



DING AUTOMOTIVE PTE LTD
Blk 10 #01-20 Sin Ming
Industrial Est Sec C
Singapore 575645

Without Prejudice
to our driver's Injury claim

OUR REF: 50112086/TP/SHA8112H/AD/29/06/2019/DD
YOUR REF: SHC84955/--

18 October 2019
To: MOTOR CLAIMS DEPARTMENT
INDIA INTERNATIONAL INSURANCE
64 CECIL STREET #04/#05 IOB
BUILDING SINGAPORE 049711

ACCIDENT INVOLVING : SHA8112H AGAINST SHC84955 ON 07/10/2019
LOCATION ALONG : MARINA BAY SANDS TAXI STAND
We refer to the above matter:

| | Rate Per Day | Repair/ Claims Day | Amount Before GST | GST 7% | Amount After GST |
|-----------------------|--------------|--------------------------|----------------------|-----------|---------------------|
| Cost of Repair | \$ - | 2 | \$ 1,040.70 | \$ 72.85 | \$ 1,113.55 |
| Loss Of Rental | \$ 117.00 | 2 | \$ 234.00 | \$ - | \$ 234.00 |
| Loss Of Income | \$ 80.00 | 2 | \$ 160.00 | \$ - | \$ 160.00 |
| LTA/GIA Search Fee | \$ - | 0 | \$ 6.96 | \$ 0.49 | \$ 7.45 |
| Towing Fee | \$ - | 0 | \$ - | \$ - | \$ - |
| Surveyor Fee | \$ - | 0 | \$ - | \$ - | \$ - |
| Total | \$ 197.00 | 2 | \$ 1,441.66 | \$ 73.34 | \$ 1,515.00 |

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:

| | | | |
|---|--------------------------------------|---|--|
| ☺ | Letter of Demand | ☺ | Rental Invoice |
| ☺ | Final Bill | ☺ | Letter of Authority |
| ☺ | Repair Estimate | ☺ | Discharge Voucher |
| ☺ | GIA Report/Accident Police Report | ☺ | Certificate of Insurance |
| ☺ | LTA 3 rd Party Search Fee | ☺ | Confirmation Finalize/Liability Email Copy |
| ☺ | Mileage Record | ☺ | |

Our client 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,
DD HASHIM
DING AUTOMOTIVE PTE LTD
TEL: +65 8116 0811
FAX: +65 6452 0614

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: INDIA INTERNATIONAL INS

ACCIDENT DATE:07/10/2019

REF:--

OIC:MS CECILIA

OUR REF : SHA8112H

DATE : 18/10/2019

| ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT |
|-----------|--------------------------|-------------|-------------|
| 1 | Cost of Repair -SHA8112H | \$ 1,040.70 | \$ 1,040.70 |
| REMARKS : | | SUB TOTAL : | \$ 1,040.70 |
| | | 7% GST | \$ 72.85 |
| | | GRAND TOTAL | \$ 1,113.55 |

Yours faithfully,



Authorise Signature of Ding Automotive Pte Ltd

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

07/10/2019 14:21

OWNER'S PARTICULARS

JOB-NO: 50112086

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 1

ADDRESS: 383 SIN MING DRIVE

64739522

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHA8112H

TRANS: AUTO

CHASSIS: KMHC851CVKU165026

MAKE / MODEL: HYUNDAI / AE IONIQ HEV 1.6 DI

ENGINE: G4LEKU298749

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 2

CLAIM DETAILS

| DESCRIPTION | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|--|------|--------------|----------|------------|-----|----------|-----------|
| <u>LABOUR</u> | | | | | | | |
| 1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS | 1.00 | 600.00 | 0.00 | 600.00 | | Y | 400 |
| 2 SUNDRIES | 1.00 | 50.00 | 0.00 | 50.00 | | Y | 20 |
| 3 RUST PROOFING | 1.00 | 80.00 | 0.00 | 80.00 | | Y | X |
| 4 RESPRAY REAR BUMPER | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 5 RESPRAY REAR FENDER RH | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| TOTAL: | | 1,230.00 | 0.00 | 1,230.00 | | | |
| <u>MATERIALS</u> | | | | | | | |
| 1 REAR BUMPER | 1.00 | 659.40 | 131.88 | 527.52 | L | Y | Rx |
| 2 REAR BUMPER RETAINER RH | 1.00 | 78.22 | 15.64 | 62.58 | L | Y | X |
| 3 REAR WHEEL CAP RH | 1.00 | 275.88 | 55.18 | 220.70 | L | Y | cut |
| 4 REAR BUMPER CLIP SET | 1.00 | 35.00 | 0.00 | 35.00 | S | Y | X |
| 5 REPAIR REAR FENDER RH | 1.00 | 0.00 | 0.00 | 0.00 | S | Y | Rx |
| TOTAL: | | 1,048.50 | 202.70 | 845.80 | | | |
| TOTAL PARTS & LABOUR : | | 2,278.50 | 202.70 | 2,075.80 | | | |

EXCESS/LOADING:\$ 0.00

No. Of Day: 3

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 9 / 10 / 19

SURVEYED BY: Tanjun

Tanjun e Khamsu.w.n.

CONTACT NO: 92795749

FAX NO:

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

DAuto002

Ding Auto User 2

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

Part By part

Labour = \$ 820

S/N = \$ 0

Part S = \$ 220.70

L + S + P = \$ 1040.70

Final Amount = \$ 1040.70

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

LETTER OF AUTHORITY

Accident involving SHA8112H & SH18495S on 7/10/19 along Marina Bay Sands Casino Taxi Stand.

I/We, City Cab Pte Ltd NRIC/ Co.Reg Number 199502839G registered owner of vehicle No. SHA8112H which was rented to Hirer/Driver Mr/Ms TEO SOON YONG NRIC 51362894G, hereby authorize Ding Automotive Pte Ltd on this date 7/10/19 to submit, correspond, negotiate and settle my/our claim for cost of repair and uninsured losses arising from the above accident and without prejudice of our driver's injury claim.

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

Owner Signature/Co.Chop



Hirer/Driver Signature

A handwritten signature in black ink, appearing to be "TEO SOON YONG", written over a horizontal line.

10 OCT 2019 07:28

Satisfaction Voucher

Date: 10/10/2019

MS First Capital Insurance Limited

Attention: MOTOR CLAIMS DEPT

Dear Sir/Madam

Teo Eon Yon

I/We hereby acknowledge having received from Singapore Technologies Kinetics

Ltd., 249 Jalan Boon Lay, Singapore 619523, my/our vehicle number SHA8112H

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 50112086 in respect of the damage caused to the

said vehicle in an accident that occurred thereto or about the 07/10/2019

at ALONG MARINA BAY SANDS TAXI ST

Dated this day of _____, 201 _____

Signature: 

NRIC No: 5136 2PP4G

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

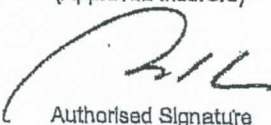
- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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)


Authorised Signature

A/C NO. : B0101