

**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 SHC5745R and SJX474X along TPE slip road towards Tampines Ave 7 on 12/11/15 09:14 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 2 (day) of November 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan  
General Manager



# AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJX 474X	(Insd veh)	Model: RENAULT LATITUDE 2.0 D DCI (A)
	SHC 5745R	(TP veh)	
Date of Accident/ Time:	12/11/2015		

Repair Estimate	: \$	49,421.57	
Final Repair Cost	: \$		
Loss of <del>Use</del> <i>Token sym.</i>	: \$		7 days at \$ 50 per day
Rental (if any)	: \$		7 days at \$ 133.75 per day
LTA / GIA Search Fee	: \$		
Others	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	14,500.00	

Payee Name : TRANS-CAB AUTO SERVICES PTE LTD

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <del>No</del> BOLA Scenario No: <u>27</u>
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.		
Remarks:		

## NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are *not received within 7 days* of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a full and final settlement that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

<p><i>20x</i></p> <p>Signature of workshop representative / Workshop Stamp</p> <p>Name of Representative: <i>Amanda Tay</i></p> <p>Date: <i>17/07/20</i></p>	<p><i>[Signature]</i></p> <p>Signature of Witness / Workshop stamp (if applicable)</p> <p>Name of Witness: <i>IRONG THING</i></p> <p>Date: <i>13 MAR 2020</i></p>
<p><i>[Signature]</i></p> <p>Signature of AXA's surveyor/representative:</p> <p>Name of AXA's surveyor /Representative:</p> <p>Date: <i>16/3/2020</i></p>	

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Co./GST Reg. No. 200303878K

02 November, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 12/11/15 09:14 PM at TPE slip road towards Tampines Ave 7

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. SHC5745R. The taxi was hired to LAU WEE CHEOW a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$133.75 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with FIRST CAPITAL INSURANCE LIMITED 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

*This is a computer generated print-out. No signature is required.*

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12-11-2015

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
<b>Accident No.</b>	AAD1511-152	<b>Accident Date</b> 12-11-2015
12/11/2015 21:15	24/11/2015 16:20	SHCS745R

Yours Faithfully,

**Trans-Cab Services Pte Ltd****Jasmine Tan****General Manager**

**Enquire Vehicle & Owner Information ( Vehicle No. SJX474X As At 12 Nov 2015 / 21:15:00 )****Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: TCS(ROEL)SHC5745R

**Current Owner Details**

Owner ID Type: Singapore NRIC

Owner ID: S7218172G

Owner Name: LEE HSIAO YONG KELVIN

Registered Address Type: HDB / HUDC

Registered Block/House No.: 487B

Registered Street Name: TAMPINES STREET 45

Registered Unit No.: # 11 - 123

Registered Building Name: -

Registered Postal Code: 521487

**Current Vehicle Details**

Vehicle No.: SJX474X

Make Description/Model: FORD / FOCTWGN

Insurance Company Name: AXA INSURANCE SINGAPORE PTE LTD



Please read through the Privacy Statement, Terms of Use and Disclaimer.  
Please do not use the Back or Forward buttons on your browser as this may alter the results of the transactions.  
Best viewed with IE 6.0 SP3 and above, 1024 X 768 resolution  
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