EzLyna (LKKAuto)

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

Sent: Friday, 27 January 2023 12:13 pm

To: CS A Team; Admin A

Subject: LOD Re: SHF95A - SURVEY - CHINA TAIPING *** LKK REF; CC3/CTI22012058/Kpa3 //

YOUR REF: TAX/11/22/2060

Attachments: vlc-record-2022-12-07-17h34m39s.mp4; 11 22 2060 - documents.pdf

Dear All,

We quantify our claim as follows:-

Cost of Repair	\$2,950.00				
Loss of Rental	\$584.22	(7	days x	\$83.46)
Loss of Income	\$420.00	(7	days x	\$60.00)
LTA searh fee	\$2.00				
Total	\$3,954.22				

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) 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



From: Tan Lee Gek (Strides Automotive Services Pte Ltd)

Sent: Wednesday, 7 December 2022 5:41 pm
To: Mei Kwan (LKKAuto) < Meikwan@lkkauto.com>

Cc: CS A Team <cs-a@lkkauto.com>; Admin A <admin-a@lkkauto.com>

Subject: RE: SHF95A - SURVEY - CHINA TAIPING *** LKK REF; CC3/CTI22012058/Kpa3 // YOUR REF: TAX/11/22/2060

Dear Mei Kwan,

We attached the video footage as requested.



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. : IV230100245 Date : 19.01.2023 Vehicle No. : SHF95A Your Ref No. : TAX/11/22/2060

Our Ref No. : 24117002 Terms : 30 Days

Description	Qty	Unit	Add	/ (Discount))	Amount
		Cost	8	Amount		
LUMP SUM AMOUNT FOR REPAIR AS PER SURVEYOR'S RECOMMENDATION	1.00				\$	\$ 2,950.00
			GRAN	ID TOTAL	\$	2,950.00

Remark :

Make/Model : PRIUS4 Accident Date : 30.11.2022

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:

Swift Code

Account Name : Strides Automotive Services Pte. Ltd.

: DBSSSGSG

Bank Name : DBS Bank Ltd - SGD Bank Account No.: 018-008617-4

Koo Yew Chung

Authorised Signature for Strides Automotive Services Pte. Ltd.

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E. & O.E



MEMORANDUM

To:

Claims Dept

Our Ref:

TAX/11/22/2060

From:

Strides Taxi Pte Ltd

Date:

2nd December 2022

ACCIDENT ON 30/11/2022 INVOLVING SHF 95A & SNG 6349C ALONG EVERITT ROAD NORTH TOWARDS CHANGI ROAD

This is to confirm that the daily rental rate for SHF 95A is \$83.46 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 : 08/11/2022

Date Generated 99/12/2022

Accident End Date 🔋 09/12/2022

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/11/22/2060	SHF95A	Strides Taxi Pte Ltd	TOYOTA	PRIUS4	24117002	01/12/2022 11:33 AM	08/12/2022 10:16 AM

SS3D22C10004 / Strides Automotive Services Pte Ltd (757705) ENTRY DATE & TIME: 01/12/2022 14:21 (SGT) SUBMITTED BY: SHANTI B THAIYAL NAYAGI (SMRT05) VERSION: 1 (01/12/2022 14:21 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Actual 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

01/12/2022 14:21 (SGT) Driver 30/11/2022 17:00 (SGT) Everitt Rd N, Singapore **EVERITT ROAD NORTH TOWARDS CHANGI ROAD** Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHF95A

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No

Alternative Phone No.

Strides Taxi Pte Ltd 1XXXXX369K

AUTO-SVCS-TARC@SMRT.COM.SG

(Phone) +65-68662671

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category Transmission

CC

Tovota

Prius

No - Claiming third party

Taxi

Auto

1800

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

MS First Capital Insurance Ltd D-22099115MFSH

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LIM GUAN CHOON (LIN YUANJUN) SXXXX919J 29/08/1973 Outdoor

Date Of Driving Pass 05/08/2008 Driving experience 14 YEARS AND 3 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

GENERAL INFORMATION OF THE ACCIDENT

Insurance Company of Other Vehicle Owned by Driver

Type of Accident Side Swipe
Weather Conditions Raining
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? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 3 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 Female

PASSENGER 2

Name UNKNOWN Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG EVERITT ROAD NORTH TOWARDS CHANGI ROAD WITH 2 PASSENGERS ON BOARD. SUDDENLY A VEHICLE SNG6349C (PHV) ALIGHTED PASSENGER ON THE LEFT AND MOVED OUT ABRUPTY AND COLLIDED ONTO THE LEFT PORTION OF MY TAXI.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SNG6349C Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private hire Name of Driver TAY **Contact Number** Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

+	. ×	Changi Road
q		
alighting -	SNG 6349C (3)	Everit t t Road North

Declaration

I/We declare the loregoing particulars are true in every respect.

1/12/22



Date: 1. 12 · 2022 .

Our Ref. No.:

Letter of	Authorisation
I, _ Lim	Guan Choon (NRIC No.:) the
	irer / relief driver / taxi share driver of Strides taxi registration number
SHF 95	hereby authorise Strides Automotive Services Pte Ltd
) to deal with all matters arising out of the accident between my taxi
andSN	G 6349 C happened on 30/11/ 2622
along _t	everitt Road North
	ent") on my behalf, including but not limited to instituting and any
	oceedings against such party or parties (as AutoSvs deems fit in its
	cretion) in respect of any claim, demand, loss, cost, expense, liability,
	action made against us or incurred or suffered by us.
· ·	,
Without pre	judice to the foregoing, I further authorise AutoSvs to negotiate,
	settle any proceeding or claim arising out of the accidents, including
	ted to doing any act or executing any document or signing the
	oucher on my behalf as may be required.
Name	Lim Guan Choon Signature:
NRIC No.	
Tel No.	<u>.</u>
Address	£

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SNG6349C

Date of Accident

30/11/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Period of Insurance _______ 23/08/2022 - 22/08/2023

Requested By ______ BALQISH BINTE ABDUL HALIL (...

Requested Date ______ 01/12/2022 14:14

Payment details

Request Amount: **\$\$1.87**

GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre

GST Registration No: M400017735