Asher Sng (LKKAuto)

From: Tan Lee Gek (Strides Automotive Services Pte Ltd) <LeeGek.Tan@strides.com.sg>

Sent: Wednesday, 9 February 2022 16:59

To: CS A Team; Admin A

Subject: LOD Re: Accident on 13/11/2021 involving SHB 5561J & SJU 9400R (China Taiping's

insured) Our Ref: TAX/11/20/2020/lg

Attachments: 11 21 2020 - documents.pdf; 11 21 2020 - repair bill.pdf

Follow Up Flag: Follow up Flag Status: Follow up

Dear All,

We quantify our claim as follows:-

Cost of Repair	\$3,137.84					
Loss of Rental	\$677.34	(6	days x	\$112.89)
Loss of Income	\$360.00	(6	days x	\$60.00)
LTA Search Fee	\$7.00					
Total	\$4,182.18					

We enclose the following documents:

- 1) Repair invoice
- 2) Proof of rental rate
- 3) GIA report
- 4) Accident vehicle laid-up report
- 5) Hirer's letter of authorization
- 6) LTA search

Please acknowledge receipt within 14 days from the date hereof and let us have your offer soon. Thanks.

Regards

Tan Lee Gek (DID: 6556 3548)

Claims Department

STRIDES Automotive Services Pte Ltd





Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

Strides Automotive Services Pte. Ltd. 2 Tanjong Katong Road, Tower 3, Paya Lebar Quarter, #08-01, Singapore 437161 Tel: 65 69083530 Fax: 65 69083592

Tax Invoice

GST Reg No. : MR-8500001-7 : 199004280Z CRN

Invoice No. : IV220100338 Date : 26.01.2022 SMRT AUTOMOTIVE SERVICES PTE LTDV ehicle No. : SHB5561J Claims & Insurance Agency

vour Ref No. : TAX/11/21/2020

Our Ref No. : 24113004 : 30 Days

			Terms		30 D	ays	
Description	Qty	Unit Cost	Add %	/	 scount)		Amount
Parts		COSC	75		 mount		
RETAINER, RR BUMPER, RH	0.00	\$ 132.60	0.00		\$ 0.00	\$	0.00
RETAINER, RR BUMPER, LH	0.00	\$ 132.60	0.00		\$ 0.00	\$	0.00
SEAL, RR BUMPER , RH	0.00	\$ 118.30	0.00		\$ 0.00	\$	0.00
CLIPS PIECE, FRT & RR BUMPER	10.00	\$ 4.50	(25.00)	\$ 11.25	\$	33.75
GUARD, RR BUMPER, LOWER	1.00	\$ 374.50	(25.00)	\$ 93.62	\$	280.88
COVER, GUARD RR BUMPER LOWER	1.00	\$ 22.00	(25.00)	\$ 5.50	\$	16.50
REAR BUMPER REFLECTOR ASSY, REFLEX, RH	0.00	\$ 39.00	0.00		\$ 0.00	\$	0.00
COVER, RR BUMPER ASSY	1.00	\$ 485.60	(25.00)	\$ 121.40	\$	364.20
REAR BUMPER REINFORCEMENT	0.00	\$ 332.70	0.00		\$ 0.00	\$	0.00
PAD, RR BUMPER, RH & LH , 3	2.00	\$ 11.00	(25.00)	\$ 5.50	\$	16.50
PAD, RR BUMPER, RH & LH , 2	2.00	\$ 4.00	(25.00)	\$ 2.00	\$	6.00
PAD, RR BUMPER, RH & LH , 1	2.00	\$ 4.00	(25.00)	\$ 2.00	\$	6.00
PAD, RR BUMPER, CTR	3.00	\$ 11.00	(25.00)	\$ 8.25	\$	24.75
SEAL, RR BUMPER ARM, RH & LH	2.00	\$ 11.30	(25.00)	\$ 5.65	\$	16.95
REAR BUMPER REFLECTOR ASSY, REFLEX, LH	0.00	\$ 39.00	0.00		\$ 0.00	\$	0.00
COVER, REAR FLOOR UNDER , RH	0.00	\$ 175.10	0.00		\$ 0.00	\$	0.00
COVER, REAR FLOOR UNDER , LH	0.00	\$ 241.90	0.00		\$ 0.00	\$	0.00
COVER, REAR FLOOR UNDER CENTER	0.00	\$ 229.90	0.00		\$ 0.00	\$	0.00
LENS & BODY, REAR COMBINATION LAMP, RH	1.00	\$ 339.60	(10.00)	\$ 33.96	\$	305.64
COVER, REAR COMBINATION LAMP, RH	0.00	\$ 69.90	0.00		\$ 0.00	\$	0.00
LENS & BODY, REAR COMBINATION LAMP, NO.2 RH	0.00	\$ 261.00	0.00		\$ 0.00	\$	0.00
LAMP ASSY, REAR, RH	1.00	\$ 293.60	(10.00)	\$ 29.36	\$	264.24

03 FEB 2022

Payment Instructions

By Cheque: Crossed and made payable to "Strides Automotive Services Pte. Ltd." with invoice no. indicated on the reverse side. No receipt will be issued unless requested.

By Bank Transfer:

Account Name : Strides Automotive Services Pte. Ltd.

Bank Name : DBS Bank Ltd - SGD

Bank Account No.: 018-008617-4

Swift Code : DBSSSGSG

Authorised Signature

for Strides Automotive Services Pte. Ltd.



AUTOMOTIVE

Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

Strides Automotive Services Pte. Ltd. " 2 Tanjong Katong Road, Tower 3, Paya Lebar Quarter, #08-01, Singapore 437161

Tel: 65 69083530 Fax: 65 69083592

Tax Invoice

GST Reg No. : MR-8500001-7 : 199004280Z Invoice No. : IV220100338 : 26.01.2022 Date Vehicle No. : SHB5561J

Your Ref No.: TAX/11/21/2020

Our Ref No. : 24113004 : 30 Days

Description	Qty		Unit	Add	1	(Di	scount)	Amount
			Cost	용		Aı	mount	
PIXEL STICKER	2.00	\$	60.00	0.00		\$	0.00	\$ 120.00
SENSOR REVERSE	1.00	\$	180.00	0.00		\$	0.00	\$ 180.00
ANTENNA, ELECTRICAL KEY	0.00	\$	72.00	0.00		\$	0.00	\$ 0.00
PANEL SUB-ASSY, FENDER REAR RH	0.00	\$	871.50	0.00		\$	0.00	\$ 0.00
DUCT ASSY, QUARTER VENT , RH & LH	0.00	\$	67.00	0.00		\$	0.00	\$ 0.00
LINER, REAR FENDER , RH	0.00	\$	139.80	0.00		\$	0.00	\$ 0.00
END PANEL SUB-ASSY, BODY LOWER BACK	0.00	\$	651.00	0.00		\$	0.00	\$ 0,00
SEALANT SIKAFLEX	0.00	\$	37.00	0.00		\$	0.00	\$ 0.00
TAIL GATE BACK DOOR OUTSIDE GARNISH SUB-ASSY	1.00	\$	913.60	(25.00)	\$	228.40	\$ 685.20
EMBLEM SUB-ASSY REAR	1.00	\$	47.90	(25.00)	\$	11.97	\$ 35.93
NAME PLATE (HYBRID) , LUGGAGE COMPARTMENT DOOR	1.00	\$	54.60	(25.00)	\$	13.65	\$ 40.95
NAME PLATE (PRIUS) , LUGGAGE COMPARTMENT DOOR	1.00	\$	54.60	(25.00)	\$	13.65	\$ 40.95
SPOILER SUB-ASSY, REAR	0.00	\$1	575.40	0.00		\$	0.00	\$ 0.00
SMRT LOGO	1.00	\$	7.80	0.00		\$	0.00	\$ 7.80
STICKER DECAL 65558888	1.00	\$	21.60	0.00	_	\$	0.00	\$ 21.60
					Su	b-To	tal	\$ 2467.84
Labour								
TO REPAIR REAR PORTION RH	1.00	\$	300.00	0.00		\$	0.00	\$ 300.00
Others								
TO RESPRAY REAR BUMPER	1.00	\$	200.00	0.00		\$	0.00	\$ 200.00
TO RESPRAY BUMPER BEAM	0.00	\$	180.00	0.00		\$	0.00	\$ 0.00
TO RESPRAY TAILGATE OUTSIDE GARNISH	1.00	\$	100.00	0.00		\$	0.00	\$ 100.00

Payment Instructions

By Cheque: Crossed and made payable to "Strides Automotive Services Pte. Ltd." with invoice no. indicated on the reverse side. No receipt will be issued unless requested:

By Bank Transfer:

Account Name : Strides Automotive Services Pte. Ltd.

: DBS Bank Ltd - SGD

Bank Account No.: 018-008617-4 Swift Code : DBSSSGSG

Koo Yew Chung

Authorised Signature

for Strides Automotive Services Pte. Ltd.



Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

J.

Strides Automotive Services Pte. Ltd. 2 Tanjong Katong Road, Tower 3, Paya Lebar Quarter, #08-01, Singapore 437161 Tel: 65 69083530 Fax: 65 69083592

Tax Invoice

GST Reg No. : MR-8500001-7 CRN : 199004280Z

Invoice No. : IV220100338
Date : 26.01.2022
Vehicle No. : SHB5561J

Your Ref No. : TAX/11/21/2020

Our Ref No. : 24113004 Terms : 30 Days

Description	Qty	Unit	Add	/	(Dis	count)	Amount
		Cost	8		Am	ount	
TO RESPRAY REAR FENDER RH	0.00	\$ 378.00	0.00		\$	0.00	\$ 0.00
TO RESPRAY REAR PANEL	0.00	\$ 180.00	0.00		\$	0.00	\$ 0.00
TO RESPRAY REAR SPOILER	0.00	\$ 180.00	0.00		\$	0.00	\$ 0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	1.00	\$ 40.00	0.00		\$	0.00	\$ 40.00
TO REPLACE SUNDRY PARTS	0.00	\$ 100.00	0.00		\$	0.00	\$ 0.00
TO CHECK WIRING AND SYSTEM FUNCTION	1.00	\$ 30.00	0.00		\$	0.00	\$ 30.00
TO WASH AND VACUUM	0.00	\$ 60.00	0.00		\$	0.00	\$ 0.00
			GRA	ND	TOTA	L	\$ 3,137.84

Remark:

Make/Model : PRIUS4FL Accident Date : 13.11.2021

Payment Instructions

By Cheque: Crossed and made payable to "Strides Automotive Services Pte. Ltd." with invoice no. indicated on the reverse side. No receipt will be issued unless requested.

By Bank Transfer:

Account Name : Strides Automotive Services Pte. Ltd.

Bank Name : DBS Bank Ltd - SGD

Bank Account No.: 018-008617-4

Swift Code : DBSSSGSG

Koo Yew Chung (Jan 27, 2022 09:20 (Hd + 8)

Authorised Signature

for Strides Automotive Services Pte. Ltd.



MEMORANDUM

To:

Claims Dept

Our Ref:

TAX/11/21/2020

From:

Strides Taxi Pte Ltd

Date:

6/12/2021

ACCIDENT ON 13/11/2021 INVOLVING SHB 5561J & SJU 9400R AT UPPER CHANGI ROAD ESSO STATION

This is to confirm that the daily rental rate for SHB 5561J is \$112.89 per day.

Please proceed to recover any rental loss from the third party as a result of the above accident.

Thank you.

Yours sincerely STRIDES TAXI PTE LTD



for Manager



Laid Up Report

Accident Start Date : 12/10/2021

Date Generated: 25/11/2021

Accident End Date : 25/11/2021

User Name : LeeGek

Case Reference Number	Vehicle Registration Number	Company Type	Vehicle Make	Vehicle Model	Job Card Number	Date and Time (Accident Repair)	Date and Time (Repair Completed)
TAX/11/21/2020	SHB5561J	Strides Taxi Pte Ltd	TOYOTA	PRIUS4FL	24113004	13/11/2021 9:04 AM	19/11/2021 8:42 AM

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission 15/11/2021 08:34 (SGT) Date of Accident 13/11/2021 08:00 (SGT) **Exact Location of Accident** 955 Upper Changi Rd N, Singapore 507662 Additional Location Information UPPER CHANG ROAD / ESSO STATION Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SHB5561J

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Strides Taxi Pte Ltd 1XXXXX369K **Email Address** AUTO-SVCS-TARC@SMRT.COM.SG Mobile Phone No (Phone) +65-68662671 Alternative Phone No (Office) +65-68662672

VEHICLE PARTICULARS

Manufacturer

Model **Prius** Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Taxi Transmission Auto CC 1800

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd Type of Coverage **ThirdParty** Fleet Policy Yes **Policy Number** D-21097466MFSH Cover Note Number

DRIVER

Name of Driver LIM KEE HOCK NRIC No SXXXX095C

Date Of Birth 23/10/1958 Occupation Outdoor **Date Of Driving Pass** 22/11/1979 Driving experience **42 YEARS** Gender Male Mobile Number (Phone) +65-68662672 Alt. Phone Number **Email Address** AUTO-SVCS-TARC@SMRT.COM.SG Address Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Hit and run / Vandalism / Damaged whilst parked Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 0 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT I PARKED MY TAXI AT THE LOT ALONG UPPER CHANGI ROAD ESSO STATION CAR PARK AND WENT TO THE RESTROOM. WHEN I WAS WALKING BACK I HEARD A LOUD SOUND AND I WAS TOLD THAT SJU9440R HAD HIT ONTO THE REAR PORTION OF MY TAXI. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SJU9400R Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver **NEO THIAM SENG** Contact Number

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation.

- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

TRIDES TAYLED TO	× Ain	lu 13/11/2021
Policyholder's Signature / Date &	Driver's Signature (If driver is not	
Time	& Time	Personnel
Sketch Plan	Esso Station	1 upper Changi Road
	Cheers	
	[A]	A- SHB5561J
	7	B-5Ju9400R.



Date: |3|11|2021

Our Ref. No.:

Letter of A	<u>Authorisation</u>		
1, Kim K	er tock	(NRIC No.	7
_	rer / relief driver / taxi sha		_
SHOUS6/	1 hereby authorise	Strides Automo	otive Services Pte Lte
and	to deal with all matters and the second seco	happ	pened on 13/10/2
along	Esso station upper	r changi Roa	d 8.00a,
	ent") on my behalf, inclu		
claims or pro	oceedings against such p	arty or parties (a	s AutoSvs deems fit in it
absolute disc	cretion) in respect of any	claim, demand, lo	ss, cost, expense, liability
damages or	action made against us o	r incurred or suffe	ered by us.
Without prej	judice to the foregoing,	I further authori	se AutoSvs to negotiate
resolve and	settle any proceeding or	claim arising out	of the accidents, including
but not limit	ted to doing any act or	executing any	document or signing the
Discharge V	oucher on my behalf as m	nay be required.	
Name	Vinkee Ho	Signature	" × Acim
NRIC No.			
Tel No.		100	
Address			



Enquire Vehicle-Related Transaction History

Transaction History Details

Log Date/Time:

15 Nov 2021 / 12:45:48

Asset Type: Asset ID:

User ID:

Vehicle

SJU9400R

Transaction Type:

18,32 Insurance Enquiry (GIRO Payment) ESASBAHO - BALQISH BINTE ABDUL HALIL

Transaction Amount:

\$7,49

Business Transaction Reference No.:

External Agency 20211115124548854632

Search Date / Time:

13 Nov 2021 08:00:00

Insurance Company:

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Information displayed is correct as at the log date and time.

Enquire Related Logs

Back to List