

**FW: REQUEST CLAIM NUMBER**

MTCL@income.com.sg &lt;mtcl@income.com.sg&gt;

Mon 18/10/2021 12:54 PM

To: Denise Tay (LKKAuto) &lt;denisetay@lkkauto.com&gt;

Classification: *Restricted*

Hi,

All claims created.

FYA

With Regards

**Samsia**

Senior Admin Assistant  
Operations, Motor & Personal Lines



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**From:** Denise Tay (LKKAuto) <denisetay@lkkauto.com>**Sent:** Monday, 18 October 2021 8:56 AM**To:** MTCL@income.com.sg**Subject:** REQUEST CLAIM NUMBER

Dear Sir/Mdm,

Request Claim number

| S/No |                       | Claimant (Owner / Taxi Company) | Claimant Vehicle No. | Income Vehicle No. | Date of Accident | Time of Accident | Estimate | Tentative repair cost |
|------|-----------------------|---------------------------------|----------------------|--------------------|------------------|------------------|----------|-----------------------|
| 1    | <b>MT/1146928-002</b> | COMFORT TRANSPORTATION          | SHC 1102Y            | SJL 9433T          | 04/10/2021       | 18:20            | 3080.18  | \$1650.00             |
| 2    | <b>MT/1146816-002</b> | CITY CAB PTE LTD                | SHB 2434M            | SMX 9824A          | 04/10/2021       | 09:00            | 6209.18  | 4750.00               |

Best Regards,

**Denise Tay** | Case Handler**LKK Auto Consultants Pte Ltd**Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

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

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