

**DING AUTOMOTIVE PTE LTD**

Blk 10 #01-20 Sin Ming  
Industrial Est Sec C  
Singapore 575645

Without Prejudice to our  
driver's Injury claims

OUR REF: 50112907/SHA8843G/DOA/26/10/2020/DD  
YOUR REF: SHA6541R/--

4 November 2020

To: MOTOR CLAIMS DEPARTMENT  
INDIA INTERNATIONAL INSURANCE  
64 CECIL STREET #04/#05  
IOB BUILDING SINGAPORE 049711

ACCIDENT INVOLVING: SHA8843G AGAINST SHA6541R 26/10/2020  
LOCATION ALONG : AT INFRONT TRIPLE ONE SOMERSET TAXI STAND  
We refer to the above matter:

	Rate Per Day	Repair/ Claims Day	Amount Before GST	GST 7%	Amount After GST
Cost of Repair	\$ -	3	\$ 918.70	\$ 64.31	\$ 983.01
Loss Of Rental	\$ 117.20	3	\$ 351.60	\$ -	\$ 351.60
Loss Of Income	\$ 80.00	3	\$ 240.00	\$ -	\$ 240.00
LTA/GIA Search Fee	\$ -	0	\$ 6.96	\$ 0.49	\$ 7.45
Towing Fee	\$ -	0	\$ -	\$ -	\$ -
Surveyor Fee	\$ -	0	\$ -	\$ -	\$ -
Total	\$ 197.20	3	\$ 1,517.26	\$ 64.80	\$ 1,582.06

The accident was caused solely by the negligence of your insured/driver and as a results , We had incurred the following costs of repair and losses of our client.

Enclosed are copies of the following documents for your perusal:

☺	Letter of Demand	☺	Rental Invoice
☺	Repair Bill	☺	Letter of Authority
☺	LTA/GIA Search Fee	☺	Discharge Voucher
☺	Mileage Record	☺	Certificate of Insurance
☺		☺	

City Cab has authorized DING AUTOMOTIVE PTE LTD to claim, correspond and receive payment against third party as per losses stated above.

Please look into our client's claim and revert Liability/Offer within 14 days upon LOD recipients.

Your Sincerely,

DD HASHIM

DING AUTOMOTIVE PTE LTD

TEL: +65 9239 4128



# LETTER OF AUTHORITY

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Accident involving SHA8843G & SHA6541R on 26/10/2020  
along In front Triple One Somerset Taxi stand.

I/We, City Cab Pte Ltd NRIC/ Co.Reg Number 199502839G registered owner of vehicle No. SHA8843G which was rented to Hirer/Driver Mr/Ms KOH HOCK HOAT NRIC SXXXX 460G, hereby authorize **Ding Automotive Pte Ltd** on this date 27/10/2020 to submit, correspond, negotiate and settle my/our claim for cost of repair and uninsured losses arising from the above accident and without prejudice of our driver's injury claim.

I/We further authorize that agreed settlement amount by third party with **Ding Automotive Pte Ltd** should be made in favour of **Ding Automotive Pte Ltd** and that the said payment be forwarded to them as full and final discharge of my/our claims.

Owner Signature/Co.Chop



Hirer/Driver Signature

Authorized Workshop





## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

Without Prejudice  
to our driver's Injury claim

India Ref: MCT20100445

Claimant Ref: SHA8843G

We/I, DING AUTOMOTIVE 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\$ 650.00 (global sum) (~~repair cost~~), S\$ ~~loss of use/rental~~, S\$ ~~search fee~~, vehicle no. SHA8843G that was damaged pursuant to the accident which occurred on 26/10/2020 (date) at TRIPLEONE SOMERSET AT EXETER RD (location) involving vehicle no. SHA 6541R (insured vehicle). This is pursuant to the inspection conducted on 28/10/2020 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CITYCAB PTE LTD ("the third party claimant") of vehicle no. SHA8843G 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 SHA8843G (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\$ 650.00 to DING AUTOMOTIVE PTE LTD.

Dated this 09 day of Feb 20 21

#### CLAIMANT:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by "the workshop" (with chop)



#### WITNESS:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:



Signed by appointed Surveyor

LKK AUTO CONSULTANTS PTE LTD

199607198R

51 UBI AVE 1, PAYA UBI INDUSTRIAL PARK

#02-25 SINGAPORE 408933

**DING AUTOMOTIVE PTE LTD**

Business Reg. No : 201619222G

BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645

Tel: 6452 1208 Fax: 6452 0614

**TAX INVOICE****INDIA INTERNATIONAL INSURANCE PTE LTD**

IOB BUILDING

64 CECIL STREET #04-05

SINGAPORE 049711

ATTN : MOTOR CLAIMS DEPT

TEL : FAX :

**INVOICE** : I-001222  
**DATE** : 18/12/2020  
**GST REG NO** : 201619222G  
**TERMS** : C.O.D.  
**PO NO** : SHA6541R  
**OUR REF** : SHA8843G  
**PAGE** : 1 of 1

ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1.	Cost of repair-SHA8843G	1	730.00	365.00
<b>REMARKS :</b> Job card:50112907 Your ref:SHA6541R Oic:Ms Cecilia LKK Doa:26/10/2020 Settlement at 50% S\$650.00 (All-In)		<b>SUB TOTAL</b> :		365.00
		<b>GST</b> :		25.55
		<b>TOTAL SGD</b> :		<b>390.55</b>
		<b>DEPOSIT</b> :		
		<b>O/S BALANCE</b> :		

Without Prejudice  
to our driver's Injury claim

Without Prejudice  
to our driver's Injury claim

FOR DING AUTOMOTIVE PTE LTD

Authorised Signature



Customer Signature

I have inspected and hereby confirmed that  
the job done and the amount due herein  
are entire to my satisfaction

Our Ref: CC20100453



Date: 27 October 2020

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 26/10/2020 @ 21:15 hrs  
ALONG AT IN FRONT TRIPLE ONE SOMERSET TAXI STAND  
INVOLVING SHA6541R

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA8843G** (the "Taxi"). The Taxi was hired to **KOH HOCK HUAT IC NO SXXXX460G** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.40** per day (inclusive of GST).

(S\$117.20 b4 GST)

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Philip Chia  
Manager, Fleet Safety

This is a computer generated letter. No signature is required.





> Back to OneMotoring



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

Print Date/Time : 27 Oct 2020 / 15:51:59

Receipt Date/Time : 27 Oct 2020 / 15:51:59

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-201027-001845

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	Result of Insurance Enquiry - SHA6541R As at 26 Oct 2020/21:15:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SHA6541R Enquiry Fee 20201027154943174453	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
	<b>Paid By</b>			
	527351XXXXXX4103 eNETS Credit Card			7.45
	<b>Total</b>			7.45
	<b>Cash Change</b>			0.00
	<b>Tendered Amount</b>			7.45
	<b>Excess Refundable Amount</b>			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.

## Print Received Message

This mail is associated with :

**\*SHA8843G (MCT20100445)**

**[SHA6541R]**

TP

CITYCAB PTE LTD

Oct 26 2020 9:00PM

[-]

Ding Auto Pte Ltd

**From** India International Insurance Pte Ltd (HQ) (III\_SG), sent on 02/02/2021 18:04 PM.  
**To** LKK\_HQ  
**Subject** Alert - Adj Mandate Approved (S\$650.00) - SHA8843G - Claim Handler: Zuhaidah Bte Samsuri

Approved:650.00:global \$650 due to L/S