

INS. CASE OWNER: Marice 1

CC 31/ LCR18001606 1klws3 9

LKK:
IDAC:

Surveyor: KALVIN

DOI: 25/01/18

Date / Time: 25/01/18

Registered in Merimen: 26/01/18

Pre-assign / CCU / FTE



Insured Vehicle No: SLC 5920

Claim No.: 1630031465 SG

Name of Insured: LCR

Policy No.: 0999995075

Insured Tel No: _____ HP: _____

Make / Model: TOYOTA SIENIA

Excess Sec II :SS _____ D.O.A: 25/01/18

Place of Accident: CHANGI TERMINAL 2 (COFFEE DRIVE)

Is driver the owner? (YES / NO) Nature of Accident: _____

If NO, Driver Name / Age: AN LIAN KUO

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

Driver Tel No.: _____ (V/L: YES / NO)

Insured Liability: % Final ? Yes / No

GHA 1600x



INSRS: WSP: CDGE (loyalty)
Tel: _____
Liability: _____
RMKS: _____



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



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



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

Date/ Time	STAGE	DATE / PIC
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup)	<input type="checkbox"/>
	After call ltr to OI:	<input checked="" type="checkbox"/>
	Authorisation To Act:	<input checked="" type="checkbox"/>
	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"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD:	<input checked="" type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>

31/01/18 (vivan)

31/1/18

email letter to OI.
* Policy no please refer to main.

RECEIVED 01 MAR 2018

PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____
FINALIZATION	Date/Time: _____	Confirm with: _____
Repair Cost: \$S _____	(_____ days) Reduction: _____ %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: <u>27/2/18</u>	Confirm with: <u>reclaim.</u>
Final Liability: % <u>100</u>	(Agreed / Assessed) BOLA S/N No.: <u>26.</u>	Email <input type="checkbox"/> Call <input type="checkbox"/>
Repair Cost: <u>(Inc. RM)</u> \$S <u>1736.35</u>		
Loss of Rental (LOR): \$S <u>312.50</u>	(<u>2.5</u> days) x <u>125.00</u>	
Loss of Use (LOU): \$S <u>125.00</u>	(<u>5</u> x <u>2.5</u> days)	
Loss of Income (LOI): \$S <u>-</u>	(<u>5</u> x _____ days)	
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/>	[Tick only one]
GIA/LTA Search: \$S <u>5.25</u>		
Medical: \$S <u>-</u>		
Disbursement: \$S <u>-</u>	(e.g. Tow/ Independent)	
Legal Cost: \$S <u>-</u>		
Total:	\$S <u>2179.20</u>	Global Sum \$S: <u>2150.00</u>
FINAL PAYMENT	Date/Time: _____	Confirm with: _____
Payee 1: \$S <u>2150.00</u>	Name 1: <u>Comfortdelgro engineering, Pte Ltd</u>	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 2: (Strike if N.A.) \$S _____	Name 2: _____	
Payee 3: (Strike if N.A.) \$S _____	Name 3: _____	

01/03/18

Kahn

SHA1640x

14 Apr 2016

Estimated Cost

DD / TP / WS / TP RES / DD RES / EV / INV / MV

Truck / Trailer

Make: Hyundai Year: 2010 Mileage: 168k

Color: Blue

VIN: 275207

Engine: 1.6L

Trans: 408714

Gen. Cond: Good / Poor / Burnt

Steering: OK / Jammed / Leaked / Burnt

Brake: OK / Jammed / Leaked / Burnt

Mod: NI / S Rim / ST / R Rim

Tire Size: 205/60R16

BS / DUN / EXNOVA / GY / FS / LZA / MC / QHTU / PIR / SUMI

TOYO / YOKO or Westlake

Front	Left	Right
R Brk	7	7
L Brk	7	7
D/O/A	25/1/8	25/1/8

Surveyed at: COKE (Hyundai)

Des of Damages: Front / Rear / DS / US / UC / Rooftop or N/S B.L.

The U/C / Chassis frame / Body Structure affected due to collision

Insured

Policy No

Claims No

Sum Insured

Excess

Claims Record

Make driven

Policy Condition

Remark: The veh had commenced its repair at the time of inspection.

NS	OS
----	----

Est of Market Value

ICAD Accident Report Consistent? Yes or No

DR / PR / Seen Consistent? Yes or No

Est Repair 2 days Fee Yes or No

Lump Sum 2800 Fee Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted: Vehicle IN / OUT

Date/Time: 30/1/16 Action/Inspection: Calicut 111 \$1622.76/2011

AZA
rk

(RD-1110.00
6/1/)

Days of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Report Format: _____

Lump Sum / 12: _____

Add Fee: \$1000 \$500 \$250 \$100

Final Report: Preli. Report:



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			
AIG ASIA PACIFIC INSURANCE PTE LTD		Ref : CC3/LCR18001606/K1ws3	
78 SHENTON WAY #08-16 CHARTIS BUILDINGSINGAPORE 079120		Date : 26-01-2018	
		Code : LCR	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLC 5972D	Veh. Inspected	SHA 1640X
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	26/01/2018
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	25/01/2018	Inspection Date	25/01/2018
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.			

am: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO: 305110524

OWNER COMFORT TRANSPORTATION PTE LTD MER NO. 7010045 383 SIN MING DRIVE SINGAPORE SINGAPORE 575717 65508755 (R) (O) (P)	REGN NO. SHA1640X	MILEAGE
	MAKE HYUNDAI	FUEL E _____ 1/2 _____ F
	MODEL I-40	DATE/TIME IN 25.01.2018 11:25
	YR OF MANU. 14.04.2016	TARGET DATE
	CHASSIS CODE KMHLEB41UMGU087141	COMPLETION DATE/TIME

UNIT CARD NO.

JOB DESCRIPTION

cident Date: 25.01.2018
 TURE: 3P 25.01.18

NO	LABOR CODE	DESCRIPTION
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RECEIVED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Admission Slip

Exit Pass

Vehicle No.: SHA1640X

JU AIG LMK

Vehicle No.:

SHA1640X

Service Advisor:

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305110524

Date : 29.01.18

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA1640X

Date of Accident : 25.01.18

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

1. The repair job shall bill to: AIG --- SLC5972D
###
2. The finalized amount shall be:

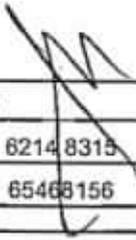
(a) Spare Parts after List discount		<u>\$1,002.76</u>
(b) Labour Charges	###	<u>\$620.00</u>
Total for Part-By-Part Repair Cost		<u>\$1,622.76</u>
(c) Lumpsum Repair (if applicable)		
Total for Lumpsum repair cost after Less: <u>20%</u>		<u> </u>
Final Lumpsum Repair cost		<u> </u>

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 : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : Calvin

Date : 30/1/18

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		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.01.2018

REPAIR ESTIMATE

Time: 11:10:42

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305110524
 REGN NO : SHA1640X
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 14.04.2016
 DATE/TIME IN : 25.01.2018 11:25
 ACCIDENT DATE : 25.01.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0001	04-01-0103-0728-G	I40VC HANDLE ASSY-DR O/S	1	53.00 ^{23.00} 0.00 53.00
0002	04-01-0103-0729-G	I40VC COVER-FR DR O/S HDL	1	18.50 20.00 14.80
0003	04-01-0103-0600-G	I40VC MIRROR ASSY-O/S REA	1	980.50 20.00 784.40
0004	28-01-0103-0003-A	(I40)FRT DOOR LOGO SONATA	1	75.00 2.00- 75.00
0005	28-01-0103-2013-A	I40V3 APP LOGO REAR DOOR	1	80.00 0.20 80.00
0006	04-01-0103-0840-G	I40VC PAD-DR O/S HANDLE F	1	3.85 20.00 3.08
0007	04-01-0103-0863-G	I40VC PAD-DR O/S HANDLE R	1	3.85 20.00 3.08

SUB-TOTAL : 1,013.36

JOB NATURE

0000	L	PANEL BEATING- FRT.	200.00
0001	23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002	17-01	CHECK ALL LIGHTING	20.00

SUB-TOTAL : 620.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.01.2018

REPAIR ESTIMATE

Time: 11:10:42

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305110524
REGN NO : SHA1640X
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 14.04.2016
DATE/TIME IN : 25.01.2018 11:25
ACCIDENT DATE : 25.01.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,633.36

MVA NAME & SIGNATURE
DATE:

SURVEYOR NAME & SIGNATURE
DATE:

AUTHORISED : YES / NO

COMFORTDELGRO ENGINEERING PTE LTD

AIG

REPAIR ESTIMATE*

VEHICLE NO : SHA 1640X

DATE 25/1/2018 14:38

MAKE :

Ju

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Door Mirror (LH) <i>wa</i>			\$ 980.50
	Front Door Outer Handle (LH) <i>wa</i>			\$ 53.00
	Front Door Handle Pad F <i>wa</i> \$ 3.55			
	Front Door Handle Pad R <i>wa</i> \$ 3.55			
	Front Door (LH) x repair			SUB TOTAL
	Rear Door (LH) x repair			LESS 20%
	Front Door Handle cover <i>cover missing \$ 18.50</i>			S 826.80
	Front Door Comfort Logo (LH) <i>wa</i>			\$ 75.00
	Rear Door Comfortdelgro & Apps Sticker (LH) <i>wa</i>			\$ 80.00
				S 155.00
	Labour Charge			
	Panel Beating			\$ 300.00 <i>200</i>
	Spray Painting Charge			\$ 420.00 <i>400</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	TOTAL LABOUR			S 770.00
	ESTIMATE TOTAL			S 1,751.80
				<i>10809</i> <i>1772.76</i>

Nett
Nett

1/Calvin 6/6/14
25/1/18 1500h
2 Bay 2
PIP
Before Paint photo

LKK Auto Centre hereby notify the Repairer as follows:

- To remain responsible for any painting
- To display the repairer's survey
- Parts should be of the appropriate
- That any work done on a "Without Prejudice" basis
- No illegal work should be allowed
- Supplies and materials should be surveyed and subject to prior 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.

Our Ref : T 0118 / SHA1640X /CL(st)
 Your Ref: _____
 Date : 2-Feb-18

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: 199500440V

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 725791

Yishun
 501 Yishun Industrial Park A
 Singapore 768732

AIG ASIA PACIFIC INSURANCE PTE LTD
CHARTIS Building
78 Shenton Way
#07-16
Singapore 079120

Attn : Motor Claims Department WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA1640X YOUR INSURED SLC5972D
 AND OTHER _____ ON 25.01.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA1640X 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 SLC5972D we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	1,736.35
2	<u>3</u> days Loss of Rental @ \$ 125.00 per day	\$	375.00
3	Survey Report Fees <i>(Surveyed by M/s LKK)</i>	\$	-
4	GIA / LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transportation	\$	-
Sub Total :			\$ 2,118.84

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ 80.00 per days	\$	240.00
Total Claims :			\$ 2,358.84

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

- a) Original repair bill and photocopies of photographs : 9 pcs.
- b) LTA search slip/s of : SLC5972D
- c) GIA / Police report/s of : SHA1640X
- d) Letter of authority from owner / hirer / operator
 - (X) Photograph/s of Accident Scene () Certificate of Insurance
 - () Witness statement/s (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

Cecilia Lee

Executive

CDGE Claims Department

Tel : 6214 8354 Fax: 6214 1843 Email : cecilialee@sparkcarcare.com

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

A member of

COMFORTDELGRO



Vivian Lau (LKKAuto)

From: Vivian Lau (LKKAuto)
Sent: Wednesday, 31 January, 2018 4:11 PM
To: 'eyap@lioncityrentals.com.sg'
Cc: Hsiao Tong (LKKAuto); Joy Irene (LKKAuto)
Subject: ACCIDENT INVOLVING SLC 5972D & SHA 1640X ON 25/01/2018

Our Ref: CC3/LCR18001606/K1ws3

31 January 2018

LION CITY RENTALS PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SLC 5972D & SHA 1640X ON 25/01/2018

We refer to the above accident where we are acting for AIG Asia Pacific Insurance 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 7 days from the date of this letter.

Please call us if you have further queries.

Thank you

Best Regards,

Vivian Lau | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-8625 | email: Vivianlau@lkkauto.com | fax: 6741-4108

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

RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

"We/I, COMFORTDELGRO ENGINEERING PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of surveyor) with respect to the amount claimed for \$ 2,150.00 (Global Sum) for vehicle no. SHA 1640X that was damaged pursuant to the accident which occurred on 25/01/2018 (date) along CHANGI TERMINAL 2 (location) involving vehicle no/s SLC 5972D.

This is pursuant to the inspection conducted on 25/01/2018 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner COMFORT TRANSPORTATION PTE LTD ("the third party claimant") of vehicle no. SHA 1640X make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SHA 1640X (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this _____ (day) of 27 FEB 2018 (month) 20____ (year)

Awk 
Signed by appointed surveyor

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
205 BRADDELL ROAD
SINGAPORE 579701


Signed by "the workshop" (with chop)

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*

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
 Page: 1

8010004
 AIG ASIA PACIFIC INSURANCE PTE LTD
 #08-16 78 SHENTON WAY, CHARLES BUILD
 SINGAPORE SG 079120
 CONTACT NO: 64193000 3225094

VEHICLE NO
 SHA1640X
 MAKE
 HYUNDAI
 MODEL
 I-40
 DATE OF REG
 14.04.2016
 CHASSIS CODE
 KMHLB41UMGU087141
 INV. NO/DATE
 91354454 30.01.2018
 JOB NO.
 305110524
 ODOMETER READING
 DATE/TIME IN
 25.01.2018 11:25

Description : 3P 25.01.18

S/No	Part No.	Qty	Unit Price	Disc	Net
PART REQUISITION					
0001	04-01-0103-0728	1	53.00	20.00	42.40
0002	04-01-0103-0729	1	18.50	20.00	14.80
0003	04-01-0103-0600	1	980.50	20.00	784.40
0004	28-01-0103-0003	1	75.00	0.00	75.00
0005	28-01-0103-2013	1	80.00	0.00	80.00
0006	04-01-0103-0840	1	3.85	20.00	3.08
0007	04-01-0103-0863	1	3.85	20.00	3.08
SUB-TOTAL :					1,002.76

JOB NATURE

0001	L	PANEL BRATING- FRF.	200.00	200.00
------	---	---------------------	--------	--------

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.
8010004	91354454	1,736.35	

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 2

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARITTS BUILD
 SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO
 SHA1640X

MAKE
 HYUNDAI

MODEL
 I-40

DATE OF REG
 14.04.2016

CHASSIS CODE
 KMHL841UMGU087141

INV. NO/DATE
 91354454 30.01.2018

JOB NO.
 305110524

COUNTER READING

DATE/TIME IN
 25.01.2018 11:25

S/No	Part No.		Qty	Unit Price	%Disc	Net
0002	23-502	SPRAYPAINT ON AFFECTED AREA	400.00			400.00
0003	17-01	CHECK ALL LIGHTING	20.00			20.00
SUB-TOTAL :						620.00

Items total 1,622.76
 Add GST @ 7.000 % 113.59
 Invoice amount 1,736.35

Issued by : KATHERINETAN 30.01.2018 10:40:46
 Repair type : CLSO/57/57
 Payment Type/Term: /Credit 30 days

WHILE PRINTED AND IN COLOURS PHOTO-COPYING FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN PERMISSION OF COMFORTDELGRO ENGINEERING PTE LTD IS STRICTLY PROHIBITED. THE COMPANY SHALL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE ORIGINAL COPY OF THIS DOCUMENT. THE COMPANY SHALL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE ORIGINAL COPY OF THIS DOCUMENT. THE COMPANY SHALL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE ORIGINAL COPY OF THIS DOCUMENT.

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.
8010004	91354454	1,736.35	

Our Ref: CT18010753



Date: 30 January 2018

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 25/01/2018 @ 06:40 hrs
ALONG AIRPORT T2
INVOLVING SLC5972D

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 **SHA1640X** (the "Taxi"). The Taxi was hired to **MOHAMED HUMAZI BIN JALALUDIN IC NO S7834609D** 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 **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
SLC5972D	25 Jan 2018 / 09:40:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

[Previous](#)[OK](#)

SH1640X

...CLAIM SUBFOLDER...(Pending for Survey Report)

Express

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	26 Jan 2018 Edit Reg		25 Jan 2018 00:00 Edit Adj Rpt	S\$1,622.76 Edit Estimates	S\$1,622.76 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	LCRF Pte Ltd , Co. Reg. No.: 201624597K								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHA1640X	Date of Loss:	25/01/2018 09:00 - :59						
Claim Type:	TP / 1630031465SG	Policy/Cover Note No.:	0999995075						
Vehicle Reg. No. (Insured):	SLC5972D	Policy No. (Claimant):	D-18088936MFSH						
	Excess:								
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Olea, Maricel] Maricel.Olea@aig.com								
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 06/02/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SHA1640X (1630031465SG)
[SLC5972D]
TP
COMFORT TRANSPORTATION PTE LTD
Jan 25 2018 9:00AM
[LCRF Pte Ltd]
ComfortDelGro Engineering Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			Upload Video			Upload Audio			View <input type="button" value="View in Browser"/>		
Letters/Correspondences												1 per page		<input checked="" type="checkbox"/>			
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)									Thumbnail		Print				
1	(Draft)	Third Party Express Settlement - Payment Breakdown									1		Edit				
Photos/Images												3 per page		<input checked="" type="checkbox"/>			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)									Thumbnail		Print				
1	26/01/18 17:29	General View									1		Load JPG				
2	26/01/18 17:29	General View									1		Load JPG				
3	26/01/18 17:29	General View									1		Load JPG				
4	26/01/18 17:29	General View									1		Load JPG				
5	26/01/18 17:29	General View									1		Load JPG				
6	26/01/18 17:29	General View									1		Load JPG				
7	26/01/18 17:29	General View									1		Load JPG				
8	26/01/18 17:29	General View									1		Load JPG				
9	26/01/18 17:29	General View									1		Load JPG				
10	26/01/18 17:29	General View									1		Load JPG				
11	26/01/18 17:29	General View									1		Load JPG				
12	26/01/18 17:29	General View									1		Load JPG				
13	26/01/18 17:29	General View									1		Load JPG				
14	26/01/18 17:29	General View									1		Load JPG				
15	26/01/18 17:29	General View									1		Load JPG				
16	26/01/18 17:29	General View									1		Load JPG				
17	26/01/18 17:29	General View									1		Load JPG				
18	26/01/18 17:29	General View									1		Load JPG				
19	26/01/18 17:29	General View									1		Load JPG				
20	29/01/18 08:29	Reinspection Photo									1		Load JPG				
21	29/01/18 08:29	Reinspection Photo									1		Load JPG				
22	29/01/18 08:29	Reinspection Photo									1		Load JPG				
23	29/01/18 08:29	Reinspection Photo									1		Load JPG				
24	29/01/18 08:29	Reinspection Photo									1		Load JPG				
25	29/01/18 08:29	Reinspection Photo									1		Load JPG				
Documentation												1 per page		<input checked="" type="checkbox"/>			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)									Thumbnail		Print				
1	26/01/18 13:53	TP GIA REPORT									1		Load PDF				
2	26/01/18 13:53	TP ESTIMATE- MARKED									1		Load PDF				
3	31/01/18 16:11	Email letter to OI ACCIDENT INVOLVING SLC 5972D & SHA 1640X ON 25.01.2018									1		Load PDF				
4	02/03/18 11:32	WORKSHOP INVOICE									1		Load PDF				

5	02/03/18 11:32	AUTHORISATION TO ACT FORM		Load PDF	
6	02/03/18 11:32	Release Voucher		Load PDF	
7	02/03/18 11:32	RENTAL RECEIPT		Load PDF	
8	02/03/18 11:32	LTA SEARCH		Load PDF	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)		Thumbnail	Print
1	29/01/18 12:00	OI GIA Report		Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

<p>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p>Show Remarks To: <input type="checkbox"/> Handling Insurer</p> <p><small>Note: Remarks are private unless you show it to other parties.</small></p>

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

**THIRD PARTY EXPRESS SETTLEMENT
(PAYMENT BREAKDOWN)**

Vehicle No:	SLC5972D (Insd veh)	Model:	HYUNDAI I40 1.7 D CRDI F/L AT ABS AIRBAG 4DR (M)
	SHA1640X (TP veh)		
Date of Accident:	25/01/2018		

Global Sum Settlement	: [X] Yes	[] No
Repair Estimate	: \$	1,896.85
Final Repair Cost	: \$	2,150.00
Loss of Use	: \$	2.50 days at \$50.00 per day
Rental (if any)	: \$	2.50 days
LTA / GIA Search Fee	: \$	
Others:	: \$	
	: \$	
Final Settlement Sum (Global Sum)	: \$	2,150.00
Is Third Party Workshop GIA Registered? [X] YES [] NO (Kindly indicate below)		
A) For <u>Non GIA Registered Workshop</u> : Agreed Liability _____(%)		
B) For <u>GIA Registered Workshop</u> : BOLA Applicable: Yes/ No —BOLA Scenario No: _____		
BOLA Liability: _____100_____(%) Assessed Liability (*): _____(%)		
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.		
Remarks _____		

Payment Instruction: Payee's Breakdown		
1)	ComfortDelGro Engineering Pte Ltd	: \$ 2,150.00
2)		: \$
3)		: \$
4)		: \$
5)		: \$

JOANNE LEE KHANG MIN

LKK Auto Consultants Pte Ltd

02 Mar
2018

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC3/LCR18001606/K1WS3Q2

Date: 02/03/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 0999995075
 Claimant Vehicle No: SHA1640X Insured Vehicle No: SLC5972D
 Date of Loss: 25/01/2018 Nature of Claim: TP Claim No: 1630031465SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHA1640X
 Make & Model: HYUNDAI I40, 1.7 D CRDI F/L AT ABS AIRBAG 4DR (M) Engine No: D4DFDU607406
 Reg. Date: 04/04/2016 (Man. Year: 2015) Chassis No: KMHLB41UMGU087141
 Colour: Blue Odometer: 275207 km
 Engine Capacity: 1685 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 205/60 R16 Rear Tyre Size: 205/60 R16
 Front Left Side: West Lake 7 mm Rear Left Side: West Lake 7 mm
 Front Right Side: West Lake 7 mm Rear Right Side: West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,002.76	1,002.76	0.00	0.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	770.00	620.00	150.00	19.48
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	1,772.76	1,622.76	150.00	8.46
+ GST 7.00/7.00% (S\$)	124.09	113.59	10.50	8.46
Nett Amount (S\$)	1,896.85	1,736.35	160.50	8.46
+ Loss of Use (2.5 x S\$50.00/day) (S\$)		125.00		
+ Car Rental (2.5 x S\$125.00/day) (S\$)		312.50		
+ Doc/Search Fee (S\$)		5.35		
Nett Liability (S\$)		2,179.20		
Global Sum Settlement (S\$)		2,150.00		

INSPECTION

Date of Assignment: 25/01/2018
 Date Inspected: 25/01/2018 Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang)

59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: VIVIAN LAU PEI FENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT DOOR MIRROR (LH)	Cracked	980.50 FL	*980.50 FL
2	1		*FRONT DOOR OUTER HANDLE (LH)	Missing	53.00 FL	*53.00 FL
3	1		*FRONT DOOR HANDLE PAD F	Missing	3.85 FL	*3.85 FL
4	1		*FRONT DOOR HANDLE PAD R	Missing	3.85 FL	*3.85 FL
5	1		*FRONT DOOR (LH) (NPA)	Repair	0.00 FL	*- FL
6	1		*REAR DOOR (LH) (NPA)	Repair	0.00 FL	*- FL
7	1		*FRONT DOOR COMFORT LOGO (LH)	Necessary	75.00 FS	*75.00 FS
8	1		*REAR DOOR COMFORTDELGRO & APPS STICKER (LH)	Necessary	80.00 FS	*80.00 FS
9	1		*FRONT DOOR HANDLE COVER	Missing	18.50 FL	*18.50 FL

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	1,214.70	1,214.70
- List Item Discount on L Items 20.00/20.00% (S\$)	211.94	211.94
Total Parts (S\$)	1,002.76	1,002.76

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	300.00	200.00
2	SPRAY PAINTING CHARGE	New	420.00	400.00
3	WIRING CHARGE	New	50.00	20.00
Gross Labour Cost (S\$)			770.00	620.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >