

# COMFORTDELGRO ENGINEERING

Our Ref : T 0118/SH 6693T /WT(st)  
 Your Ref :  
 Date : 29-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. 199506048W

**AXA Insurance Pte Ltd**  
**8 Shenton Way**  
**#24-01, AXA Tower**  
**Singapore 068811**

**Attn : Motor Claims Department**

**WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAX SH 6693T YOUR INSURED SBY 358M  
 AND OTHER ON 17.01.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SH 6693T** 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 **SBY 358Y** we are submitting these claim for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$ 1,732.33
2	<u>7</u> days Loss of Rental @ \$ <u>125.00</u> per day	\$ 875.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	GIA / LTA Search Fee	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
<b>Sub Total :</b>		<b>\$ 2,614.82</b>

**HIRER'S CLAIM**

7	<u>7</u> days Loss of Income @ \$ <u>80.00</u> per days	\$ 560.00
<b>Total Claims:</b>		<b>\$ 3,174.82</b>

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 : SBY 358Y
- c) GIA / Police report/s of : SH 6693T
- d) Letter of authority from owner / hirer / operator
  - ( X ) Photocopie/s of Accident Scene Photo/s ( ) Traffic Compound ( X ) PIR
  - ( ) Witness statement/s ( x ) Rental Rate letter ( x ) Downtime/Mileage record

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.

A member of

**COMFORTDELGRO**

**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**  
 Yishun Industrial Park A  
 Singapore 768732





Auto  
Consultants  
Pte Ltd

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

14 MARCH 2018

**RAJENDRAN S/O NAGAPPA BALAKRISHNAN**  
BLK 10D BEDOK SOUTH AVENUE 2  
#09-566  
SINGAPORE 463010

Dear Sir/ Mdm

**OUR REF : CC4/ASM18001384/K1pa3**  
**YOUR REF : GA224179/1 (SBY 358M)**  
**ACCIDENT INVOLVING SBY 358M & SH 6693T ALONG/AT CHANGI AIRPORT T3**  
**DEPARTURE AREA ON 17/01/2018**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from ComfortDelgro Engineering Pte Ltd acting on behalf of the owner of SH 6693T against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that liability is not in our favour. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 10 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

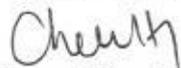
This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at [chewht@lkkauto.com](mailto:chewht@lkkauto.com).

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely



Chew Hsiao Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: [chewht@lkkauto.com](mailto:chewht@lkkauto.com)

*Cc AXA Insurance Pte Ltd  
(Motor Claims Dept)*

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****i 40 SH6693T , SBY 358Y  
DEPARTURE DRIVEWAY AT CHANGI AIRPORT T-3****ON 17-Jan-18 06:20**

I / We

**LAI KUM FATT**(Hirer) NRIC No.: **S1463528I**

and/or:

(Relief) NRIC No.:

Taxi Number

**SH6693T**

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

**17-Jan-2018**

Name of Hirer

**LAI KUM FATT**

Hirer NRIC

**S1463528I**

Signature :



Address

**441 CHOA CHU KANG AVENUE 4 #0...  
680441**

Contact No.

**96186283**



redefining / insurance

CLAIM REF : S8M007CA  
INSURED : RAJENDRAN S/O NAGAPPA BALAKRISHNAN

**DISCHARGE VOUCHER**

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated 17.01.2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of Comfort Transportation Pte Ltd and the Hirer, Lai Kum Fatt of vehicle no. SH 6693T.

Now we **ComfortDelgro Engineering Pte Ltd** for ourselves and the said Hirer and the driver jointly and severally:-

- a) agree to accept the sum of Singapore Dollars **Two Thousand Seven Hundred Eighty** only (**SS2,780.00**) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no (**SBY 358M**) arising out of an accident with (**SH 6693T**) on 17.01.2018.
- b) declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SBY 358M** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- c) We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of **ComfortDelgro Engineering Pte Ltd** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SBY 358M**.

Dated this 24<sup>th</sup> day of April 2018

Signed by \_\_\_\_\_

(AUTHORISED SIGNATORY)

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

Company Stamp \_\_\_\_\_

Witness : \_\_\_\_\_

Name : \_\_\_\_\_

I/C No : \_\_\_\_\_

Address : \_\_\_\_\_

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

Please forward your cheque made payable to:  
COMFORTDELGRO ENGINEERING PTE LTD

"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"

**Workshops**

GST REG. NO. M2-8921817-3

### TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 1

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO  
SH 6693T

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
15.09.2016

CHASSIS CODE  
KMHLB41UMGU093511

INV. NO/DATE  
91353639 25.01.2018

JOB NO.  
305108281

ODOMETER READING

DATE/TIME IN  
18.01.2018 11:25

Description : 3P 17.01.18

S/No	Part No.	Qty	Unit Price	%Disc	Net
<b>PART REQUISITION</b>					
0001	04-01-0103-2164	1	1,480.00	20.00	1,184.00
0002	FNPS NO PLATE(S)	1	55.00	0.00	55.00
SUB-TOTAL :					1,239.00

**JOB NATURE**

0001	L	PANEL BEATING	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	180.00	180.00
SUB-TOTAL :				380.00

1) WITHOUT TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT, OR ACCIDENTAL DAMAGE, THE CUSTOMER ACCEPTS THE RESPONSIBILITY FOR CARE OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLE AND DRIVER AND PASSENGER AND OWNERS RISK.

2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND REPORT WITHIN 7 DAYS FROM DELIVERY WITH THE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND UNPAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.

4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OF THIS INVOICE WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL DEEM THIS INVOICE AS CORRECT AND BINDING.

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.
8010010	91353639	1,732.33	

**Workshops**

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
 Page: 2

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
 SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO  
 SH 6693T

MAKE  
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MODEL  
 I-40

DATE OF REG  
 15.09.2016

CHASSIS CODE  
 KMHLB41UMGU093511

INV. NO/DATE  
 91353639 25.01.2018

JOB NO.  
 305108281

ODOMETER READING

DATE/TIME IN  
 18.01.2018 11:25

Items total		1,619.00
Add GST @	7.000 %	113.33
Invoice amount		1,732.33

Issued by : CHEWBEELENG 25.01.2018 16:57:20  
 Repair type : CLSO/57/57  
 Payment Type/Term: /Credit 30 days

1) WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARDS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE KEPT AT OWNERS' RISK.  
 2) CUSTOMERS SHALL RESPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL ADVISE THE COMPANY IMMEDIATELY BY NOTICE IN WRITING TO THE COMPANY OF ANY CLAIMANTS, OTHERWISE THE CLAIMS SHALL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
 3) INTEREST OF 1% PER MONTH WILL BE CHARGED IN A DAY TO DAY BASIS IN RESPECT OF ANY PAYMENT DUE AND OWE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (IF APPLICABLE) FROM THE FORWARDED FOR THE PERIOD OF DEFAULT.  
 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND NOTIFY THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

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.
8010010	91353639	1,732.33	

Our Ref: CT18010487

Date: 25 January 2018



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 17/01/2018 @ 06:20 hrs  
ALONG DEPARTURE DRIVEWAY AT CHANGI AIRPORT T-3  
INVOLVING SBY 358Y

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 **SH6693T** (the "Taxi"). The Taxi was hired to **LAI KUM FATT IC NO S1463528I** a registered hirer-operator of **Comfort Transportation 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 **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

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
SBY358M	17 Jan 2018 / 06:20:00	Successful	A12	AXA INSURANCE PTE LTD

Previous

OK

SH 6693C

# Thank you



Goh Cheng Chuan Andrew Cornelius has successfully logged out.

Your last login date and time was 17 Jan 2018, 11:16:08.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

### Session Transaction History

<u>S/No.</u>	<u>Asset Type</u>	<u>Asset ID</u>	<u>Asset Owner ID</u>	<u>Transaction Type</u>	<u>Transaction Amount(S\$)</u>	<u>Log Date/Time</u>
1	Vehicle	SBY358M	-	18.32 Insurance Enquiry (GIRO Payment)	7.49	17 Jan 2018 / 11:16:45