

EzLyna (LKKAuto)

From: Tan Lee Gek (Strides Automotive Services Pte Ltd) <LeeGek.Tan@strides.com.sg>
Sent: Tuesday, 17 January 2023 2:36 pm
To: CS A Team; Admin A
Subject: LOD Re: Accident on 28/9/2022 involving SHB 1161G & SKC 7332A (China Taiping's insured) Our Ref: TAX/09/22/2073/lg
Attachments: 09 22 2073 - documents.pdf; VIDEO-2023-01-17-14-32-59.mp4

Dear All,

We quantify our claim as follows:-

Cost of Repair	\$2,783.59
Loss of Rental	\$648.42 (6 days x \$108.07)
Loss of Income	\$360.00 (6 days x \$60.00)
Total	\$3,792.01

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 authorisation
- 6) rear video footage

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



STRIDES

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
CRN : 199004280Z
Invoice No. : IV230100148
Date : 13.01.2023
Vehicle No. : SHB1161G
Your Ref No. : TAX/09/22/2073
Our Ref No. : 24116387
Terms : 30 Days

Description	Qty	Unit Cost	Add %	(Discount) Amount	Amount
Parts					
BAR ASM-RR BPR IMP	1.00	\$ 339.76	(10.00)	\$ 33.98	\$ 305.78
DOOR ASM-RR SI -L	0.00	\$2185.04	0.00	\$ 0.00	\$ 0.00
PANEL-BODY SI OTR-L	0.00	\$1747.82	0.00	\$ 0.00	\$ 0.00
STICKER ELECTRIC (LOGO	0.00	\$ 21.60	0.00	\$ 0.00	\$ 0.00
LINER ASM-RR W/H PNL - LH	1.00	\$ 83.72	(10.00)	\$ 8.37	\$ 75.35
FASCIA-RR BPR	1.00	\$ 758.48	(10.00)	\$ 75.85	\$ 682.63
FASCIA-RR BPR LWR	1.00	\$ 230.68	(10.00)	\$ 23.07	\$ 207.61
FINISHER-RR BPR - LH	1.00	\$ 47.42	(10.00)	\$ 4.74	\$ 42.68
BRACKET ASM-RR BPR FASCIA SI-L	1.00	\$ 29.85	(10.00)	\$ 2.98	\$ 26.87
BRACKET-RR BPR FASCIA SI MTG - LH	0.00	\$ 46.08	0.00	\$ 0.00	\$ 0.00
BRACKET-PARK DIST CONT SEN(BRACKET-PARK DIST CONT SEN) - LH	0.00	\$ 13.20	0.00	\$ 0.00	\$ 0.00
BRACKET-PARK DIST CONT SEN(BRACKET-PARK DIST CONT SEN) - CTE	0.00	\$ 12.90	0.00	\$ 0.00	\$ 0.00
BRACKET-PARK DIST CONT SEN(BRACKET-PARK DIST CONT SEN) - RH	0.00	\$ 12.90	0.00	\$ 0.00	\$ 0.00
BRACKET-RR BPR FASCIA LWR MTG - LH	0.00	\$ 12.80	0.00	\$ 0.00	\$ 0.00
BOLT/SCREW-FRT W/H LNR RET	0.00	\$ 0.52	0.00	\$ 0.00	\$ 0.00
BAR ASM-RR BPR IMP	0.00	\$ 339.76	0.00	\$ 0.00	\$ 0.00
LAMP ASM-TAIL(BODY SI) - LH	0.00	\$ 764.08	0.00	\$ 0.00	\$ 0.00
LAMP ASM-TAIL(LID SI) - LH	0.00	\$ 407.68	0.00	\$ 0.00	\$ 0.00
LAMP ASM-RR FOG - LH	1.00	\$ 36.30	(10.00)	\$ 3.63	\$ 32.67
<u>Sub-Total</u>					\$ 1373.59

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

Koo Yew Chung [Jan 16, 2023 10:48 GMT+8]

Authorized Signature
for Strides Automotive Services Pte. Ltd.

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Our Ref No. : 24116387
Terms : 30 Days

Description	Qty	Unit Cost	Add %	(Discount) Amount	Amount
Labour					
TO REPAIR REAR PORTION LH	1.00	\$ 250.00	0.00	\$ 0.00	\$ 250.00
TO REPAIR REAR FENDER LH	1.00	\$ 100.00	0.00	\$ 0.00	\$ 100.00
TO REPAIR REAR END PANEL	1.00	\$ 100.00	0.00	\$ 0.00	\$ 100.00
Others					
TO RESPRAY REAR PANEL	1.00	\$ 150.00	0.00	\$ 0.00	\$ 150.00
TO RESPRAY REAR BUMPER	1.00	\$ 220.00	0.00	\$ 0.00	\$ 220.00
TO RESPRAY REAR FENDER LH	1.00	\$ 220.00	0.00	\$ 0.00	\$ 220.00
TO RESRAY REAR DOOR LH	0.00	\$ 428.00	0.00	\$ 0.00	\$ 0.00
TO WASH AND VACUUM	0.00	\$ 60.00	0.00	\$ 0.00	\$ 0.00
TO CHECK WIRING AND SYSTEM FUNCTION	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	0.00	\$ 100.00	0.00	\$ 0.00	\$ 0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	1.00	\$ 50.00	0.00	\$ 0.00	\$ 50.00
TO REPLACE SUNDRY PARTS	0.00	\$ 100.00	0.00	\$ 0.00	\$ 0.00
TO CHECK & RESET SYSTEM FUNCTION ISOLATED OF (EV) (NET)	1.00	\$ 150.00	0.00	\$ 0.00	\$ 150.00
GRAND TOTAL					\$ 2,783.59

Remark :

Make/Model : MG5
Accident Date : 28.09.2022

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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
Koo Yew Chung, 11th Fl, 202A Tanjong Katong Rd, Singapore

Authorized Signature
for Strides Automotive Services Pte. Ltd.



Accident Vehicle Laid-Up Report

Registration No. : SHB1161G

Accident Case No. :

Make / Model : MORRIS GARAGES MG5

Ref. No. : 24116387

Date and Time Vehicle off-road for Accident Repair : 28.09.2022 10:53:00

Date and Time Repair Completed : 04.10.2022 10:27:41

Remarks :

Generated by : POHSUAN

Printed on : 11.10.2022



MEMORANDUM

To: Claims Dept

Our Ref: TAX/09/22/2073

From: Strides Taxi Pte Ltd

Date: 28th September 2022

ACCIDENT ON 28/9/2022 INVOLVING SHB 1161G & SKC 7332A ALONG PIE TOWARDS TUAS

This is to confirm that the daily rental rate for SHB 1161G is \$108.07 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

SINGAPORE ACCIDENT STATEMENT

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 Actual 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. 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	28/09/2022 13:55 (SGT)
Reported by	Driver
Date of Accident	28/09/2022 09:49 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE TOWARDS TUAS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB1161G
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INSURED/POLICYHOLDER

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

VEHICLE PARTICULARS

Manufacturer	MG
Model	MG5
Variant	-
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	1

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099115MFSH

DRIVER

Name of Driver	KHOO KEH HOCK
NRIC No	SXXXX397I
Date Of Birth	14/05/1954
Occupation	Outdoor

Date Of Driving Pass	20/12/1974
Driving experience	47 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Address	11
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

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 WAS TRAVELLING ALONG PIE TOWARDS TUAS WITH ONE PASSENGER (MALE CHINESE) ON BOARD. FRONT VEHICLE SLOWED DOWN AS A LORRY SKIDDED AND HIT THE RAILING. AS SUCH I SLOWED DOWN AND THEN I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SKC7332A HAD COLLIDED ONTO THE REAR LEFT PORTION OF MY TAXI.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE TOO BIG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKC7332A
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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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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)

I understand, 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' lawyers/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' lawyers/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



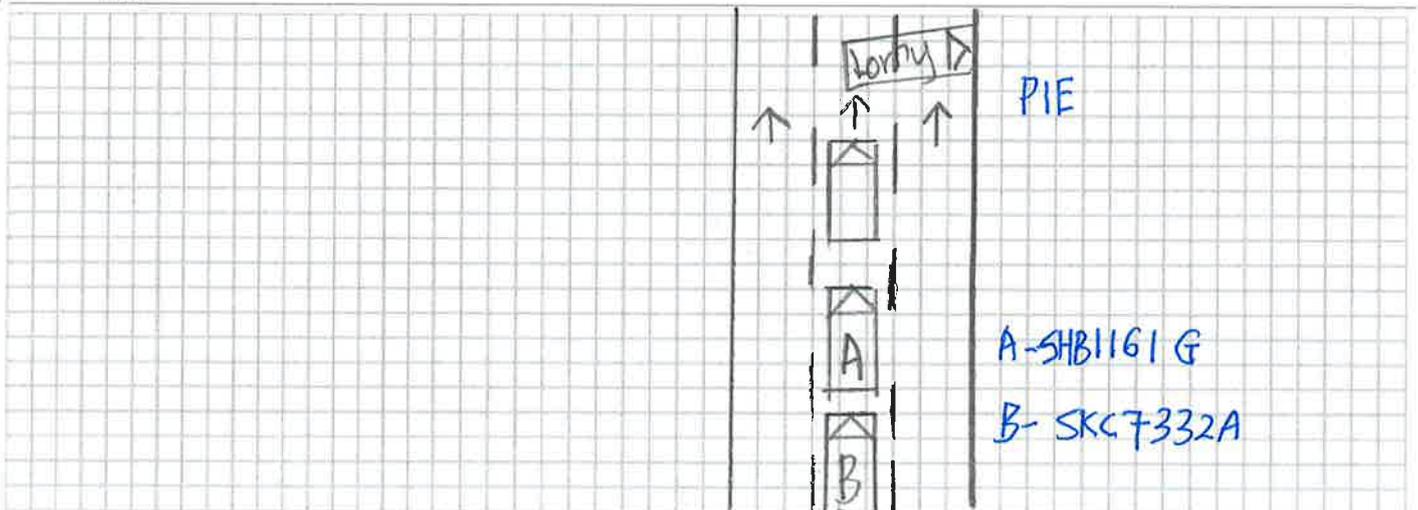
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

lin 28.9.2022

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Date: 28.9.2022

Our Ref. No.:

Letter of Authorisation

I, khoo keh Hock (NRIC No.: _____) the registered hirer / relief driver / taxi share driver of Strides taxi registration number SHB 1161G hereby authorise **Strides Automotive Services Pte Ltd** ("**AutoSvs**") to deal with all matters arising out of the accident between my taxi and SKC 7332A happened on 28/9/22 0949hrs along PIE → Tuas

(the "**Accident**") on my behalf, including but not limited to instituting and any claims or proceedings against such party or parties (as AutoSvs deems fit in its absolute discretion) in respect of any claim, demand, loss, cost, expense, liability, damages or action made against us or incurred or suffered by us.

Without prejudice to the foregoing, I further authorise AutoSvs to negotiate, resolve and settle any proceeding or claim arising out of the accidents, including but not limited to doing any act or executing any document or signing the Discharge Voucher on my behalf as may be required.

Name : khoo keh Hock Signature: 
NRIC No. :
Tel No. :
Address :
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