

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 : AAD1512-242

Your Ref : SJU3597X, GBC5124D, SGM7751T

Date : 19.July 2017

AXA INSURANCE S PTE LTD

Dear Sir/Madam,

**ACCIDENT INVOLVING SHD5170T AND SJU3597X, GBC5124D, SGM7751T ON
22/12/15 08:50 AM ALONG BKE TOWARDS PIE**

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)	\$	5,136.00
2.	Loss of Rental for <u>7</u> days @ \$ <u>96.30</u> per day	\$	674.10
3.	Loss of Income for <u>7</u> days @ \$ <u>50.00</u> per day	\$	350.00
4.	LTA Search Fee	\$	6.00
5.	Survey Fee	\$	0.00
	Total	\$	6,166.10

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 SHD5170T and SJU3597X, GBC5124D, SGM7751T along BKE TOWARDS PIE on 22/12/15 08:50 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 19 (day) of July 2017

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager



AXA INSURANCE S PTE LTD - LETTER OF DISCHARGE

We, Trans-Cab Services Pte Ltd (workshop), hereby agreed and confirmed that we are authorized by the owner of motor vehicle SHD5170T to accept the sum of \$ 6,166.1 (inclusive of inte alia, damages, interests, loss of use, costs and disbursements) from M/s LKK Auto Consultants Pte Ltd, the authorized surveyors of M/s AXA INSURANCE S PTE LTD, the Third Party's insurers on this matter.

This acceptance is in full and final settlement of any claim made against SJU3597X, GBC5124D, SGM7751T pursuant to the road accident which occurred along BKE TOWARDS PIE.

We, Trans-cab Auto Services Pte Ltd (workshop) are further authorized by the said owner that this settlement is reached on a strictly without prejudice basis on the part of M/s AXA Insurance Singapore Pte Ltd. And or their insured or other person or persons arising out of this said accident.

In consideration of the said payment by the said M/s AXA Singapore Pte Ltd, we, the said authorized workshop, shall fully discharge them from any further claim whatsoever in respect of the said accident.

We also declare that we are authorized by the said owner to receive the said settlement sum and hereby undertake to indemnify M/s AXA Insurance Pte Ltd, against any claim made or which may be made in respect of this matter.

For and on behalf of the owner of
SHD5170T



workshop stamp and authorized
signature

For and on behalf of
AXA INSURANCE S PTE LTD

(LKK stamp and authorized signature)



AAD 1513 - 343

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJU 3597X (Insd veh)	Model: TOYOTA WISH
	SHD 5170T (TP veh)	
Date of Accident/ Time:	22/12/2015 08:50	

Repair Estimate	: \$		
Final Repair Cost (W/GST)	: \$	5,136.00	
Loss of use Income	: \$	350.00	7 days at \$50.00 per day
Rental (if any)	: \$	674.10	7 days at \$96.30 per day
LTA / GIA Search Fee	: \$	6.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	6,166.10	
Payee Name : TRANS-CAB AUTO SERVICES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES [] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: <input checked="" type="checkbox"/> Yes No BOLA Scenario No: 28	
	BOLA Liability: _____ (%)	Assessed Liability (*): 0 (%)	
* 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.

	
Signature of workshop representative / Workshop stamp	Signature of Witness / Workshop stamp (if applicable)
Name of Representative: NG WA I YIN	Name of Witness: Amanda Tay
Date: 01 JUL 2020	Date: 01/07/20
	
Signature of AXA's surveyor/representative:	
Name of AXA's surveyor /Representative:	
Date: 02/07/2020	

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: AXA INSURANCE PTE LTD 8 SHENTON WAY,#27-01 AXA TOWER 068811 SINGAPORE ATTENTION:	INVOICE NO. : INV1707-039 DATE : 19. July 2017 REFERENCE NO : AAD1512-242 TERMS : DUE DATE : 19. July 2017 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD5170T;DOA 22.12.15(LUMP SUM-17)	1	5,136.00	5,136.00
2.		REPLACE INV NO. AAD1601-099	0	0.00	

Total SGD Excl. GST : 4,800.00

7% GST 336.00

****** FIVE THOUSAND ONE HUNDRED THIRTY SIX SGD ONLY ********Total SGD Incl. GST : 5,136.00**

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.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

19 July, 2017

To Whom It May Concern

Dear Sir / Madam,

Accident on 22/12/15 08:50 AM at BKE TOWARDS PIE

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. SHD5170T. The taxi was hired to LOOI HONG WEE a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$ 96.30 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 far 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

22-12-2015

Dear Sir/Madam,

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

Date In	Date Out	Vehicle No.
Accident No.	AAD1512-242	Accident Date 22-12-2015
22/12/2015 4:20:00 PM	28/12/2015 3:15:00 PM	SHD5170T

Yours Faithfully,

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Owner Information (Vehicle No. SJU3597X As At 22 Dec 2015 / 08:50:00)

Insurance claim in relation to traffic accident
TCS(CANDY)

Singapore NRIC
S2638047B
ENG YAN TIAN
HDB / HUDC
20
DOVER CRESCENT
03 - 312
-
130020

SJU3597X
TOYOTA / COROLLA ALTIS 1.6 AUTO
AXA INSURANCE SINGAPORE PTE LTD

Jasper Chua (LKK Auto)

From: ANG Yvonne <yvonne.ang@axa.com.sg>
Sent: Tuesday, 30 June 2020 6:04 PM
To: Jasper Chua (LKK Auto)
Cc: Admin A
Subject: RE: Accident involving SHD 5170T and SJU 3597X on the 22/12/2015 / LKK ref : CC3/AXA15022046/Kba3q2-1 / AXA ref in merimen: C0365732

Hi Jasper

Please proceed as per mandate.

Regards



Yvonne Ang | Assistant Manager, Motor Claims Department
AXA Insurance Pte Ltd | 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 | www.axa.com.sg
Email: yvonne.ang@axa.com.sg
Customer Care No. 1800 8804888

We remain available to serve you during the circuit breaker period. For AXA's COVID—19 update We remain available to serve you during the circuit breaker period. For AXA's COVID—19 updates & initiatives, please visit <https://www.axa.com.sg/covid-19-updates>

Please consider the environment before printing this message

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From: TAN Jas
Sent: Friday, June 26, 2020 1:59 PM
To: ANG Yvonne <yvonne.ang@axa.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; Jasper Chua (LKK Auto) <jasperchua@lkkauto.com>
Subject: RE: Accident involving SHD 5170T and SJU 3597X on the 22/12/2015 / LKK ref : CC3/AXA15022046/Kba3q2-1 / AXA ref in merimen: C0365732

Hi Yvonne,

For your handling. GA031104

Regards

*Please note we have terminated our fax-line. Hence, please send in your correspondences to our two common mail boxes instead. For OD/TP survey , send it to motor.survey@axa.com.sg and other correspondences send it to motor.doc@axa.com.sg,

Jas Tan | Snr Specialist, Motor Claims Department
AXA Insurance Pte Ltd | 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 | www.axa.com.sg
Email: jas.tan@axa.com.sg
Customer Care No. 1800 8804741



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From: Jasper Chua (LKK Auto) <jasperchua@lkkauto.com>
Sent: Friday, June 26, 2020 10:53 AM
To: TAN Jas <jas.tan@axa.com.sg>
Cc: Admin A <admin-a@lkkauto.com>
Subject: [EXTERNAL] Accident involving SHD 5170T and SJU 3597X on the 22/12/2015 / LKK ref : CC3/AXA15022046/Kba3q2-1 / AXA ref in merimen: C0365732

Dear Sirs/Mdm,

We refer to the above matter.

We have temporary close our file on year 2018 due to no submission of LOD/documents from third party.

Third party had submitted the LOD and documents as attached.

In view of this, kindly assist to re-open the case and let us have you mandate to settle the matter at **\$6,166.10(all-in)**. Breakdown as follows: -

Liability: 100% (OI rear-ended TP)

1. Cost of Repair (w/GST)	\$ 5,136.00
2. Loss of Rental (7 day x \$96.30)	\$ 674.10
3. Loss of Income (7 day x \$50.00)	\$ 350.00
4. LTA Search Fee	\$ 6.00
Total	<u>\$ 6,166.10</u>

Kindly let us have your mandate/ instruction.

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2928 | email: jasperchua@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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