

INSURANCE CASE OWNER:

name: cc3, ct1800947, ktj34

LKK:
IDAC:

Surveyor:

Avk

DOI:

ASSIGNMENT

15/1/18

Date / Time:

15/1/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

YP 772

Claim No.:

SIM18D09280C02

Name of Insured:

PENG RONG FOOD ENTERPRISE

Policy No.:

DMCVSN3107401701

Insured Tel No.:

HP:

Make / Model:

HINO

Excess Sec II :SS

D.O.A: 12/01/2018

Place of Accident:

UPPER PICKERING RD

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

U RING

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No.:

90553158 (V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

SH 74414



INSRS:

WSP:

Tel:

Liability:

RMKS:

COMFORTDELGRO



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
19/1/18	SH 74414 - cc3/ct1800947/ktj34; BOLA 28/1/18	Non-Reporting ltr (1st):	
19/1/18	YP 772 *	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
19-1-18 @ 1135	OIC MR NG CONFIRMED DID CHANGED LANE, AGREED TO SETTLE. WILLING FOR PRIVATE SETTLEMENT.	Call Of:	330422-2-18
		After call ltr to OI:	
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	<input checked="" type="checkbox"/> <input type="checkbox"/>
		After call ltr to OI:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Authorisation To Act:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Release Voucher:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Final Repair Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Car Rental Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Towing Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		LTA / GIA:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Medical Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		PIR:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Mandate/Reject Instruction:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		LOD:	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
		Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
		Others:	<input type="checkbox"/> <input type="checkbox"/>

RECEIVED 2018

PRELIMINARY ADVICE	Date/Time:	Sent By:	
---------------------------	------------	----------	--

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
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Repair Cost:	SS	(days) Reduction:	%	Email <input type="checkbox"/> Call <input type="checkbox"/>
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FINAL SETTLEMENT	Date/Time: <u>22-2-18</u>	Confirm with: <u>WILLIAM</u>	Email <input type="checkbox"/> Call <input type="checkbox"/>
-------------------------	---------------------------	------------------------------	--

Final Liability:	% <u>100</u> (Agreed / Assessed)	BOLA S/N No.:	<u>15</u>
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Repair Cost:	SS <u>2,300.50</u>		
--------------	--------------------	--	--

Loss of Rental (LOR):	SS <u>343.75</u> (3.5 days) x <u>98.25</u>		
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Loss of Use (LOU):	SS <u>-</u> (5 days) x <u>50</u>		
--------------------	----------------------------------	--	--

Loss of Income (LOI):	SS <u>175.75</u> (5 days) x <u>35</u>		
-----------------------	---------------------------------------	--	--

LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR+LOU <input checked="" type="checkbox"/> LOR+LOI <input type="checkbox"/>	[Tick only one]		
--	-----------------	--	--

GIA/LTA Search	SS <u>7.49</u>		
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Medical:	SS <u>-</u>		
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Disbursement:	SS <u>-</u>	(e.g. Tow/ Independent)	
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Legal Cost	SS <u>-</u>		
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Total:	SS <u>2,826.87</u>	Global Sum SS:	<u>2,825.44</u>
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FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
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Payee 1:	SS <u>2,825.44</u>	Name 1:	<u>COMFORTDELGRO ENGINEERING PTE LTD</u>
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Payee 2: (Strike if N.A.)	SS <u>X</u>	Name 2:	<u>X</u>
---------------------------	-------------	---------	----------

Payee 3: (Strike if N.A.)	SS <u>X</u>	Name 3:	<u>X</u>
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COPY SENT 15/3/18

ASSIGNMENT

From _____ Date _____
 Estimated Cost _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No. _____
 at Workshop no. _____
 of _____
 Insured _____
 Policy No. _____
 Claims No. _____
 Sum Insured _____ Excess _____
 (Client's Record)
 Make of Veh. _____

Veh No. **SH 7441Y** Regn **14 Apr 2011**
 Type: M/Car / M/Cycle / Bus / Van / Lorry / T/O / Prime Mover /
 Truck / Trailer or _____
 Make **Hyundai Santa Fe** CC **1991**
 Colour **Blue** A.C. Insured Std / NI / NA
 Sp Reading **292424** T-Radio Insured Std / NI / NA
 Eng No. _____
 C.No. **KMHET4IVM DA 807219**
 Gen Cond **Good** / Fair / Poor / Burnt
 Steering Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / **ST6** A/Rim or _____
 Tyre Size: F: **215/60R16**
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Westlake**
 Front _____ Rear _____
 R/Bal **2** mm R/Bal **2** mm
 L/Bal **2** mm L/Bal **2** mm
 D.O.A. **12/1/8** D.O.I. **15/1/8**
 Survey held at **CAGE (107-3)**
 Des. of Damages **Frt** / Rear / O/S / N/S / U/C / Rooftop or
o/s Frnt.
 The U/C / Chassis frame / Body Structure affected due to collision

(Policy Condition)
 Remark: **The veh had commenced its repair at the time of inspection.**

/	
N/S	O/S

Bal. or Market Value _____
 IDAC Accident Report Consistent? Yes or No _____
 GIA / PR Seen Consistent? Yes or No _____
 Est. Repairs: **3** days Res. Yes or No _____
 Lum Sum % 3 Val. Yes or No _____
 CA / REV / REP. / 24 HRS _____
 Date _____ Person Contacted _____ Vehicle IN / OUT _____

Date / Time Action / Instruction

L/S \$2,150.++

CTI
42

R(\$967.88 / 317.)

Date/Time File Pass to: Preli. Report
 Final Report

Days Of Repair: _____
 Resurvey No. of Trip: _____

Survey Fee _____
 Transportation _____

Add Fee: Site Insp \$ _____
 Inter. Insp \$ _____
 Test. Insp \$ _____
 JTAG \$ _____

Report Format: _____
 Lump Sum / I.B.I.: _____



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/CTI18000947/K1ja3	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERSINGAPORE 079909		Date : 16-01-2018	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	YP 77Z	Veh. Inspected	SH 7441Y
Policy No.	DMCVSN3107401701	Coverage (\$)	0.00
Claim No.	SNM18D00280C02	Excess (\$)	0.00
Assign From		Assign Date	16/01/2018
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	12/01/2018	Inspection Date	15/01/2018
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.			



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/CTI18000947/K1ja3

Date: 17.01.2018

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

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SH 7441Y

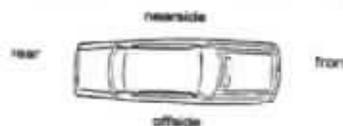
We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 15.01.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

Workshop Estimate Amount	: S\$	<u>3,117.88</u>
Revised Estimate Amount	: S\$	<u>2,661.72</u>
"Check" Items Amount	: S\$	<u>7.36</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
O/S Front portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 3.0 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

COMFORTDELGRO ENGINEERING

Our Job Ref No 305106647
Date : 20/01/18

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK Fax : _____
Attn : Mr KALVIN ANG
Vehicle Reg No. SH7441Y CTPL 12.01.18

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

- The repair job shall bill to: CHINA -- YP77Z
- The finalized amount shall be:
 - Spare Parts after List discount _____
 - Labour Charges _____
 - Total for Part-By-Part Repair Cost** _____
 - Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$2,150.00
Final Lumpsum Repair cost \$2,150.00

- Estimated normal period for repairs: 3 working days.
- We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
- Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : LIM KWOK ENG
Tel : 62148316
Fax : 65468156

Signature : 
Name : Kalvin
Date : 22/1/18

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. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

REPAIR ESTIMATE*

VEHICLE NO : SH 7441Y

DATE 15/1/2018 10:26

MAKE :

MODEL : HYUNDAI SONATA

LKK/kalvin

L/San

Like

CHINA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Fender (RH) — <i>Paint</i>			\$ 593.00
	Front Fender Shield (RH) × 5 th			\$ 86.00
	Front Fender Signal Lamp (RH) — <i>in</i>			\$ 45.40
	Front Fender Retainer × 2 nd			\$ 9.20
	Front Door (RH) — <i>Paint</i>			\$ 1,345.00
	<i>City Mirror (RH) × 1st</i>			
	SUB TOTAL			\$ 2,078.60
	LESS 20%			\$ 415.72
	DISCOUNTED TOTAL			\$ 1,662.88
	Front Fender Advertisement Logo (RH) — <i>nc</i>			\$ 100.00 Nett
	Front Door Comfort Logo (RH) — <i>nc</i>			\$ 75.00 Nett
				\$ 175.00
	Labour Charge			
	Panel Beating			\$ 560.00 ⁴⁰⁰
	Spray Painting Charge			\$ 500.00 ⁴¹⁰
	Wiring Charge			\$ 50.00 ²⁰
	Tuff Kote			\$ 50.00 ²⁰
	Transfer of Door			\$ 120.00 ⁵⁰
	TOTAL LABOUR			\$ 1,280.00
	ESTIMATE TOTAL			\$ 3,117.88

*Kalvin 10/1/18
 M 15/1/18 1110 hrs
 3 Days
 L/S
 After Repair photo*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party claims on a "Without Prejudice" basis
- No legal proceedings is allowed
- Supplemental claims must be resurveyed and is subject to approval from Insurance Company

Acknowledged by: _____

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 Pte Ltd

200, Serangoon Road, Singapore 556777
 Singapore 40, 4100 4000, Telephone +65 6339 9200
 Website: www.comfortdelgro.com.sg
 28 Leong Drive Singapore 670001 24 Serangoon Road Singapore 230101
 382 Sin Ming Drive Singapore 570477 7 Bunge Road, West Singapore 120701
 41 Pasir Ris Road Singapore 508490 9 Dala Avenue 1, Singapore 390007

Date/Time: 13:01:2018 13:25 Page : 1

A member of COMFORTDELGRO

Team: AE ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO: 305106647

CUSTOMER COMFORT TRANSPORTATION PTE LTD UIC NO: 7010045 ADDRESS: 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (P) (O)	REGN NO: SH 7441Y	MILEAGE
	MAKE: HYUNDAI	FUEL: E 1/2 F
	MODEL: SONATA	DATE/TIME IN: 13.01.2018 08:25
	YR OF MANU: 14.04.2011	TARGET DATE
	CHASSIS CODE: KMHET41VMBA807319	COMPLETION DATE/TIME

CHINA

JOB DESCRIPTION

Accident Date: 12.01.2018
 NATURE: 3P 12.01.2018

S/NO	LABOR CODE	DESCRIPTION
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~~HTIC~~

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SH 7441Y LIM KE

Vehicle No.: SH 7441Y

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

VEHICLE NO : SH 7441Y

DATE 15/1/2018 10:26

MAKE :

Likee

CHINA

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Fender (RH) ✓			\$ 593.00
	Front Fender Shield (RH) ✗			\$ 86.00
	Front Fender Signal Lamp (RH) ✓			\$ 45.40
	Front Fender Retainer ✓			\$ 9.20
	Front Door (RH) ✓			\$ 1,345.00
	<i>Right Mirror (RH) ✗</i>			
	SUB TOTAL			\$ 2,078.60
	LESS 20%			\$ 415.72
	DISCOUNTED TOTAL			\$ 1,662.88
	Front Fender Advertisement Logo (RH) ✓			\$ 100.00 Nett
	Front Door Comfort Logo (RH) ✓			\$ 75.00 Nett
				\$ 175.00
	Labour Charge			
	Panel Beating			\$ 560.00 ⁴⁰⁰
	Spray Painting Charge			\$ 500.00 ⁴¹⁰
	Wiring Charge			\$ 50.00 ²⁰
	Tuff Kote			\$ 50.00 ²⁰
	Transfer of Door			\$ 120.00 ⁵⁰
	TOTAL LABOUR			\$ 1,280.00
	ESTIMATE TOTAL			\$ 3,117.88

*Kahe 16/1/18
 15/1/18 11:10 hr
 3 hrs
 4/5
 After Repair photo*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to inspection
- Third party survey is on a "No Fault" basis
- No illegal modifications/alterations
- Supplementary details 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.

Mei Kwan (LKKAuto)

From: Lucas Lee <lucas.lee@sg.cntaiping.com>
Sent: Wednesday, 17 January, 2018 4:34 PM
To: Mei Kwan (LKKAuto)
Cc: Irene Tay
Subject: (TP : LKK REF - CC6/CTI18000947/K1ja3) (OurRef: SNM18D00280C02)
Attachments: leeSZ_SNM18D00280C02-YP77Z-LKKDirectSettlementAccidentLtr_CLCR95.855.pdf; MCCA18007626-YP77Z.pdf

Follow Up Flag: Follow up
Due By: Tuesday, 23 January, 2018 4:00 PM
Flag Status: Completed

Categories: HMK

Dear Sirs,

Kindly refer to the above attachment.

Case Handler : Irene Tay

Regards,

Lucas Lee
Claims Department (Motor)
China Taiping Insurance (Singapore) Pte. Ltd.
3, Anson Road, #16-00
Springleaf Tower,
Singapore 079909
Co. Reg. No. 200208384E
DID: 6389 6181
Fax: 6224 7175
Email: claimsdept@sg.cntaiping.com
Email: lucas.lee@sg.cntaiping.com
Website: www.sg.cntaiping.com

Regards,

Lucas Lee
Claims Department (Motor)
China Taiping Insurance (Singapore) Pte. Ltd.
3, Anson Road, #16-00
Springleaf Tower,
Singapore 079909
Co. Reg. No. 200208384E
DID: 6389 6181
Fax: 6224 7175
Email: claimsdept@sg.cntaiping.com
Email: lucas.lee@sg.cntaiping.com
Website: www.sg.cntaiping.com

Our Reference: **SNM18D00280/C02/1**

Date : **17 JANUARY 2018**

via Ordinary & Registered Mail

**FENG RONG FOOD ENTERPRISE
3017 BEDOK NORTH STREET 5
#03-05 GOURMET EAST KITCHEN
SINGAPORE 486121**

Dear Sir / Madam

**ACCIDENT INVOLVING YPTTZ AND SH7441Y ON 12 JANUARY 2018
ALONG UPP PICKERING ROAD**

We refer to the abovementioned accident.

Please be advised that the third party vehicle, **SH7441Y**, is filing a third party property claim against your vehicle.

We have appointed **LKK Auto Consultants Pte Ltd**, to administer the said claim on our behalf and they will contact you for more information about the accident.

Kindly render your assistance and co-operation accordingly.

Yours truly,
Claims Department

(This is a computer generated letter and no signature is required.)

CC : LKK Auto Consultants Pte Ltd
Attn : JOY
Ref : CC3/CT118000947/K1ja3
Contact No : 67495792
via Email : JOY@LKKAUTO.COM

CC : Agent - (AN0478A) - INSURE HUB PTE LTD

Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Friday, 2 February 2018 2:15 PM
To: 'jas_on88@hotmail.com'
Cc: Admin A; CS A Team
Subject: ACCIDENT INVOLVING YP 77Z AND SH 7441Y ON 12/01/2018

Our reference: CC3/CTI18000947/K1ja3

FENG RONG FOOD ENTERPRISE
Policy Holder

Dear Sir,

We refer to the above subject and to our e-mail dated 19/01/2018.

We received third-party claimant's letter of demand, breakdown of the third-party claim and our adjusted cost is as follows:

	CLAIMED COST	ADJUSTED COST
Cost of Repairs + GST	\$ 3,336.13	\$ 2,300.50
Loss of Rental (\$98.25 per day)	\$ 393.00 (4 days)	\$ 393.00 (4 days)
Loss of Income (\$80 per day)	\$ 320.00 (4 days)	\$ 200.00 (4 days)
LTA Search Fee	\$ 7.49	\$ 7.49
TOTAL	\$ 4,056.62	\$ 2,900.99

If you would like to proceed with private settlement, two (2) separate cheques should be issued:

- 1) \$ 2,900.99 - Payable to M/s COMFORTDELGRO ENGINEERING PTE LTD; and
- 2) \$ 428.00 - Payable to M/s LKK Auto Consultants Pte Ltd - (Surveyor's Fee)

Kindly send the cheques to:

Joy Irene (Ref: CC3/CTI1800047/K1ja3)
M/s LKK AUTO CONSULTANTS PTE LTD
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1 #02-25
Singapore 408933

Kindly inform us of your decision if you are to proceed with private settlement within 10 days from this letter (by 14/02/2018) otherwise, we shall proceed with the settlement under your auto insurance policy. Please note that your No Claim Discount (if any) will be affected due to this accident/claim.

Please call us should you need to further clarification.

Thank you.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6749-5792 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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From: Joy Irene (LKKAuto)
Sent: Friday, 19 January 2018 11:47 AM
To: jas_on88@hotmail.com
Cc: Admin A <admin-a@lkkauto.com>
Subject: ACCIDENT INVOLVING YP 77Z AND SH 7441Y ON 12/01/2018

Our reference: CC3/CTI18000947/K1ja3

FENG RONG FOOD ENTERPRISE
Policy Holder

Dear Sir,

ACCIDENT INVOLVING YP 77Z AND SH 7441Y ON 12/01/2018

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 understand that you are considering for private settlement with the third-party claimant, please wait as we finalised the claim cost and we will give you an update for your decision.

Please call us if you have further queries.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6749-5792 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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COMFORTDELGRO ENGINEERING

Our Ref : T 0118 / SH 7441Y /WT(st)
 Your Ref : _____
 Date : 26-Jan-18

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

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

Mainline +65 6383 6280
 Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198508048W

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 SH 7441Y YOUR INSURED YP 77Z
 AND OTHER _____ ON 12.01.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 7441Y 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 YP 77Z we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	2,300.50
2	<u>4</u> days Loss of Rental @ \$ <u>98.25</u> per day	\$	393.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$	-
4	LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transportation Fees	\$	-
Sub Total :		\$	2,700.99

HIRER'S CLAIM

7	<u>4</u> days Loss of Income @ \$ <u>80.00</u> per days	\$	320.00
Total Claims :		\$	3,020.99

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

- a) Original repair bill and photostat photographs : 6 pcs.
- b) LTA search slip/s of : YP 77Z
- c) GIA / Police report/s of : SH 7441Y
- d) Letter of authority from owner / hirer / operator
 - () Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
 - () Photograph/s of Accident Scene (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 '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.



- 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**
Shun Industrial Park A
Singapore 768732

Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Friday, 19 January 2018 11:47 AM
To: 'jas_on88@hotmail.com'
Cc: Admin A
Subject: ACCIDENT INVOLVING YP 77Z AND SH 7441Y ON 12/01/2018

Our reference: CC3/CTI18000947/K1ja3

FENG RONG FOOD ENTERPRISE
Policy Holder

Dear Sir,

ACCIDENT INVOLVING YP 77Z AND SH 7441Y ON 12/01/2018

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 understand that you are considering for private settlement with the third-party claimant, please wait as we finalised the claim cost and we will give you an update for your decision.

Please call us if you have further queries.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6749-5792 | email: joyirene@lkkauto.com | Fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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LETTER OF AUTHORISATION

(NAF / PAF)

ON 12-Jan-18 23:30

**ACCIDENT INVOLVING
ALONG**

**SONATA SH7441Y ,
UPP PICKERING ST TWDS MCE X JUNCTION SOUTH BRIDGE RD.**

I / We **CHOO SOONG HENG** (Hirer) NRIC No.: **S6920956D**
and/or **CHOO SOONG HENG** (Relief) NRIC No.: **S6920956D**

Taxi Number **SH7441Y**
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 **13-Jan-2018**

Name of Hirer **CHOO SOONG HENG**
Hirer NRIC **S6920956D**

Signature :



Address **241 TAMPINES STREET 21 #04-429
520241**

Contact No. **83548069**

Name of Relief **CHOO SOONG HENG**
Relief NRIC **S6920956D**

Signature :

Address **241 TAMPINES STREET 21 #04-429
520241**

Contact No. **83548069**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3107401701
Claimant : COMFORT TRANSPORTATION PTE LTD

Claim No : SNM18D00280C02/1

Amount : S\$2,825.00
SINGAPORE DOLLARS TWO THOUSAND AND EIGHT HUNDRED TWENTY FIVE 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. : SH 7441Y
Insured Vehicle No. : YP 77Z

Date of Loss : 12/01/2018
Place of Accident : UPPER PICKERING STREET

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

Insured Name : FENG RONG FOOD ENTERPRISE
Driver Name : LI QING

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.

(1) Global Sum	S\$	2,825.00
		=====
TOTAL	S\$	2,825.00
		=====

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
58 LOYANG DRIVE
SINGAPORE 508688

Claimant Name : _____ NRIC No : _____

Signature :  Date : 26.02.18

All 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:
COMFORTDELGRO ENGINEERING PTE LTD

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
 SPRINGLEAF TOWER

3 ANSON ROAD #16-00
 SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
 SH 7441Y

MAKE
 HYUNDAI

MODEL
 SONATA

DATE OF REG
 14.04.2011

CHASSIS CODE
 KMHE41VMBAB07319

INV. NO/DATE
 91353325 24.01.2018

JOB NO.
 305106647

ODOMETER READING

JOB TYPE

Description : 3P 12.01.2018

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,150.00
Add GST @ 7.000 %		150.50
Total Invoice amount		2,300.50

Issued by : CHEWBEELENG 24.01.2018 15:07:36
 Repair Type : CLSO/57/57
 Payment Type/Term : /Credit 30 days

ComfortDelGro Engineering Pte Ltd
 member of COMFORTDELGRO

Head Office:
 Braddell Road
 Singapore 579701

Please note that no receipt shall be issued unless requested.

PATRON'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

Our Ref: CT18010362

Date: 24 January 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON
ALONG

INVOLVING

12/01/2018 @ 23:30 hrs
UPP PICKERING ST TWDS MCE X SOUTH BRIDGE
RD.
YP77Z

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SH7441Y** (the "Taxi"). The Taxi was hired to **CHOO SOONG HENG IC NO S6920956D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$98.25** per day (inclusive of GST).

Please be advised that the Taxi was insured with **India International Insurance 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

Christine Tay
Executive, Fleet Safety

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MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO							FROM	TO
171	1945	0530	8/11/18	CHN	2902	33	263	1710	1720	
240	0605	1725	9/11/18	CHN	2905	04	271	1920	0535	
204	1945	0525	9/11/18	CHN	2907	62	258	0705	1725	
165	0620	1705	9/11/18	CHN	2910	46	284	1940	0530	
183	2015	0570	10/11/18	CHN	2912	91	244	0625	1730	
160	0630	1715	10/11/18	CHN	2914	62	171	2030	0515	
243	1935	0545	11/11/18	CHN	2916	67	207	0625	1730	
244	0705	1745	11/11/18	CHN	2918	38	169	1950	0515	
208	1910	0520	12/11/18	CHN	2920	23	184	0600	1745	
107	0615	1700	12/11/18	CHN	2924	24	401	1850	0830	
209	1910	0545								

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO
171	1945	0530
240	0605	1725
204	1945	0525
165	0620	1705
183	2015	0570
160	0630	1715
243	1935	0545
244	0705	1745
208	1910	0520
107	0615	1700
209	1910	0545

Enquire Vehicle Insurer

Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name

YP77Z 12 Jan 2018 / 23:30:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SH 74414



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: 199607196R GST Reg. No. 19-9607196-R

Affiliated to Federation Internationale Des Experts En Automobile

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI18000947/K1ja3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Date : 07-03-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 77Z	Veh. Inspected	SH 7441Y
Policy No.	DMCVSN3107401701	Coverage (\$)	0.00
Claim No.	SNM18D00280C02/1	Excess (\$)	0.00
Assign From		Assign Date	15/01/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA807319	Colour	BLUE
Odometer	292424	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	215/60 R16	WEST LAKE	7 mm

4. Description of Damages

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

5. General Information

Accident Date	12/01/2018	Inspection Date	15/01/2018
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:	3 Working Days
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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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7441Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT FENDER (RH)	DENTED	593.00	593.00
1	FRONT FENDER SHIELD (RH)	SERVICEABLE	86.00	-
1	FRONT FENDER SIGNAL LAMP (RH)	CRACKED	45.40	45.40
1	FRONT FENDER RETAINER	SERVICEABLE	9.20	-
1	FRONT DOOR (RH)	DENTED	1,345.00	1,345.00
1	WING MIRROR (RH) (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-415.72	-396.68
			1,662.88	1,586.72
SPECIAL NETT ITEMS				
1	FRONT FENDER ADVERTISEMENT LOGO (RH) (SN)	NECESSARY	100.00	100.00
1	FRONT DOOR COMFORT LOGO (RH) (SN)	NECESSARY	75.00	75.00
			175.00	175.00
LABOUR				
	PANEL BEATING .INCLUSIVE OF THE REPAIR OF WING MIRROR (RH) .		560.00	400.00
	SPRAY PAINTING CHARGE .		500.00	410.00
	WIRING CHARGE .		50.00	20.00
	TUFF KOTE.		50.00	20.00
	TRANSFER OF DOOR .		120.00	50.00
			1,280.00	900.00
GRAND TOTAL			3,117.88	2,661.72
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,150.00

Report Ref No. CC3/CT118000947/K1ja3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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