

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0079806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

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

India Ref: MCT19110690 Claimant Ref: SHC5941R

	respect to the amount claimed for S\$ 4,387.00		st), S\$ 735.84 (loss of
303	- (search fee), vehicle no. SHC5941R that was		
	(date) atAIRPORT BLVD SLIP RD TWDS T3 ursuant to the inspection conducted on28/11/2019(date)		ing vehicle no. SH7255T (insured
vernicie). Triis is po	assuant to the inspection conducted on 20/1/2013 (da	te at the workshop	
We/I confirm tha	t we/l are/am authorized by the ownerTRANS-CAB	SERVICES PTE L	TD ("the third party
claimant") of veh	icle no. SHC5941R to make the claim as set out in the	above paragraph a	nd we/I have full authority to settle
	s/her behalf in a manner that we/I deem fit. We/I end	lose herein the let	ter of authority given by "the third
party claimant".			
We/I further conf	firm that we/I will indemnify India International Insuran	ce Pte Ltd for all d	amages. loss and/or expense that
	e already incurred in the event that "the third party		
	ainst the former for any loss and expenses suffered p		f repairs and/or rental and/or loss
of use pursuant t	to the damage to SHC5941R (vehicle no.) as a result	of the accident.	
Well confirm the	at the agreement reached above is in full and final:	settlement of all c	laims of "the third party claimant"
	accident and that further this settlement is reached on		
basis.			
· · · · · · · · · · · · · · · · · · ·			
this agreement i	s subject to the application of Singapore law and the state of the same	Singapore Courts h	ave exclusive jurisdiction over any
diopato anomg oc	No same.		
We/I authorize	you to pay the total amount of S\$_5,122.84 to TRA	NS-CAB AUTO SE	RVICES PTE LTD
14	July		
Dated this	day of		
CLAIMANT:	Tel:	WITNESS:	((LKK))
Signature:	(8) (62876686) Tel:	Signature:	
Signature.	Signed by "the workshop" (with thep)	Signature.	Signed by appointed Surveyor
Name:	Amanda Tay	Name:	LKK AUTO CONSULTANTS PTE LTD
NRIC:	TRANS BASERVICES PTE LTD	NRIC:	199607198R
Address:	No. 2 And Mo Kio Street 63	Address:	51 UBI AVE 1 #02-25
	Singapore 569111		PAYA UBI INDUSTRIAL PARK S(408933)
	Tel: 6287 6666 Fax: 6287 7764		
Nationality:	singaporpan	Nationality:	***************************************
Occupation:	claim service Assistant	Occupation:	

7/14/2020 Merimen e-Claims

Print Received Message

This mail is associated with:

*SHC5941R (MCT19110690) [SH7255T] TRANS-CAB SERVICES PTE LTD Nov 27 2019 11:00AM Trans-cab Auto Services Pte Ltd

India International Insurance Pte Ltd (HQ) (III_SG), sent on 14/04/2020 12:25 PM. From

То

Alert - Adj Mandate Approved (S\$5122.84) - SHC5941R - Claim Handler: Priya Subject

Approved:5122.84:Please request TP WS to raise Tax Invoice for Cost of repairs in III's name

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

: AAD1911-222

Your Ref

: SH7255T COMFORT

Date

: 05.December 2019

INDIA INTERNATIONAL INSURANCE PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHC5941R AND SH7255T COMFORT ON 27/11/19 11:35 AM ALONG AIRPORT BOULEVARD TOWARDS T3

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)		\$ 4,387.00
2.	Loss of Rental for days @ \$ <u>122-64</u>	per day	\$ 735.84
3.	Loss of Income for days @ \$	per day	\$ 0.00
4.	LTA Search Fee		\$ 0.00
5.	Survey Fee		\$ 0.00
	Total		\$ 5,122.84

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 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.

: INV1911-302

DATE **REFERENCE NO**: AAD1911-222

: 29. November 2019

TERMS

: 29. November 2019 **DUE DATE**

PAGE

: 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHC5941R; DOA 27.11.19(LUMP SUM-19)	1	4,387.00	4,387.00

Total SGD Excl. GST:

4,100.00

7% GST:

287.00

**** FOUR THOUSAND THREE HUNDRED EIGHTY SEVEN SGD ONLY ****

Total SGD Incl. GST:

4,387.00

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 05 December, 2019 To Whom It May Concern Dear Sir / Madam, Accident on 27/11/19 11:35 AM at AIRPORT BOULEVARD TOWARDS T3 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. SHC5941R. The taxi was hired to TAN SEE HIONG a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$122.64 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

27-11-2019

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.	AAD1911-222		Accident Date	27-11-2019	7
11/27/2019 11:35	12/2/2019 14:00	SHC5941R			

Yours Faithfully,

Trans-Cab Services Pte Ltd

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

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 SHC5941R and SH7255T COMFORT along AIRPORT BOULEVARD TOWARDS T3 on 27/11/19 11:35 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 5 (day) of December 2019

Yours Faithfully

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager