

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 : AAD1910-084

Your Ref : SHD4515P

Date : 23.October 2019

INDIA INTERNATIONAL INSURANCE PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHD0349D AND SHD4515P ON 11/10/19 09:15 AM ALONG TAMPINES STREET 71 TOWARDS TAMPINES AVENUE 5

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)	\$	1,284.00
2.	Loss of Rental for <u>3</u> days @ \$ <u>99.13</u> per day	\$	297.39
3.	Loss of Income for <u>3</u> days @ \$ <u>40.00</u> per day	\$	120.00
4.	LTA Search Fee	\$	0.00
5.	Survey Fee	\$	0.00
	Total	\$	1,701.39

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)

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 SHD0349D and SHD4515P along TAMPINES STREET 71 TOWARDS TAMPINES AVENUE 5 on 11/10/19 09:15 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 23 (day) of October 2019

Yours Faithfully
Trans-Cab Services Pte Ltd

Jasmine Tan
General Manager

TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

I, TAN TECK SENG XXXXX830G
(Hirer), (NRIC no.)

hereby authorize Trans-cab Services Pte Ltd to act on my behalf to claim
SHD 349D

for my loss of earnings for the accident involving _____ and
SHD4515P BISHAN STREET 11 TOWARDS BISHAN ROAD

_____ along _____
11.10.19 0915
on _____ at _____ hrs.

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 11 day of OCT 2019



(Hirer's signature)

TAN TECK SENG
Name:- _____

XXXXX830G
NRIC Number:- _____

BIK 45 CHAI CHEE STREET
Address: _____

4901910-024



TD-5416

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No: 190703792K | GST Reg. No: M2-007880043C
64 Cecil Street | #04 | #05 | #06-02 | RBS Building | Singapore 049711
Office (65) 63476100 Email: insure@iil.com.sg
Fax (65) 62244174 Website: www.iil.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCT19100601
Claimant Ref: SHD 349D

We/I, TRANS-CAB AUTO SERVICES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 1,284.00 (repair cost), S\$ 297.39 (loss of ~~rental~~ (Lost of Income), S\$ 120.00 (vehicle no. SHD 349D that was damaged pursuant to the accident which occurred on 11/10/2019 (date) at TAMPINES AVENUE 5 TOWARDS TAMPINES AVENUE 5 (location) involving vehicle no. SHD 4515P (insured vehicle). This is pursuant to the inspection conducted on 14/10/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner TRANS-CAB SERVICES PTE LTD ("the third party claimant") of vehicle no. SHD 349D to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHD 349D (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 1,701.39 to TRANS-CAB AUTO SERVICES PTE LTD.

Dated this 27 day of DEC 20 19

CLAIMANT:

Signature:

Signed by "the workshop" (chop)

Name:

Ng Wai Yin
G2815702P

NRIC:

Address:

TRANS-CAB SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63
Singapore 569111
Tel: 6287 6666 Fax: 6287 7764

Nationality:

Malay

Occupation:

ACT

WITNESS:

Signature:

Signed by appointed Surveyor

Name:

LKK Auto Consultants Pte Ltd

NRIC:

199607198R

Address:

51 Ubi Avenue 1

#01-25 Paya Ubi Ind. Park S(408933)

Nationality:

Occupation:



KSC

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: INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #05-00 IOB BUILDING 049711 Singapore ATTENTION:	INVOICE NO. : INV1910-088 DATE : 23. October 2019 REFERENCE NO : AAD1910-084 TERMS : DUE DATE : 23. October 2019 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD0349D; DOA 11.10.19(LUMP SUM-19)	1	1,284.00	1,284.00

Total SGD Excl. GST :	1,200.00
7% GST :	84.00
Total SGD Incl. GST :	1,284.00

****** ONE THOUSAND TWO HUNDRED EIGHTY FOUR 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

23 October, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 11/10/19 09:15 AM at TAMPINES STREET 71 TOWARDS TAMPINES AVENUE 5

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. SHD0349D. The taxi was hired to TAN TECK SENG a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$99.13 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

11-10-2019

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.	AAD1910-084	Accident Date 11-10-2019
10/14/2019 09:50	10/16/2019 15:00	SHD0349D

Yours Faithfully,

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager