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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

Our Ref : AAD1910-191

Your Ref : SFD2683Z

Date : 07.November 2019

AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHC5402E AND SFD2683Z ON 24/10/19 09:58 PM ALONG SERANGOON ROAD

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)	\$	2,996.00
2.	Loss of Rental for <u>7</u> days @ \$ <u>96.99</u> per day	\$	678.93
3.	Loss of Income for <u>7</u> days @ \$ <u>50</u> per day	\$	350.00
4.	LTA Search Fee	\$	7.49
5.	Survey Fee	\$	0.00
	Total	\$	4,032.42

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)

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Co./GST Reg. No. 200303878K

Authorization To Act

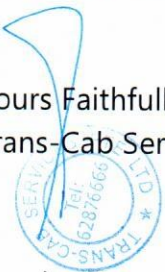
We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHC5402E and SFD2683Z along SERANGOON ROAD on 24/10/19 09:58 PM.

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 7 (day) of November 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:****AIG ASIA PACIFIC INSURANCE PTE LTD**78 Shenton Way
#07-16 CHARTIS Building
079120 Singapore

ATTENTION:

INVOICE NO. : INV1910-348
DATE : 31. October 2019
REFERENCE NO : AAD1910-191
TERMS : Net 30 Days
DUE DATE : 30. November 2019
PAGE : 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
		Invoice No. INV1911-016:			
1.	6050101	REPAIR-SHC5402E; DOA 24.10.19(LUMP SUM-19)	1	2,996.00	2,996.00

Total SGD Excl. GST : 2,800.00
7% GST : 196.00
Total SGD Incl. GST : 2,996.00

****** TWO THOUSAND NINE HUNDRED NINETY SIX 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

07 November, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 24/10/19 09:58 PM at SERANGOON ROAD

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. SHC5402E. The taxi was hired to LIM KEE POH 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

24-10-2019

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.	AAD1910-191	Accident Date 24-10-2019
10/25/2019 08:30	10/31/2019 14:00	SHC5402E

Yours Faithfully,**Trans-Cab Services Pte Ltd****Jasmine Tan****General Manager**



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

Print Date/Time : 25 Oct 2019 / 16:13:43

Receipt Date/Time : 25 Oct 2019 / 16:13:43

Tax Invoice/Receipt

Receipt No. : ITNET-00000-191025-002691

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SGT3617M				
As at 24 Oct 2019/19:00:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
1	Insurance Enquiry - SGT3617M Enquiry Fee 20191025161201368306	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SMA3896C				
As at 24 Oct 2019/01:10:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
2	Insurance Enquiry - SMA3896C Enquiry Fee 20191025161201442209	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - GBD2896Z				
As at 24 Oct 2019/18:30:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
3	Insurance Enquiry - GBD2896Z Enquiry Fee 20191025161201566197	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SLQ4700E				
As at 25 Oct 2019/08:16:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
4	Insurance Enquiry - SLQ4700E Enquiry Fee 20191025161201652306	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SFD2683Z				
As at 24 Oct 2019/21:55:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
5	Insurance Enquiry - SFD2683Z Enquiry Fee 20191025161201750020	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		35.00	2.45	37.45
Rounding Difference				0.00
Total Amount Payable				37.45
Paid By				
		xxxxxxxxxxxx8127	Credit Card: Visa/MasterCard	37.45
Total				37.45
Cash Change				0.00

Tendered Amount	37.45
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.