before	GST Amount	Amount After GST
	No.		GST (S\$)	(S\$)	(S\$)
Post	ılt of Insurance Enquiry - SJA865Y		()	(-+)	(-+)
	t 18 Sep 2019/07:15:00				
	rance Co: AVIVA LTD				
1					
3	Insurance Enquiry - SJA865Y Enquiry Fee		7.00	0.49	7.49
	20190919171913558152		7.00	0.49	7.45
	20 1000 10 11 10 10000 102	Sub-Total	7.00	0.49	7.49
Boot	ult of Incurance Enquiry SKK6117	ous-rotal	7.00	0.43	7.40
	ult of Insurance Enquiry - SKK611Z				
	t 18 Sep 2019/13:30:00	DTE 1.TD			
	ance Co: AIG ASIA PACIFIC INSURAN	ICE PIE. LID.			
2	Insurance Enquiry - SKK611Ž		7.00	0.40	7.49
	Enquiry Fee 20190919171914278436		7.00	0.49	7.49
	20130313171314270430	Sub-Total	7.00	0.49	7.49
D	th of languages Francisco ODF004D	Sub-Total	7.00	0.49	7.45
	ult of Insurance Enquiry - GBE991P				
	t 19 Sep 2019/13:15:00				
	rance Co: EQ INSURANCE COMPANY	LID			
3	Insurance Enquiry - GBE991P		7.00	0.40	7.40
	Enquiry Fee 20190919171914319530		7.00	0.49	7.49
	20130313171314313330	Sub-Total	7.00	0.49	7.49
Resi	ult of Insurance Enquiry - SLM5021X		7.00	0.10	,,,,
	19 Sep 2019/11:10:00				
	rance Co: FWD SINGAPORE PTE. LTD	1			
4	Insurance Enquiry - SLM5021X	<i>.</i> .			
4	Enquiry Fee		7.00	0.49	7.49
	20190919171914368855		7.00	0.40	7.10
		Sub-Total	7.00	0.49	7.49
Resi	ult of Insurance Enquiry - SGX5496K	1	,,,,,,,	17.003	
	t 18 Sep 2019/18:50:00				
	rance Co: DIRECT ASIA INSURANCE	(SINGADODE) DTE LTD		¥	
5	Insurance Enquiry - SGX5496K	(SINGAPORE) FIL LID			
3	Enquiry Fee		7.00	0.49	7.49
	20190919171914402104		7.00	0.40	710
		Sub-Total	7.00	0.49	7.49
		Total Before Rounding	35.00	2.45	37.45
		Rounding Difference	00.00	2.40	0.00
		<u>₹₹</u> (
		Total Amount Payable			37.45
		Paid By			
		· ·	Credit Card:		
		xxxxxxxxxxxxx8127	Visa/MasterCard		37.45
		Total			37.45
		Cash Change			0.00
		Cash Change			0.00