0.047444000 (011405407 (4/1/-4)		COMFORIDELGRO
Our Ref : CC17111020 / SHA8519T /WT(st) Your Ref :	_	ENGINEERING
Date : 12-Dec-17	CDGE Taxi Claims Dept	
CHINA INSURANCE CO LTD	59 Loyang Drive 4th Flr Singapore 508969	ComfortDelGro Engineering Pte Ltd 205 Braddell Road Singapore 579701
3 ANSON ROAD		Mainline +65 6383 6280 Facsimilie +65 6280 9755
#16-00 SPRINGLEAF TOWER	HIDICE	www.cdge.com.sg
SINGAPORE 079909 WITHOUT PRE	JUDICE	Company Registration No: 199506048W
Attn : Motor Claims Department		Workshops
Dear Sir		Braddell 205 Braddell Road Singapore 579701
ACCIDENT INVOLVING OUR TAXI SHA8519 OTHERS 10 VEHILES		B6051D 59 Loyang Drive 9.11.17 Singapore 508969
We are the authorised repair workshop for Citycab F		Sin Ming
SHA8519T which was involved in the captioned a The vehicle owner and the taxi driver concerned have them in presenting their claims against the party res	e requested and autho	ed vehicle. Pandan rized us to assist 45 Pandan Road Singapore 609286
from the damage to the vehicle.	portsible for all applicab	320 Ubi Road 3 Singapore 408649
As the accident was caused by the negligent act of y we are submitting these claims for your consideration		24 Senoko Loop
TAXI OWNER'S CLAIM 1 Cost of Repair	\$	Sungei Kadut 7 Sungei Kadut Way 1,017.01 Singapore 728791
2 2 days Loss of Rental @ \$ 129.28 3 Survey Report Fees (Surveyed by M/s LKK	B per day \$	258.56 Yishun Industrial Park A Singapore 768732
4 LTA Search Fees (Surveyed by M/S LKK	\$	5.35
5 GIA / Police Report Fees	\$	-
6 Towing / Medical / Transporation Fees	\$	-
3 (Sub Total : \$	1,280.92
HIRER'S CLAIM		
7 2 days Loss of Income @\$ 80.00	D_per days\$_	160.00_
	Total Claims : \$	1,440.92
We enclosed herewith the following documents to sura) Original repair bill and photostat photographs: b) LTA search slip/s of: GBB60511 c) GIA / Police report/s of: SHA8519	<u> </u>	pcs.
 d) Letter of authority from owner / hirer / operator (X) Photocopies of Accident Scene Photos () Witness statement/s (x) Downtime/Mileage 	() Certificate of Insur record (x) Rent	ance al Rate letter
Kindly look into the matter and let us hear from you con as possible.	on the settlement of the	said claims as
Please note that it is a condition of any settlement re to any personal injury claim (if any) of the taxi driver.		ithout prejudice

Yours faithfully 'William 'Ian Deputy Manager **CDGE Claims Department** Tel: 6214 8737 Fax: 6214 1843 Email: williamtan@cdge.com.sg

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











51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC3/CTI17022839/K1zb3

5/1/2018

YONG WEN FOOD (S) PTE LTD

24 Penjuru Road #05-06 CWT Commodity Hub Singapore 609128

Dear Sir/Madam,

ACCIDENT INVOLVING GBB 6051D & SHA 8519T ON 29/11/2017

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party upon receiving of the above requested documents.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Zayer

Case Handler

DID: 6841 2409

FAX: 6741 4108

Email: zayyer@lkkauto.com

China Taiping Insurance (Singapore) Pte Ltd C.C.

(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA8519T , GBB6051D

ON 29-Nov-17 15:20

ALONG

SLIP RD FROM DELTA RD TWDS GANGES AVE(CITY DIRECTION)

I / We

SIM KEH TECK DAVID

(Hirer) NRIC No.: S0076470A

and/or

GOH LAY LI LILLY

(Relief) NRIC No.: S0019490E

Taxi Number

SHA8519T

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

- 1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
- 2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
- 3. To sign Discharge Voucher on my/our behalf.
- 4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

30-Nov-2017

Name of Hirer

SIM KEH TECK DAVID

Hirer NRIC

S0076470A

Signature:

Address

24 SIMEI STREET 1 #01-16

529946

Contact No.

94894833

Name of Relief

GOH LAY LI LILLY

Relief NRIC

S0019490E

Signature:

Address

24 SIMEI STREET1 01-16

529946

Contact No.

91854222

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3066971701

Claim No : SNM17D06910/C02/1

Claimant : CITYCAB PTE LTD

Amount : \$\$1,380.00

Singapore Dollar One Thousand Three Hundred and Eighty only

I/We agree to accept the above mentioned amount to be paid to me/us in full &final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHA 8519T Insured Vehicle No. : GBB 6051D

Date of Loss

: 29/11/2017

Place of Accident : SLIP RD FROM DELTA RD TWDS GANGES AVE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

: YONG WEN FOOD (S) PTE LTD

Driver Name

: HAO YUE

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Global Sum SS 1,380.00 TOTAL 1,380.00 ============ CLAIMS DEPARTMENT COMFORTDELGRO ENGINEERING PTE LTD

59 LOYANG DRIVE Claimant Name: _ NRIC No : SINGAPORE 508969

Date

*The contents of this document apply to vehicle damages only All personal injuries and damages arising therefrom are excluded from the ambit and application of this document"

Please forward your cheque made payable to. COMPORTDELGRO ENGINEERING PTE LTD

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9765

Workshops

COMPANY REG. NO.: 199506048W Page: 1

8010012

CHINA TAIPING INSURANCE CO(S) PTE I. SPRINGLEAF TOWER

ANSON ROAD #16-00 SINGAPORE SG 079909

CONTACT NO: 62222366

Description: 3P 29.11.17

VEHCLE NO SHA851911

INV. NO/DATE 91344598 05.12.2017

MAKE HYUNDAT

JOB NO 305093597

MODEL. T - 40

ODOMETER READING

DATE OF REG 26.11.2015

DATE/TIME IN 30.11.2017 10:44

CHASSIS CODE

KMHLB41.UMGU080681

S/No Part No.

Qty Unit Price 8Disc

Net.

PART REQUISITION

0001 04-01-0103-0579 140VC COVER ASSY-RR BUMPE 0002 04-01-01.01-01.1.1 HYUNDAI BUMPER COVER CLIP

603.60 20.00 2.20 20.00 482.88 17,60

0003 04-01-0103-1150 140VC PROTECTOR MAT

1 50,00

50.00

SUB-TOTAL

1

1.0

550.48

JOB NATURE

0001 L PANEL BEATING

200,00

200.00

0.00

0002 Ţ, SPRAY PAINTING CHARGE

180.00

1.80,00

0003 T, REMOVE/REFIX REVERSE SENSOR

20.00

20.00

SUB-TOTAL

400,00

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. **AMOUNT** BANK/CHQ No. 8010012 91344598 1,017.01

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6363 6280 Facsimile + 65 6280 9755

Workshops

COMPANY REG. NO.: 199506048W

Page: 2

801.001.2

CHINA TAIPING INSURANCE CO(S) PTE I, SPRINGLEAF TOWER

3 ANSON ROAD #16-00 SINGAPORE SG 079909

CONTACT NO: 62222366

VEHCLE NO SHA8519T

INV. NO/DATE 91344598 05.12.2017

MAKE HYUNDAT

JOB NO 305093597

MODET. I - 40

ODOMETER READING

DATE OF REG 26.11.2015

DATE/TIME IN 30.11.2017 10:44

CHASSIS CODE KMHLB41UMGU080681

Items total

950,48

Add GST @

7,000 %

66.53

Invoice amount

1,017.01

Issued by

: KATHERINETAN 05.12.2017 09:00:16

Repair type : CFSO/57/57 Payment Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91344598	1,017.01	

Our Ref: CC17111020

Date: 05 December 2017



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

29/11/2017 @ 15:20 hrs

ALONG

SLIP RD FROM DELTA RD TWDS GANGES AVE(CITY

DIRECTION)

INVOLVING

GBB6051D

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 SHA8519T (the "Taxi"). The Taxi was hired to SIM KEH TECK DAVID IC NO S0076470A a registered hirer-operator of CityCab Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$129.28 per day (inclusive of GST).

Please be advised that the Taxi was insured with First Capital Insurance 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

Christine Tay Executive, Fleet Safety

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

		NAIVIE	5							
	DATE	7180						ť		
	HOURS OPERATED (TIME)	FROM TO	-	7.60 8.40	1044	1200				
	MILEAGE TRAVELLED	KM)	339	2.83	2/8	227				
	MILEAGE READING	381209	× × × × × × × × × × × × × × × × × × ×	361831	The state of the s					
TO JAKE OF	NAME OF DRIVER	Tues	27	Arose louter						
	DATE) +1 =	29/11 CWPC	30/11/17	P1/2/19					

ME OF DRIVER

Enquire Vehicle Insurer

Vehicle No. Incident Date/Time

Search Status

Insurance

Company Code

Insurance Company Name

29 Nov 2017 / GBB6051D

15:20:00

Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous