

INS. CASE OWNER: JOEL CC 3/CT1170 23280 1 KIHaz

LKK:
IDAC:

Surveyor: KALVIN **ASSIGNMENT** Date / Time: 06/12/17
Registered in Meritmen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SJD 9915M Claim No. : CNM17D06948C02/5
Name of Insured : KOO PEK TEONG Policy No. : DMPCSN3016711701
Insured Tel No. : _____ HP: 9227 3826 Make / Model : TOYOTA VIOS J AUTO
Excess Sec II :SS _____ D.O.A : 05/12/17 Place of Accident : BEFORE JUNG SAM LEONG RD
Is driver the owner? YES / NO) Nature of Accident : & KERDUN RD
If NO, Driver Name / Age : _____ OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Driver Tel No. : _____ (V/L) YES / NO Insured Liability : % Final ? Yes / No

SHA 8106B



INSRS: _____
WSP: COGE (Layang)
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____

RECEIVED 03 JAN 2018

Date/Time	STAGE	DATE / PIC
	Non-Reporting Itr (1st):	
	Non-Reporting Itr (2nd):	
	Non-Reporting Itr (Final):	
	Notification Itr (if non-pickup):	
<u>22/12/17 (vic)</u>	Call OI:	<u>24/12/17 - vic</u>
	After call Itr to OI:	
	Documentation Check List:	Handler Typist
	Notification Itr (if non-pickup)	<input type="checkbox"/>
<u>24/12/17 @ 11:55AM</u>	After call Itr to OI:	<input checked="" type="checkbox"/>
	Authorisation To Act:	<input checked="" type="checkbox"/>
<u>@ 12:30PM</u>	Release Voucher:	<input checked="" type="checkbox"/>
	Final Repair Bill:	<input checked="" type="checkbox"/>
	Car Rental Invoice:	<input checked="" type="checkbox"/>
	Towing Invoice:	<input type="checkbox"/>
	LTA / GIA:	<input checked="" type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
<u>27/12/17 @ 10:11A</u>	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD:	<input checked="" type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others: TP <u>PHONE PHOTOS</u>	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: <u>07/12/17</u> Sent By: <u>Shirley Hwee</u>		
FINALIZATION Date/Time: _____ Confirm with: _____		
Repair Cost: <u>P/P</u> SS <u>1,055.20</u> (2 days) Reduction: <u>54</u> % Email <input type="checkbox"/> Call <input type="checkbox"/>		
FINAL SETTLEMENT Date/Time: <u>27/12/17</u> Confirm with: <u>WILLIAM</u> Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>		
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>131</u>		
Repair Cost: <u>COG (VIC)</u> SS <u>1,129.06</u>		
Loss of Rental (LOR): SS <u>812.50</u> (2.5 days) x <u>125.00</u>		
Loss of Use (LOU): SS <u>125.00</u> (550 x 2.5 days)		
Loss of Income (LOI): SS <u>—</u> (\$ x days)		
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input checked="" type="checkbox"/> [Tick only one]		
GIA/LTA Search SS <u>5.33</u>		
Medical: SS <u>—</u>		
Disbursement: SS <u>—</u> (e.g. Tow/Independent)		
Legal Cost SS <u>—</u>		
Total: SS <u>1,571.91</u> Global Sum SS: <u>1,570.00</u>		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
Payee 1: SS <u>1,570.00</u> Name 1: <u>COMPUTERLOGO ENGINEERING PTE LTD</u>		
Payee 2: (Strike if N.A.) SS <u>—</u> Name 2: <u>—</u>		
Payee 3: (Strike if N.A.) SS <u>—</u> Name 3: <u>—</u>		

COG
27/12/17

1) Claim status: Normal/Reject/Private Settle
2) Report Format:
3) Survey fee: \$ 450.00



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CC3/CTI17023280/K1ha3	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERSINGAPORE 079909		Date : 07-12-2017	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJD 5915M	Veh. Inspected	SHA 8106B
Policy No.	DMPCSN3016711701	Coverage (\$)	0.00
Claim No.	SNM17D06948C02/5	Excess (\$)	0.00
Assign From		Assign Date	07/12/2017
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	05/12/2017	Inspection Date	06/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

A member of COMFORTDELGRO

Date/Time: 05.12.2017 17:46 Page : 1

Team: ARC Repair TP(CFS0)1

JOB CARD Sales Order:

JC NO.305095093

CUSTOMER CITYCAB PTE LTD VMS NO. 7010070 CUSTOMER NO. 383 SIN MING DRIVE ADDRESS Singapore SINGAPORE 575717 65551188 (R) (P) (O)	REGN NO. SHA8106B	MILEAGE
	MAKE HYUNDAI	FUEL E. 1/2 F.
	MODEL I-40	DATE/TIME IN 05.12.2017 14:55
	YR OF MANU. 12.05.2016	TARGET DATE
	CHASSIS CODE KMHLB41UMGU087452	COMPLETION DATE/TIME

ACCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 05.12.2017
 NATURE: 3P 05.12.2017

S/N	LABOR CODE	DESCRIPTION
		CHINA - taxi left front damage
		LKK/Kahni -

CHECKED & PASSED OUT BY: _____

 SERVICE ADVISOR CUSTOMER'S SIGNATURE

Exit Pass
 Vehicle No.: SHA8106B
 Signature/Date
 returned to Service Reception upon collection

Exit Pass
 Vehicle No.: SHA8106B
 Name of Service Advisor
 Date
 To be kept by Security Guard

Larry Ng

NO : SHA 8106B

CHINA
DATE 6/12/2017 10:06

MODEL : HYUNDAI i40

POA: 05.12.17

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover X repair			\$ 1,052.20
	Front Bumper Bracket (LH) X 1			\$ 24.60
	Front Fender (LH) — Paint			\$ 619.00
	SUB TOTAL			\$ 1,695.80
	LESS 20%			\$ 339.16
	DISCOUNTED TOTAL			\$ 1,356.64
	Labour Charge			200
	Panel Beating			\$ 560.00
	Spray Painting Charge			\$ 400.00 760
	TOTAL LABOUR			\$ 960.00
	ESTIMATE TOTAL			\$ 2,316.64

Kalvin 16/6/17
6/12/17 1415 hrs
2 days
PIP
Before Paint photo

Larry Ng

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305095093

Date : 17.12.2017

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508669
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA8106B

Date of Accident: 05/12/17

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: CHINA SJD5915M
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$495.20
(b) Labour Charges	\$560.00
Total for Part-By-Part Repair Cost	\$1,055.20
(c.) Lumpsum Repair (if applicable)	_____
Total for Lumpsum repair cost after Less:	_____
Final Lumpsum Repair cost	_____

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : K. A. M.

Date : 18/12/17

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees				
4. LTA Search Fee	\$5.35			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD

Date: 16.12.2017

REPAIR ESTIMATE

Time: 15:16:31

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305095093
REGN NO : SHA8106B
MILEAGE : 000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 12.05.2016
DATE/TIME IN : 05.12.2017 14:55
ACCIDENT DATE : 05.12.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0574-G I40VC PANEL-FENDER LH# 1 619.00 20.00 495.20

SUB-TOTAL : 495.20

JOB NATURE

0000 L PANEL BEATING 200.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 360.00

SUB-TOTAL : 560.00

TOTAL : 1,055.20

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

CITY CAB PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 8106B

MAKE :

MODEL : HYUNDAI i40

CHINA

DATE 6/12/2017 10:06

DOT: 05.12.17

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>X repair</i>			\$ 1,052.20
	Front Bumper Bracket (LH) ?			\$ 24.60
	Front Fender (LH) /			\$ 619.00
	SUB TOTAL			\$ 1,695.80
	LESS 20%			\$ 339.16
	DISCOUNTED TOTAL			\$ 1,356.64
	Labour Charge			<i>200</i>
	Panel Beating			\$ 560.00
	Spray Painting Charge			\$ 400.00 <i>260</i>
	TOTAL LABOUR			\$ 960.00
	ESTIMATE TOTAL			\$ 2,316.64
	<p><i>Kalua 16/11/17</i></p> <p><i>6/12/17 1415 hrs</i></p> <p><i>2 days</i></p> <p><i>PIP</i></p> <p><i>Before Paint photo</i></p>			
	<p><i>Larry Ng</i></p>			
	<p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • To resurvey before after spray painting • To display damaged parts during resurvey • Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis • No illegal modifications is allowed • Supplementary needs must be surveyed and is subject to final approval from insurance Company <p>Acknowledged by Repairer Signature:</p>			
	<p>This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.</p>			



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: TBA
Our ref: CC3/CTI17023280/K1ha3

Date: 07.12.2017

The Motor Claim: Department
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHA 8106B

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 06.12.2017 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

Workshop Estimate Amount	: S\$	<u>2,316.64</u>
Revised Estimate Amount	: S\$	<u>1,055.20</u>
"Check" Items Amount	: S\$	<u>19.68</u>
Market Value	: S\$	<u>-</u>
LTA Reimbursement Value	: S\$	<u>-</u>
Nett Value	: S\$	<u>-</u>

Description of Damage:
The vehicle sustained damages at the
N/S Front Portion



Comments/Present Status:
Damages Consistent
Estimated normal period for repairs: 2.0 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

619.00	1052.20	200.00	360.00
	24.60	360.00	40.00

0.00

0.00 0.00

560.00

400.00

619.00 1076.80

1695.80	960.00	0.00
619.00	560.00	0.00
1076.80	400.00	0.00

619.00
123.80
495.20
560.00

1055.20

24.60
0.00
0.00
0.00
0.00

}

CHECK ITEMS

24.60
4.92
19.68

Vic (LKKAuto)

From: Vic (LKKAuto)
Sent: Wednesday, 27 December, 2017 2:35 PM
To: William Tan Thoo Seng
Cc: Catherine Koh Mui Gek; Admin A; Vic (LKKAuto)
Subject: Your Ref: CC17120199/SHA8106B/WT(st)_ACCIDENT INVOLVING VEHICLES SJD 5915M AND SHA 8106B ON 05/12/2017
Attachments: DV.pdf

Your Ref: CC17120199/SHA8106B/WT(st)
Our Ref: CC3/CTI17023280/K1ha3

Without Prejudice

Dear William,

ACCIDENT INVOLVING VEHICLES SJD 5915M AND SHA 8106B ON 05/12/2017

We refer to the above matter and to your Letter of Demand dated 21/12/17.

Purely for an amicable settlement on a without prejudice basis and without admission of liability to our Insured's part, we offer a global sum of **\$1,570.00** (all in) to settle your client's claim.

If agreeable, kindly sign the attached DV and forward the original copy to us for payment processing.

Thank you.

"Wishes you a Merry Christmas & Happy New Year 2018"

"Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis, and should not be construed as an admission of liability on our part or on the part of our Insured Driver. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. Our offer made in respect of this present matter is made solely to resolve this matter only. No reference shall be made to this offer or any settlement arising from this offer in any other related matters."

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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COMFORTDELGRO ENGINEERING

Our Ref : CC17120199 / SHA8106E/WT(st)
 Your Ref : _____
 Date : 21-Dec-17

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

CDGE Taxi Claims Dept
 59 Loyang Drive 4th Flr
 Singapore 508969

Mainline +65 6383 6280
 Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198806497R

CHINA INSURANCE CO LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA8106B YOUR INSURED SJD5915M
 AND OTHER _____ ON 05.12.17**

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No : SHA8106B which was involved in the captioned accident with your insured vehicle.

The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving : SJD5915M we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair		\$	1,129.06
2	<u>3</u> days Loss of Rental @	\$ 125.00	per day	\$ 375.00
3	Survey Report Fees	(Surveyed by M/s LKK)	\$	-
4	LTA Search Fees		\$	5.35
5	GIA / Police Report Fees		\$	-
6	Towing / Medical / Transportation Fees		\$	-
			Sub Total :	\$ 1,509.41

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @	\$ 80.00	per days	\$ 240.00
			Total Claims :	\$ 1,749.41

We enclosed herewith the following documents to support the claims: -

- a) Original repair bill and photostat photographs : 7 pcs.
- b) LTA search slip/s of : SJD5915M
- c) GIA / Police report/s of : SHA8106B
- d) Letter of authority from owner / hirer / operator
 - (X) Photocopies of Accident Scene Photos () Certificate of Insurance
 - () Witness statement/s (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully
William Tan

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.

Workshops

Braddell
 205 Braddell Road
 Singapore 579701

Loyang
 59 Loyang Drive
 Singapore 508969

Sin Ming
 383 Sin Ming Drive
 Singapore 575717

Pandan
 45 Pandan Road
 Singapore 609286

Ubi
 320 Ubi Road 3
 Singapore 408649

Senoko
 24 Senoko Loop
 Singapore 758156

Sungei Kadut
 7 Sungei Kadut Way
 Singapore 728791

Yishun
 501 Yishun Industrial Park A
 Singapore 768732

A member of

COMFORTDELGRO





Auto
Consultants
Pte Ltd

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

Our Ref: CC3/CTI17023280/K1ha3

27 DECEMBER 2017

KOO PEK TEONG
BLOCK 17 JOO SENG ROAD
#10-143
SINGAPORE 360017

Dear Sir/Madam,

ACCIDENT INVOLVING SJD 5915M AND SHA 8106B ON 05/12/2017

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.

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,



Vic Alpeh
DID: 6841 2096
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd*
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING I 40 SHAS106B , SJD5915M **ON 05-Dec-17 14:05**
ALONG SIDE RD FROM VERDUN RD X SAM LEONG RD

I / We **NG CHEE WENG (WU ZH...** (Hirer) NRIC No.: **S7917242A**

and/or (Relief) NRIC No.:

Taxi Number **SHAS106B**

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 **05-Dec-2017**

Name of Hirer: **NG CHEE WENG (WU ZHIRONG)**
Hirer NRIC **S7917242A** Signature :

Address **908 JURONG WEST STREET 91 #06-...
640908**

Contact No. **81837712**

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
 Page: 1

8010012

CHINA TAIPING INSURANCE CO(S) PTK 1,
 SPRINGLEAF TOWER

3 ANSON ROAD #16-00
 SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
 SH8106R

MAKE
 HYUNDAI

MODEL
 I-40

DATE OF REG
 12.05.2016

CHASSIS CODE
 KMHLB41UMGU087452

INV. NO/DATE
 91347161 20.12.2017

JOB NO.
 305095093

DIKOMPKR KAKADING

DATE/TIME IN
 05.12.2017 14:55

Description : 3P 05.12.2017

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0574	140VC PANKI-PKNDKR LH#	1	619.00	20.00	495.20
			SUB-TOTAL	:		495.20
JOB NATURE						
0001	1.	PANKI HEATING		200.00		200.00
0002	23-502	SPRAYPAINT ON APPLICED AREA		360.00		360.00
			SUB-TOTAL	:		560.00

ComfortDelGro Engineering Pte Ltd
 member of COMFORTDELGRO

Head Office:
 Braddell Road
 Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91347161	1,129.06	

TAX INVOICE

COMPANY REG. NO.: 199506048K
Page: 2

8010012

CHINA TAIPING INSURANCE CO(S) PTE L,
SPRINGFIELD TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA8106H

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
12.05.2016

CHASSIS CODE
KMH1H41UMGU087452

INV. NO/DATE
91347161 20.12.2017

JOB NO.
305095093

ODOMETER READING

DATE/TIME IN
05.12.2017 14:55

Items total		1,055.20
Add GST @	7.000 %	73.86
Invoice amount		1,129.06

Issued by : KATHERINETAN 20.12.2017 10:45:11
Repair type : CFSO/57/57
Payment type/term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd
Member of COMFORTDELGRO

Office:
3 Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHO No.
8010012	91347161	1,129.06	

Our Ref: CC17120199



Date: 19 December 2017

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 05/12/2017 @ 14:05 hrs
ALONG SIDE RD FROM VERDUN RD X SAM LEONG RD
INVOLVING SJD5915M

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 **SHA8106B** (the "Taxi"). The Taxi was hired to **NG CHEE WENG (WU ZHIRONG) IC NO S7917242A** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.00** 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.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJD5915M	05 Dec 2017 / 14:05:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous OK

SHA8106B



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3581 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

CHINA TAIPING INSURANCE (S) PTE LTD Ref : CC3/CTI17023280/K1ha3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Date : 10-01-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJD 5915M	Veh. Inspected	SHA 8106B
Policy No.	DMPCSN3016711701	Coverage (\$)	0.00
Claim No.	SNM17D06948C02/5	Excess (\$)	0.00
Assign From		Assign Date	06/12/2017

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU087452	Colour	YELLOW
Odometer	130863	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	TRIANGLE	7 mm
L/H Front Tyre	205/60 R16	TRIANGLE	7 mm
R/H Rear Tyre	205/60 R16	TRIANGLE	7 mm
L/H Rear Tyre	205/60 R16	TRIANGLE	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	05/12/2017	Inspection Date	06/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 8106B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER COVER	TO REPAIR SEE LABOUR	1,052.20	-
1	FRONT BUMPER BRACKET (LH)	SERVICEABLE	24.60	-
1	FRONT FENDER (LH)	DENTED	619.00	619.00
	LESS 20% DISCOUNT		-339.16	-123.80
			1,356.64	495.20
	LABOUR			
	PANEL BEATING .INCLUSIVE OF THE REPAIR OF FRONT BUMPER COVER .		560.00	200.00
	SPRAY PAINTING CHARGE .		400.00	360.00
			960.00	560.00
	GRAND TOTAL		2,316.64	1,055.20
RECOMMENDED COST OF REPAIRS				1,055.20

Report Ref No. CC3/CTI17023280/K1ha3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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