



DING AUTOMOTIVE PTE LTD
 2 Pereira Road, #04-02, 2Connect@TS
 Singapore 368024

Without Prejudice to our
 driver's Injury claims

OUR REF: 50114949/SHB2139R/DOA/23/03/2023/SO
 YOUR REF: XE3181E/--

3 April 2023

To: MOTOR CLAIMS DEPARTMENT
 ERGO INSURANCE
 5 TEMASEK BOULEVARD #04-01
 SUNTEC TOWER FIVE
 SINGAPORE 038985

ACCIDENT INVOLVING : SHB2139R AND XE3181E ON 23/03/2023
 LOCATION ALONG : TUAS WEST ROAD, TUAS LINK 4, SINGAPORE

We refer to the above mentioned incident with cost of repair and losses outlined as follows:

	Rate Per Day	Repair/ Claims Day	Amount Before GST	GST 8%	Amount After GST
Cost of Repair	\$ -	7	\$ 6,500.00	\$ 455.00	\$ 6,955.00
Loss Of Rental	\$ 121.20	7	\$ 848.40	\$ -	\$ 848.40
Loss Of Income	\$ 80.00	7	\$ 560.00	\$ -	\$ 560.00
LTA/GIA Search Fee	\$ -	0	\$ 1.85	\$ 0.15	\$ 2.00
Towing Fee	\$ -	0	\$ -	\$ -	\$ -
Surveyor Fee	\$ -	0	\$ -	\$ -	\$ -
Total	\$ 201.20	7	\$ 7,910.25	\$ 455.15	\$ 8,365.40

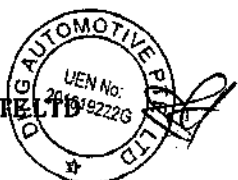
The accident was caused solely by the negligence of your insured/driver, which resulted in the above costs of repair and losses.

Enclosed herewith the relevant documents for your perusal:

☺	Letter of Demand	☺	Mileage Record
☺	Repair Bill	☺	Rental Invoice
☺	Finalised Report	☺	Letter of Authority
☺	Repair Estimate	☺	Satisfaction Voucher
☺	Accident Report / Police Report	☺	Certificate of Insurance
☺	3 rd Party Search Fee	☺	Towing (if applicable)

City Cab has authorised DING AUTOMOTIVE PTE LTD to claim, correspond, and receive payment on behalf of our client against any Third Party pertaining to the total sum stated above. Please look into our client's claim and revert with your Liability/Offer within 14 days upon receipt of this Letter of Demand.

Your Sincerely,
 MOTOR CLAIMS DEPT
 DING AUTOMOTIVE PTE LTD
 TEL: +65 9239 4128



DING AUTOMOTIVE PTE LTD

Business Reg No : 201619222G
2 PEREIRA ROAD, #04-02, 2CONNECTT@TS,
SINGAPORE 368024
HP : 9239 4128

REPAIR BILL

M/S: ERGO INSURANCE

DOA: 23/03/2023

REF: XE3181E

OIC: --

OUR REF: SHB2139R

DATE: 3/4/2023

ITEM NO.	DESCRIPTION	UNIT PRICE	AMOUNT
1	Cost of Repair - SHB2139R	\$ 6,500.00	\$ 6,500.00
REMARKS:	Job card: 50114949 LUMP SUM	SUB TOTAL: GST (7%) GRAND TOTAL	\$ 6,500.00 \$ 455.00 \$ 6,955.00

Yours faithfully,



Authorise Signature of Ding Automotive Pte Ltd

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

23/03/2023 14:07

OWNER'S PARTICULARS

JOB-NO: 50114949

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 3

ADDRESS: 383 SIN MING DRIVE

64739522

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHB2139R

TRANS: AUTO

CHASSIS: JTDKB3FU903078161

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

ENGINE: ZZR2B88029

OWNER'S INSURER: AXA INSURANCE SINGAPORE PTE LTD

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
LABOUR							
1 TO STRAIGHTEN AND PANEL BEAT OF ACCIDENT AREAS	1.00	2,000.00	0.00	2,000.00	Y		<u>700</u>
2 TO RUST PROOFING OF AFFECTED AREAS	1.00	160.00	0.00	160.00	Y		<u>40</u>
3 TO REMOVE AND REFIT OF NECESSARY ITEMS TO ENABLE BODYWORK REPAIR	1.00	350.00	0.00	350.00	Y		<u>60</u>
4 TO DIAGNOSTIC, CHECK WIRING, LIGHTING SYSTEM AND CLEAR FAULT CODE	1.00	200.00	0.00	200.00	Y		<u>30</u>
5 TO REFIT REAR REVERSE SENSOR	1.00	100.00	0.00	100.00	Y		<u>30</u>
6 TO TRANSFER REAR BOOT MECHANISM TO NEW BOOT AND PERFORM WATER SEEPAGE TEST	1.00	180.00	0.00	180.00	Y		<u>60</u>
7 TO REMOVE AND REFIT REAR TAILGATE UPPER AND LOWER WINDSCREEN GLASS TO ENABLE BODYWORK REPAIR	1.00	260.00	0.00	260.00	Y		<u>180</u>
8 TO CHECK AND REPAIR WIRE HARNESS	1.00	200.00	0.00	200.00	Y		<u>X</u>
9 TO VACUUM AND CLEAN UP GLASS SHARDS AND WASH REAR LUGGAGE COMPONENTS	1.00	150.00	0.00	150.00	Y		<u>X</u>
10 TO RESPRAY REAR BUMPER COVER	1.00	250.00	0.00	250.00	Y		<u>200</u>
11 TO RESPRAY REAR BUMPER EXTENSION FILLER	1.00	250.00	0.00	250.00	Y		<u>100</u>
12 TO RESPRAY REAR REVERSE SENSOR	1.00	250.00	0.00	250.00	Y		<u>50</u>
13 TO RESPRAY REAR TAILGATE PANEL	1.00	250.00	0.00	250.00	Y		<u>200</u>
14 TO RESPRAY REAR TAILGATE OUTER GARNISH	1.00	250.00	0.00	250.00	Y		<u>100</u>
15 TO RESPRAY REAR TAILGATE SPOILER	1.00	250.00	0.00	250.00	Y		<u>100</u>
16 TO RESPRAY REAR END PANEL	1.00	250.00	0.00	250.00	Y		<u>100</u>
17 TO RESPRAY REAR FLOOR PAN	1.00	250.00	0.00	250.00	Y		<u>X</u>
18 TO RESPRAY REAR LH QUARTER PANEL	1.00	250.00	0.00	250.00	Y		<u>X</u>
19 TO RESPRAY REAR RH QUARTER PANEL	1.00	250.00	0.00	250.00	Y		<u>X</u>
TOTAL:		6,100.00	0.00	6,100.00			
MATERIALS							
1 REAR BUMPER	1.00	442.60	110.65	331.95	L	Y	<u>de</u>
2 REAR BUMPER CENTER GUARD	1.00	576.30	144.08	432.22	L	Y	<u>de</u>
3 REAR BUMPER TOWING COVER	1.00	15.40	3.85	11.55	L	Y	<u>de</u>
4 REAR LH BUMPER RETAINER	1.00	116.50	29.13	87.37	L	Y	<u>de</u>
5 REAR RH BUMPER RETAINER	1.00	117.70	29.43	88.27	L	Y	<u>X</u>
6 REAR LH BUMPER EXTENSION FILLER	1.00	123.70	30.93	92.77	L	Y	<u>Rp</u>
7 REAR RH BUMPER EXTENSION FILLER	1.00	123.70	30.93	92.77	L	Y	<u>X</u>

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
8 REAR BUMPER REINFORCEMENT	1.00	332.70	83.18	249.52	L	Y	bt
9 SMART KEY ANTENNA ✓	1.00	72.00	18.00	54.00	L	Y	bt
10 SPARE TYRE LOCK	1.00	20.80	5.20	15.60	L	Y	R
11 REAR BUMPER CENTER UNDER COVER	1.00	229.90	57.48	172.42	L	Y	X
12 REAR LH BUMPER UNDER COVER	1.00	241.90	60.48	181.42	L	Y	X
13 REAR RH BUMPER UNDER COVER	1.00	175.10	43.78	131.32	L	Y	X
14 TAILLAMP LOWER RH	1.00	502.00	125.50	376.50	L	Y	X
15 TAILLAMP UPPER RH	1.00	451.80	112.95	338.85	L	Y	X
16 TAILLAMP LOWER LH	1.00	502.00	125.50	376.50	L	Y	cm
17 TAILLAMP UPPER LH	1.00	443.30	110.83	332.47	L	Y	cm
18 REAR TAILGATE PANEL ASSY	1.00	1,147.80	286.95	860.85	L	Y	bt
19 REAR TAILGATE OUTER GARNISH	1.00	925.60	231.40	694.20	L	Y	cm
20 REAR TAILGATE TOYOTA EMBLEM	1.00	47.90	11.98	35.92	L	Y	nr
21 REAR TAILGATE PRIUS EMBLEM	1.00	54.60	13.65	40.95	L	Y	nr
22 REAR TAILGATE HYBRID EMBLEM	1.00	54.60	13.65	40.95	L	Y	nr
23 REAR BOOT WEATHERSTRIP ✓	1.00	372.30	93.08	279.22	L	Y	bt
24 REAR BOOT LOCK ✓	1.00	467.00	116.75	350.25	L	Y	bt
25 REAR END PANEL	1.00	650.30	162.58	487.72	L	Y	Ry
26 REAR END PANEL TRIM BOARD	1.00	126.70	31.68	95.02	L	Y	R
27 REAR LH LUGGAGE SIDE TRIM ✓	1.00	355.90	88.98	266.92	L	Y	bt
28 REAR RH LUGGAGE SIDE TRIM	1.00	355.90	88.98	266.92	L	Y	X
29 SPARE TYRE BOARD ✓	1.00	519.00	129.75	389.25	L	Y	bt
30 TAILLAMP COVER LH ✓	1.00	64.50	16.13	48.37	L	Y	bt
31 TAILLAMP COVER RH ✓	1.00	64.50	16.13	48.37	L	Y	bt
32 REAR TAILGATE LOWER WINDSCREEN	1.00	761.40	190.35	571.05	L	Y	cm
33 REAR TAILGATE LOWER WINDSCREEN MOULDING	1.00	35.50	8.88	26.62	L	Y	nr
34 REAR TAILGATE LOWER WINDSCREEN ADHESIVE DAM	1.00	28.90	7.23	21.67	L	Y	nr
35 REAR TAILGATE UPPER WINDSCREEN MOULDING	1.00	35.50	8.88	26.62	L	Y	nr
36 REAR TAILGATE UPPER WINDSCREEN ADHESIVE DAM	1.00	28.90	7.23	21.67	L	Y	nr
37 REAR LH TAILGATE LOWER WINDSCREEN MOULDING NO.2	1.00	30.90	7.73	23.17	L	Y	nr
38 REAR RH TAILGATE LOWER WINDSCREEN MOULDING NO.2	1.00	30.90	7.73	23.17	L	Y	nr
39 REAR FLOOR PAN ASSY	1.00	583.40	145.85	437.55	L	Y	X
40 REAR TAILGATE SPOILER ASSY	1.00	1,575.40	393.85	1,181.55	L	Y	Ry
41 REAR BOOT LOCK OPEN SWITCH	1.00	179.10	44.78	134.32	L	Y	X
42 REAR LICENCE PLATE LAMP ASSY	1.00	287.80	71.95	215.85	L	Y	?
43 REAR TAILGATE INNER TRIM BOARD (BIG)	1.00	259.20	64.80	194.40	L	Y	?
44 REAR TAILGATE INNER TRIM BOARD (SMALL)	1.00	225.20	56.30	168.90	L	Y	?
45 REAR LH DECK FLOOR BOX	1.00	313.60	78.40	235.20	L	Y	?
46 REAR RH DECK FLOOR BOX	1.00	313.60	78.40	235.20	L	Y	X
47 TAILLAMP PANEL LH	1.00	103.40	25.85	77.55	L	Y	Ry
48 REAR BUMPER CLIP SET	1.00	55.00	0.00	55.00	S	Y	nr-30
49 REAR REVERSE SENSOR SET	2.00	300.00	0.00	300.00	S	Y	nr-200
50 REAR BUMPER PROTECTOR	1.00	120.00	0.00	120.00	S	Y	50nr
51 REAR BUMPER UNDER COVER CLIP SET	1.00	55.00	0.00	55.00	S	Y	?
52 REAR LICENCE PLATE NUMBER WITH FRAME	1.00	80.00	0.00	80.00	S	Y	ASbt
53 REAR TAILGATE "6552-1111" STICKER	1.00	100.00	0.00	100.00	S	Y	50nr
54 REAR TAILGATE "COMFORT DELGRO" STICKER	1.00	100.00	0.00	100.00	S	Y	50nr
55 REAR TAILGATE "BOOK NOW" STICKER	1.00	100.00	0.00	100.00	S	Y	50nr
56 REAR TAILGATE INNER TRIM BOARD CLIP SET	1.00	50.00	0.00	50.00	S	Y	330
57 TAILLAMP GUIDE CLIP SET	1.00	50.00	0.00	50.00	S	Y	20nr
58 REAR END PANEL SEALANT	2.00	120.00	0.00	120.00	S	Y	?

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
59 REAR FLOOR PAN SEALANT	2.00	120.00	0.00	120.00	S	Y	X
60 TAILLAMP PANEL SEALANT	2.00	100.00	0.00	100.00	S	Y	X
61 REAR SPOILER CLIP AND PAD SET	1.00	50.00	0.00	50.00	S	Y	X
62 REAR WINDSCREEN SEALANT	3.00	150.00	0.00	150.00	S	Y	60.00
63 REAR WINDSCREEN PRIMER	2.00	100.00	0.00	100.00	S	Y	50.00
64 REAR BUMPER EXTENSION FILLER CLIP	1.00	50.00	0.00	50.00	S	Y	X
TOTAL:		16,186.70	3,621.80	12,564.90			
TOTAL PARTS & LABOUR :		22,286.70	3,621.80	18,664.90			

EXCESS/LOADING:\$\$ 0.00

No. Of Day: 5

RE-SURVEY: BEFORE/AFTER PAINTING
PART-BY-PART OR LUMP SUM: \$\$

DATE OF SURVEY: 24 / 3 / 23

SURVEYED BY: Tanpin Lick

CONTACT NO: 97495749 FAX NO: 62563561

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED
DAuto001
Ding Auto User 1

ESTIMATOR
STA AUTOCENTRE
TEL: FAX:

Lumpsum

Labour = \$ 1950.00
S/M = \$ 605.00
Parts = \$ 5644.80
C+S+P = \$ 8199.80 - 20%
= \$ 6559.84

Final Amt = \$ 6559.84

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	23/03/2023 15:13 (SGT)
Reported by	Actual Driver
Date of Accident	23/03/2023 11:45 (SGT)
Exact Location of Accident	Tuas West Rd, Singapore
Additional Location Information	TUAS LINK 4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB2139R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CITYCAB PTE LTD
Company Reg No	1XXXXX839G
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-81943755
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	HSBC Life (Singapore) Pte. Ltd
Policy Number / Cover Note Number	VFX/P2419140

DRIVER

Name of Driver	LEK MENG KIANG
NRIC No	SXXXX084J
Date Of Birth	25/09/1962
Occupation	Outdoor

Date Of Driving Pass	07/11/1981
Driving experience	41 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81943755
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 268C BOON LAY DRIVE #10-552
Address complement	-
Postcode	643268
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RELIEF DRIVER
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	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

ON 23/03/23 AT ABOUT 1145HRS, I WAS DRIVING VEHICLE A (SHB2139R) ALONG TUAS WEST ROAD ON THE CENTER LANE. I CAME TO A STOP AT THE JUNCTION OF TUAS LINK 4 AS THE TRAFFIC LIGHT HAD TURNED RED, WHEN SUDDENLY VEHICLE B (XE3181E) COLLIDED INTO THE REAR OF MY VEHICLE. WILL SEEK MEDICAL ATTENTION.

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 IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE3181E
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Vehicle Manufacturer	ISUZU
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	RAJENDIRAN SENTHIL KUMAR
Passport No/FIN	GXXXX500Q
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEK MENG KIANG
Gender	Male
Phone No	(Phone) +65-81943755
Address	268C BOON LAY DRIVE #10-552
Address Complement	-
Post Code	643268
Approximate Age Years Old	60
Injuries Sustained	MINOR INJURY
Injured person in which vehicle?	SHB2139R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	UNKNOWN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	UNKNOWN INJURY
Injured person in which vehicle?	SHB2139R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 lodgment of this report to the Insurers, you hereby consent to the archiving of this report at the center 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.

FLASH ACCIDENT REPORTING OFFICER

FRO AMIN



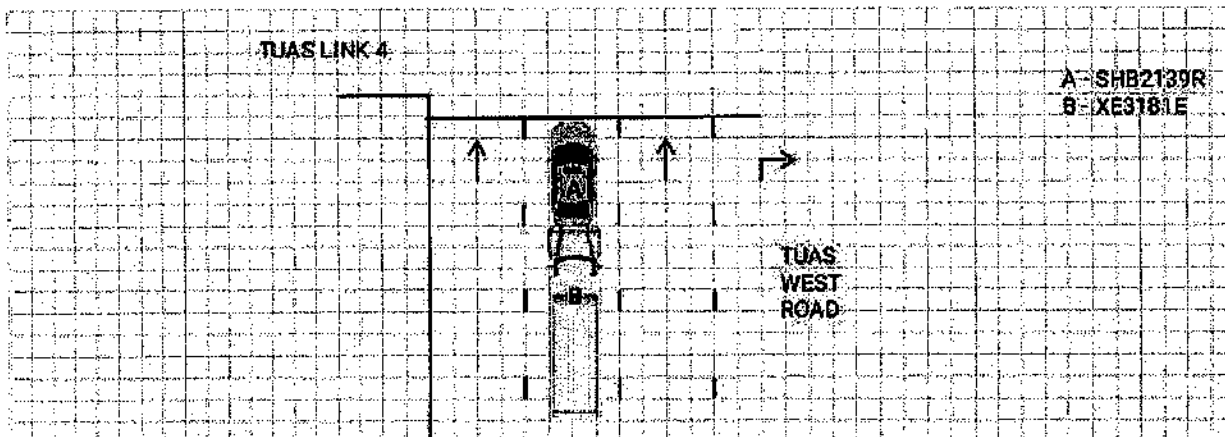
Policyholder's Signature / Date & Time

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

230323 1320

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

ON 23/03/23 AT ABOUT 1145HRS, I WAS DRIVING VEHICLE A (SHB2139R) ALONG TUAS WEST ROAD ON THE CENTER LANE. I CAME TO A STOP AT THE JUNCTION OF TUAS LINK 4 AS THE TRAFFIC LIGHT HAD TURNED RED. WHEN SUDDENLY VEHICLE B (XE3181E) COLLIDED INTO THE REAR OF MY VEHICLE. WILL SEEK MEDICAL ATTENTION.

Declaration

We declare the foregoing particulars are true in every respect.



FLASH ACCIDENT
REPORTING OFFICER
FRQ AMIN 

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time
230323 1320

Witnessed by Reporting Centre Personnel



Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2023 15:41		Vide Report No.:		Station Diary No.: 113	
Informant's Particulars					
Name of Informant: LEK MENG KIANG			Address: APT BLK 268C BOON LAY DRIVE #10-552 SINGAPORE 643268		
ID Type / ID No.: NRIC NO / S1561084J			Contact No.:		Mobile: 81943755
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 25/09/1962	Type of Informant: Driver		
Race: Chinese			Language:		
Occupation: CITYCAB TAXI DRIVER			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/03/2023 11:45	Type of Location: X-Junction
Location: TUAS LINK 4				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHB2139R	Car				Slightly Damaged	1
XE3181E	Lorry				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230323/2070

2 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20230323/2070

CONTINUATION OF REPORT

Driver			
Name	LEK MENG KIANG	ID No.	S1561084J
Related Vehicle	SHB2139R (Car)	Contact No.	81943755
Hospital/Clinic	BOON LAY CLINIC & SURGERY PTE LTD	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	23/03/2023	Date Discharge	23/03/2023
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 23/3/2023 at about 11:45am,
I was driving along Tuas West Road towards AYE together with my passenger at the back and came to a stop at the red light traffic junction and on my left was EPSON INDUSTRIAL PTE LTD. A white truck (XE3181E) bumped onto my rear bumper (SHB2139R) Yellow city cab taxi. My vehicle (SHB2139R) rear bumper suffered a crack tail light, damaged bumper, damaged boot. I went to the doctor to consult a backlash and received 3 days MC. I asked my passenger about his condition and he informed me that he is okay but just a little bit pain not mentioning where and I advised him to go to the doctor. All my in car recording camera is submitted to City Cab.
I am making this report for GRAB further actions reference no. (A-4NHLINPGWEG2) . No government property damaged.



**SINGAPORE
POLICE FORCE**




T/20230323/2070


Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2889999

3 of 3

Report No. T/20230323/2070

CONTINUATION OF REPORT

Signature of Officer Recording The Report: J/ SGT 1 MUHAMMAD IZAAQ BIN IDRIS 
Signature Of Interpreter: Not applicable
Officer in Charge Of Case: TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219

Signature Of Informant: 
Date/Time: 23/03/2023 15:41
Classification Of Case:

NP168

BOON LAY CLINIC & SURGERY PTE LTD
221 BOON LAY PLACE #01-240 BOON LAY SHOPPING CENTRE, SINGAPORE
640221
Tel1: 62655247 Fax: 62680866

Medical Certificate

Date : 23 Mar 2023

MC No. : 0000081086

This is to certify that :

Name : LEK MENG KIANG

NRIC : S1561084J

is Unfit for Duty for 3 days

from 23 Mar 2023 to 25 Mar 2023 inclusive.

DR ANTHONY CHAO TAR LIANG
MB BCH MD LRCP & SI (MUS) FRCR
M Med (Family Med.), MCFP (S)
Grad. Dip. Occupational Med. (S-D)
SINGAPORE

DR ANTHONY CHAO
MBBS MMED (Family Med)

**This certificate is not valid for absence from court attendance.*


INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

XE3181E

Date of Accident

23/03/2023 **Reset**% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **ERGO Insurance Pte. Ltd.**Period of Insurance **20/07/2022 - 19/07/2023**Requested By **Hashim (Ding Auto Pte Ltd)**Requested Date **23/03/2023 12:37****Payment details**Request Amount: **S\$1.85**GST Amount: **S\$0.15**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**

DATE	DESCRIPTION	MILEAGE ODOMETER READING						MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		3	7	3	6	7	2		FROM	TO
23/3/23	VEHICLE ACCIDENT (IN)	3	7	3	6	7	2		12:00h	
29/3/23	VEHICLE ACCIDENT (OUT)	3	7	3	6	7	7			1830 h

VEHICLE NUMBER: SHB2139R

HIRER/DRIVER SIGN: 

REMARKS :

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Our Ref: CC23030401



Date: 31 March 2023

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 23/03/2023 @ 11:45 hrs
ALONG TUAS WEST RD, TUAS LINK 4
INVOLVING XE3181E

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 **SHB2139R** (the "Taxi"). The Taxi was hired to **LEK MENG YANG IC NO SXXXX517C** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$130.90** per day (inclusive of GST).

Please be advised that the Taxi was insured with **HSBC Life (Singapore) Pte 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

Fleet Insurance Team
Asset Management

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

LETTER OF AUTHORITY

Accident involving SHB2139R & XE 3181E on 23/3/23
along Tuas west road

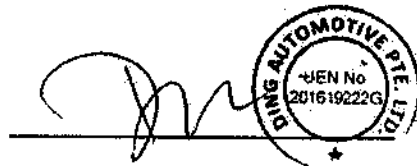
I/We, City Cab Pte Ltd NRIC/ Co.Reg Number 199502839G registered owner of vehicle No. SHB2139R which was rented to Hirer/Driver Mr/Ms Lek Meng Yang NRIC SXXXX 517C, hereby authorize **Ding Automotive Pte Ltd** on this date 23/3/23 to submit, correspond, negotiate and settle my/our claim for cost of repair 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



Authorized Workshop



Hirer/Driver Signature

Satisfaction Voucher

Date: 23/03/2023

AXA INSURANCE SINGAPORE PTE LTD

Attention: MOTOR CLAIMS DEPT

Dear Sir/Madam

LEK MENG YANG

29 MAR '23 18:30

I/We hereby acknowledge having received from Singapore Technologies Kinetics

Ltd., 249 Jalan Boon Lay, Singapore 619523, my/our vehicle number SHB2139R

which has been repaired to my/our satisfaction and acceptance. I/We admit that

the payment of SGD _____ account for such repairs is in full discharge

of my/our claim upon the corporation under the policy number VFX/P2419140

reference claim number 50114949 in respect of the damage caused to the

said vehicle in an accident that occurred thereto or about the 23/03/2023

at ALNG TUAS WEST RD

Dated this day of 29/3/23, 2023

Signature: [Signature]

NRIC No: 57770 3517/C

Name: CityCab PTE LTD (Fleet)

Address: 383 SIN MING DRIVE
SINGAPORE 575717 0

Company Stamp if applicable

AXA INSURANCE SINGAPORE PTE LTD
8 Shenton Way, #27-01
AXA Tower, Singapore 068811
Customer Service Centre #01-21
Tel: 1800 8804888 Fax:-
Website: www.axa.com.sg
GST Registration Number: 199903512M
customer.care@axa.com.sg



CERTIFICATE OF INSURANCE

■ Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) ■ Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 ■ Road Transport Act. 1987 (Malaysia) ■ Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)			
CERTIFICATE NO.	: VFX/P2419140	Account No.	: 03715
Coverage	: Third Party Fire & Theft		
Sum Insured	: NIL		
Name of Policy Holder	: CityCab Pte Ltd		
Vehicle Registration No.	: All CityCab taxis operating in the Republic of Singapore		
Period of Insurance	: From 1/1/2021 To 31/12/2023 (Both Dates Inclusive)		
PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
Any licensed taxi driver who is driving on the Policyholder's order or with their permission			
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.			
LIMITATIONS AS TO USE*			
a) Use in connection with the Policyholder's business			
b) Use for carriage of passengers for hire and reward			
c) Use for social, domestic and pleasure purposes			
This policy does not cover			
a) Use for racing, pace-making, reliability trial or speed testing			
b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle			
(01)			
EXCESS :			
All Claims : SGD 2,000.00			
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.			

I/We hereby certify that the policy to which this Certification relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE SINGAPORE PTE LTD


Authorized Signature

Issued by - on

IMPORTANT:

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with the obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act, (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.