

CC / ASM1800

ASK
IDAX

ASSIGNMENT

DOI

Date Time

Registered in Mauritius

Pre-assign: CCL / FTF



Insured Vehicle No

Name of Insured

Insured Vehicle No

Excess Sec II/SS

Is driver the owner? (YES/NO)

If NO, Driver Name Age

Driver License

(YES/NO)

Nature of Accident

Claim No.

Policy No.

Make Model

Place of Accident

OGI/RI/REPORT YES/NO

Insured Liability

IP/GI/RI/REPORT YES/NO

Final? Yes/No

INSRS
WSP
Tel
Liability
RMKSINSRS
WSP
Tel
Liability
RMKSINSRS
WSP
Tel
Liability
RMKSINSRS
WSP
Tel
Liability
RMKS

Date Time

STAGE

DATE / PR

Not-Reporting to CSD
Non-Reporting to CSD
Non-Reporting to CSD
Non-Reporting to CSD
Call ID
After call to CSD

Documentation Check List: Handler Typist

Not-Reporting to CSD
After call to CSD
Authorization to Act
Release Voucher
Final Repair Bill
Car Rental Invoice
Towing Invoice
L.A. AdA
Medical Bill
ePR
Mandate Receipt Instruction
LCO
Payment Breakdown Form
Post-Report Photos
Others

07/13/18

PRELIMINARY ADVICE

Date Time

Sent By

FINALIZATION

Date Time

Confirm with

Confirm by

Repair Cost

SS

days Reduction

%

Total

Call

FINAL SETTLEMENT

Date Time

Confirm with

Email

Call

Claim Liability

SS

(Agreed - Assessed) BOD A/S N No.

Repair Cost

SS

Loss of Rental (CAR)

SS

(2.5 days) 2.5 days

Loss of Use (CAR)

SS

(2.5 days) 2.5 days

Loss of Income (LOI)

SS

(2.5 days) 2.5 days

Toll only

LOI only

SS

FOR - LOI

FOR - LOI

FOR - LOI

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FOR - LOI

TOTAL SUM

SS

1,000.00

Medical

SS

Endorsement

SS

Legal Cost

SS

Total

SS

1,000.00

Global Sum SS: 1,000.00

FINAL PAYMENT

Date Time

Confirm with

Email

Call

Payee 1

SS

Name 1

Payee 2 (Strike if N/A)

SS

Name 2

Payee 3 (Strike if N/A)

SS

Name 3

1) Claim status: Normal Reject Private Settle
2) Report Format
3) Survey fee

COMPUTER ENGINEERING PTE LTD

SHD 75425 8 Sep 2016

SHD 7542.5

8 Sep 2016

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1999, 2000, 2001)

100-2557

Days Of Rain: 4

Resolving Name Triple

2014.12.22

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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 | | | |
|--|--|-----------------------------|---|
| AXA INSURANCE PTE LTD | | Ref : CC4/ASM18003329/K1ka3 | |
| 8 SHENTON WAY #24-01
AXA TOWERS SINGAPORE 068811 | | Date : 21-02-2018 |  |
| | | Code : ASM | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | |
| Insured Veh. | SKD 8981P | Veh. Inspected | SHD 3542S |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | S8M0099Y | Excess (\$) | 0.00 |
| Assign From | | Assign Date | 21/02/2018 |
| 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 | 20/02/2018 | Inspection Date | 21/02/2018 |
| 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. | | | |

COMFORT ENGINEERING

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Date/Time: 20.02.2018 17:54

Page : 1

APC Repair TP.OLSON

JOB CARD Sales Order:

305118312

AND

SHL3842E

HYUNDAI

1-40

20.02.2018 14:20

08.09.2014

KMHCB41CMH3090491

COMFORT TRANSPORTATION PTE LTD

7010045

383 SUN MING DRIVE

Singapore SINGAPORE 870917

88508701

000000

Printed Date: 20.02.2018

ATCPE: 3E 20.02.18

AND

LABOR CODE

DESCRIPTION

000000

000000

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REPAIR ESTIMATE*

VEHICLE NO : SHD 35428

DATE 2 / 2 / 2018

MAKE :

MODEL. : HYUNDAI i40

| MODEL | HYUNDAI i40 | | | |
|-------|---|------|------------|-----------|
| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
| | Rear Bumper ✓ | | | \$ 603.60 |
| | Rear Bumper Reinforcement ? | | | \$ 504.35 |
| | Rear Bumper Reinforcement Bracket (LH RH) ? | | \$ 180.00 | \$ 360.00 |
| | Rear Bumper Side Bracket ? | | | \$ 49.00 |
| | Rear Bumper Clips ✓ | | | \$ 22.00 |
| | Rear Bumper Sponge ? | | | \$ 143.40 |
| | Rear Bumper Under Cover ✓ | | | \$ 225.00 |
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COMFORT ENGINEERING

Our Job Ref No : 305118312

Date : 22/02/18

100, Pandan Baru Engineering Estate,
100 Pandan Drive, Singapore 120002
Tel: 65468156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No SHD3542S

Date of Accident 20-Feb-18

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

- The repair job shall bill to AXA --- SKD8981P
- The finalized amount shall be:

| | |
|---|--------------------------|
| (a) Spares Parts after List discount | <u>\$755.48</u> |
| (b) Labour Charges | <u>\$500.00</u> |
| Total for Part-By-Part Repair Cost | <u>\$1,255.48</u> |
- Lumpsum Repair, if applicable:
Total for Lumpsum repair cost after Less 20%
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 LIM T S

Tel : 62148398

Fax 65468156

Signature 

Name KALVIN

Date 23/2/18

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

COMFORTDEIGROENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 22/02/2018
Time: 08:46:27
Page: 1

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

FOR NO: 305118312
REGN NO: SHD3542S
MILEAGE: 000000000
MAKE: HYUNDAI
MODEL: I-40
DATE OF REGN: 08/09/2016
DATE TIME IN: 20/02/2018 14:20
ACCIDENT DATE: 20/02/2018

JOB: PARTS DESCRIPTION

QTY END UNIT PRICE DISC% AMOUNT

PART REQUISITION

| | | | | | |
|-------------------------|-------------------------|----|--------|-------|--------|
| 0001 04 01 01 03 0579 G | REAR BUMPER | 1 | 603.60 | 20.00 | 482.88 |
| 0002 04 01 01 03 1150 A | REAR BUMPER MAT | 1 | 50.00 | | 50.00 |
| 0003 04 01 01 03 0738 G | REAR BUMPER UNDER COVER | 1 | 125.00 | 20.00 | 100.00 |
| 0004 04 01 01 01 0111 G | REAR BUMPER CLIPS | 10 | 22.00 | 20.00 | 17.60 |
| 0005 ENPS | NO PLATE(S) | 1 | 25.00 | | 25.00 |
| SUB-TOTAL | | | | | 755.48 |

JOB NATURE

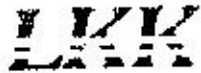
| | | | | | |
|-------------|------------------------------|-----|--------|--|---------|
| 0000 1 | PANEL BEATING | 200 | 900 | | 180,000 |
| 0001 23 502 | SPRAY PAINT ON AFFECTED AREA | | | | 180.00 |
| 0002 1 | RETRIEVE SENSOR | | 20.00 | | 20.00 |
| 0003 20 05 | LICENCE PLATE COVER | | 100.00 | | 100.00 |
| SUB-TOTAL | | | | | 500.00 |

DATE 24/2/2018

MAKLE :

MODEL : HYUNDAI i40

| MODEL | HYUNDAI i40 | Qty | Parts Description: Labour | Type | Unit Price | Amount |
|-------|-------------|-----|---|------|------------|--------------------|
| | | | Rear Bumper | | | \$ 603.60 |
| | | | Rear Bumper Reinforcement | | | \$ 504.35 |
| | | | Rear Bumper Reinforcement Bracket (LH RH) | | \$ 300.00 | \$ 300.00 |
| | | | Rear Bumper Side Bracket | | | \$ 49.00 |
| | | | Rear Bumper Clips | | | \$ 22.00 |
| | | | Rear Bumper Sponge | | | \$ 143.40 |
| | | | Rear Bumper Under Cover | | | \$ 225.00 |
| | | | SUB TOTAL | | | \$ 1,907.35 |
| | | | LESS 20% DISCOUNT | | | \$ 381.47 |
| | | | DISCOUNTED TOTAL | | | \$ 1,525.88 |
| | | | Rear Bumper Reverse Sensor | | | \$ 135.70 |
| | | | Rear No. Plate | | | \$ 25.00 |
| | | | License Plate Cover | | | \$ 100.00 |
| | | | Rubber Mat - new | | \$ 50 | \$ 260.70 |
| | | | Labour Charge | | | 200 |
| | | | Panel Beating | | | \$ 380.00 |
| | | | Spray Painting Charge | | | \$ 200.00 |
| | | | R Relfix Reverse Sensor | | | \$ 120.00 |
| | | | TOTAL LABOUR | | | \$ 700.00 |
| | | | ESTIMATE TOTAL | | | \$ 2,486.58 |
| | | | <p>Kalvin (K11)</p> <p>2/12/18 1130L</p> <p>2 Pys</p> <p>PIP</p> <p>Before paint & ht</p> | | | |



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

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

Your ref: S8M0099Y
Our ref: CC4/ASM18003329/K1ka3

Date: 22.02.2018

The Motor Claims Department
M/s AXA INSURANCE PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHD 3542S

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 21.02.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

| | | |
|-------------------------------|-------|----------|
| Workshop Estimate Amount | : S\$ | 2,536.58 |
| Revised Estimate Amount | : S\$ | 1,255.48 |
| "Check" Items Amount | : S\$ | 845.40 |
| Total (Including Check Items) | : S\$ | 2,100.88 |
| Market Value | : S\$ | - |
| LTA Reimbursement Value | : S\$ | - |
| Nett Value | : S\$ | - |

Description of Damage:

The vehicle sustained damages at the
Rear Portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2.0 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser



SERVICE REQUESTS

MESSAGES

CLAIMS

Service Request Details

Service ID#

LKK AXA REFUND CLAIM
31503

20 February 2018

20 February 2018

20 February 2018

LKK AUTO INSURANCE CO.
Singapore

Third Party Vehicle Damage

LKK Insurance (Pte) Ltd
Singapore

Actions

First Step: Work

Vehicle Information

SKD 8981P

TPV: SHD 3542S

160

Service Address

N/A

Primary Contact: Insured

WONG MEI YOCK FLORENCE
BLK 606 ELIAS RD #03-206, S19606
Singapore
94556484
wongmeiyock2001@yahoo.com.sg

Claim Handler

TAY Ernest
6568604835
ernest.tay@axa.com.sg

| Icon | Account | From | Account | Message | Subject |
|------|---------------------|-----------------------------------|---|---|---------|
| | | | | | |
| TYPE | SENT | FROM | SUBJECT | BODY | |
| | 25/02/2018 11:15 AM | TAY Ernest | Re: RE: Direct Settlement - Accident Involving SKD 8981P (OI: AXA - 58M0099Y) and SHD 3542S (TP: LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Sir,
Hi, I am sorry to hear that... | |
| | 24/02/2018 6:10 PM | LKK AUTO CONSULTANTS PTE LTD (TP) | RE: Direct Settlement - Accident Involving SKD 8981P (OI: AXA - 58M0099Y) and SHD 3542S (TP: LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Ernest, We refer to the above mentioned... | |

| TYPE | SENT | FROM | SUBJECT | BODY | |
|---|---------------------|-----------------------------------|---|--|---|
|  | 4/27/2016 12:18 PM | LKK AUTO CONSULTANTS PTY LTD (TP) | RE: Direct Settlement - Accident Involving SKD 8981P (OI : AXA - SBM0099Y) and SHD 35425 (TP : LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Sir,
I have received your email regarding the above mentioned matter.
Please refer to the attached documents for further details.
Thank you. |  |
|  | 15/02/2016 11:11 PM | LKK AUTO CONSULTANTS PTY LTD (TP) | RE: Direct Settlement - Accident Involving SKD 8981P (OI : AXA - SBM0099Y) and SHD 35425 (TP : LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Sir,
I have received your email regarding the above mentioned matter.
Please refer to the attached documents for further details.
Thank you. |  |
|  | 11/02/2016 10:18 PM | LKK AUTO CONSULTANTS PTY LTD (TP) | Direct Settlement - Accident Involving SKD 8981P (OI : AXA - SBM0099Y) and SHD 35425 (TP : LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Sir,
I have received your email regarding the above mentioned matter.
Please refer to the attached documents for further details.
Thank you. |  |
|  | 02/02/2016 03:18 PM | LKK AUTO CONSULTANTS PTY LTD (TP) | Direct Settlement - Accident Involving SKD 8981P (OI : AXA - SBM0099Y) and SHD 35425 (TP : LKK REF - CC4/ASM18003329/K1ua3) on 20.02.2018 | Dear Sir,
I have received your email regarding the above mentioned matter.
Please refer to the attached documents for further details.
Thank you. |  |
|  | 20/02/2016 00:11 PM | LKK AUTO CONSULTANTS PTY LTD (TP) | Is (Immediate Advice) | Dear Sir,
I have received your email regarding the above mentioned matter.
Please refer to the attached documents for further details.
Thank you. |  |

Our Ref : T 0218/ SHD3542S /WT(st)

Your Ref :

Date 02-Mar-18CDGE Tax/ Claims Dept
59 Loyang Drive 4th Fl
Singapore 508969AXA Insurance Pte Ltd
8 Shenton Way
#24-01, AXA Tower
Singapore 068811

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHD3542S YOUR INSURED SKD8981P
AND OTHER YM 8638T ON 20.02.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SHD3542S 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 SKD8981P we are submitting these claim for your consideration on behalf of the claimants

TAXI OWNER'S CLAIM

| | | |
|--------------------|---|---------------------------|
| 1 | Cost of Repair | \$ 1,343.36 |
| 2 | <u>3</u> days Loss of Rental @ \$ <u>117.00</u> per day | \$ <u>351.00</u> |
| 3 | Survey Report Fees (Surveyed by M/s LKK) | \$ - |
| 4 | GIA / LTA Search Fee | \$ <u>7.49</u> |
| 5 | GIA / Police Report Fees | \$ - |
| 6 | Towing / Medical / Transportation Fees | \$ - |
| Sub Total : | | \$ <u>1,701.85</u> |

HIRER'S CLAIM

| | | |
|----------------------|---|---------------------------|
| 7 | <u>3</u> days Loss of Income @ \$ <u>80.00</u> per days | \$ <u>240.00</u> |
| Total Claims: | | \$ <u>1,941.85</u> |

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 SKD8981P
 c) GIA / Police report/s of SHD3542S
 d) Letter of authority from owner / hirer / operator
 ☒ Photocopies of Accident Scene Photo/s ☐ Traffic Compound ☒ PIR
 ☐ Witness statement/s ☒ Rental Rate letter ☒ 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.

COMFORT



07 MARCH 2018

AXA Insurance Pte Ltd
100 Robinson Road
Singapore 068902

Dear Sir/Madam,

OUR REF :
YOUR REF :
ACCIDENT INVOLVING AND ALONG : ON

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 acting on behalf of the owner of against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle was involved in a and was the

Please be informed that your No Claim Discount (NCD) will be 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 full co-operation in the handling of the claim is required and kindly submit the following to within 10 days from the date of this letter **if not provided at AXA's 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 6256 3561 or email us at axaclaims@axa.com.sg.

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

Yours sincerely

Yours

Zain
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: zain@axa.com.sg

c.c. AXA Insurance Pte Ltd (AXA)
(Motor Claims Dept)



redefining insurance



CLAIM REF : 88M00993
INSURED : WONG MEI YOCK FLORENCE

DISCHARGE VOUCHER

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated 20 February 2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of **Comfort Transportation Pte Ltd** and the Driver Use Sega Jin vehicle no. SHD 35428.

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

- agree to accept the sum of Singapore Dollars One Thousand Seven Hundred and Sixty only (S\$1,760.00) 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 (SKD 8981P) arising out of an accident with SHD 35428 on 20/02/2018.
- 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. SKD 8981P arising directly indirectly as a consequence of the accident and hereby give our full and final discharge.
- 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. SKD 8981P.

Dated this _____ day of _____, 2018.

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp

Witness _____

Name _____

IC No _____

Address _____

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd
A member of COMFORT

Head Office
203 Bras Basah Road
Singapore 179550

ACCOUNT No.

INVOICE No.

AMOUNT

BANK/CHQ No.

Kindly note that the amount shown below is inclusive of GST.

CUSTOMER'S COPY

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDeltGro Engineering Pte Ltd
235 Orchard Road
Singapore 238877

ACCOUNT No.

INVOICE No.

AMOUNT

BANK/CHQ No.

Simply note that no GST is charged on our services as we are GST exempt.

CUSTOMER'S COPY

Our Ref. CT18020664

Date: 26 February 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 20/02/2018 @ 13:25 hrs
ALONG PENJURU ROAD AFTER TEBAN GARDENS CRE IN
 THE DIRECTION TOWARDS TEBAN GARDENS RD
INVOLVING SKD 8981 P, YM 8638T

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the tax-bearing vehicle registration number **SHD3542S** (the "Taxi"). The Taxi was hired to **LEE SECK JIN IC NO S0409761J** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate \$117.00 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
Assistant Manager, Fleet Safety

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

Set (D) 3542

DATE

STATE OF NEW YORK

IN SENATE

January 1, 1915

REPORT OF THE

COMMISSIONERS

OF THE LAND OFFICE

1915

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1915

1915

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1915

1915

1915

Enquire Vehicle Insurer

| Vehicle No. | Incident Date/Time | Search Status | Insurance Company Code | Insurance Company Name |
|-------------|------------------------|---------------|------------------------|------------------------|
| SK08981P | 20 Feb 2019 / 10.25.00 | Successful | A12 | AXA INSURANCE PTE LTD |

Previous OK

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

| | | | |
|-------------------|----------------------|--------|------------------|
| Vehicle No: | SKD 8981P (Insd veh) | Model: | TPVD HYUNDAI I40 |
| | SHD 3542S (TP veh) | | |
| Date of Accident: | 20/02/2018 | | |

| | | |
|-----------------------|---|----------|
| Global Sum Settlement | : ☒ Yes ☐ No | |
| Repair Estimate | \$ | 2,714.14 |
| Final Repair Cost | \$ | 1,343.36 |
| Loss of Token Sum | \$ | 125.00 |
| Rental (if any) | \$ | 292.50 |
| ATA / GIA Search Fee | \$ | 7.49 |

| | | |
|---------|----|------|
| Others: | \$ | 0.00 |
|---------|----|------|

| | | |
|-----------------------------------|----|----------|
| | \$ | |
| Final Settlement Sum (Global Sum) | \$ | 1,760.00 |

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A) For Non GIA Registered Workshop: Agreed Liability _____ (%)

B) For GIA Registered Workshop: BOLA Applicable: Yes/ No BOLA Scenario No: _____

BOLA Liability: _____ 100 _____ (%) Assessed Liability (*) 0 _____ (%)

* 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 | \$ | 1,760.00 |
|----|-----------------------------------|----|----------|

JOANNE LEE KHANG MIN
LKK Auto Consultants Pte Ltd

17/08/2018
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))



Service Request Details

| | | |
|--------------|---|--|
| Claim | S6M0099Y | Vehicle Information |
| Reference | CC4/ASM18003329/K1ua3q2  | Incident Vehicle Registration #
SIID35425 |
| Loss Date | 20 February 2018 | Make
TPVD HYUNDAI |
| Request Date | 21 February 2018 | Model
I40 |
| Due Date | | Service Address
... |
| Vendor Name | IKK AUTO CONSULTANTS PTE LTD (IP) | Primary Contact/Insured |
| Type of Loss | Third Party Vehicle Damage | WONG MEI YOCK FLORENCE
BLK 606 ELIAS RD, #03-206, 510606,
Singapore
94556484
henryyeo2001@yahoo.com.sg |
| Services | Pending verification - Direct Settlement | |

Claim Handler

TAY Ernest
6568804835
ernest.tay@ax

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

Document Type

▼

Document Subtype

▼

.

NAME

📄 Accident Statement

TYPE

Reports & Statement

SUB-TYPE

Merimen

AUTHOR

DATE UPLOADED

NAME

📄 LKKInvoice1 (8).pdf

TYPE

Invoice

SUB-TYPE

Surveyor/ Assessor expense

AUTHOR

LKK AUTO CONSULTANTS PTE LTD (TP)

| | |
|---------------|---|
| DATE UPLOADED | 17 August 2018 |
| NAME |  payment breakdown SHD 35425.pdf |
| TYPE | Forms / Claim Documents |
| SUB-TYPE | Others |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 17 August 2018 |
| NAME |  LOD.pdf |
| TYPE | Forms / Claim Documents |
| SUB-TYPE | Others |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 17 August 2018 |
| NAME |  DISCHARGE VOUCHER.pdf |
| TYPE | Forms / Claim Documents |
| SUB-TYPE | Satisfaction / Discharge Voucher |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |

| | |
|---------------|---|
| DATE UPLOADED | 17 August 2018 |
| NAME |  AUTHORIZATION TO ACT FORM.pdf |
| TYPE | Forms / Claim Documents |
| SUB-TYPE | POA / Authority Letter |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 17 August 2018 |
| NAME |  WORKSHOP INVOICE.pdf |
| TYPE | Invoice |
| SUB-TYPE | Repairs |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 17 August 2018 |
| NAME |  SHID35425 / TP 1.PDF |
| TYPE | Reports & Statement |
| SUB-TYPE | CIA Report |

| | | | |
|---------------|--|--|--|
| AUTHOR | TAY Ernest | | |
| DATE UPLOADED | 25 July 2018 | | |
| NAME |  YM8638T / TP 2.PDF | | |
| TYPE | Reports & Statement | | |
| SUB-TYPE | GIA Report | | |
| AUTHOR | TAY Ernest | | |
| DATE UPLOADED | 25 July 2018 | | |
| NAME |  LTA SEARCH.pdf | | |
| TYPE | Forms / Claim Documents | | |
| SUB-TYPE | Others | | |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) | | |
| DATE UPLOADED | 11 May 2018 | | |
| NAME |  RENTAL RECEIPT.pdf | | |
| TYPE | Forms / Claim Documents | | |
| SUB-TYPE | Others | | |

| | | | |
|---------------|--|--|--|
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) | | |
| DATE UPLOADED | 11 May 2018 | | |
| NAME |  LETTER TO OI.pdf | | |
| TYPE | Letters and Correspondence | | |
| SUB-TYPE | Policy Holders / Insured | | |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) | | |
| DATE UPLOADED | 11 May 2018 | | |
| NAME |  TP ESTIMATE - MARKED.pdf | | |
| TYPE | Reports & Statement | | |
| SUB-TYPE | Estimate / Quotation | | |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) | | |
| DATE UPLOADED | 26 February 2018 | | |
| NAME |  TP GIA REPORT.pdf | | |
| TYPE | Reports & Statement | | |

| | |
|---------------|--|
| SUB-TYPE | GIA Report |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 26 February 2018 |
| NAME |  Preliminary Advice.pdf |
| TYPE | Forms / Claim Documents |
| SUB-TYPE | Others |
| AUTHOR | LKK AUTO CONSULTANTS PTE LTD (TP) |
| DATE UPLOADED | 22 February 2018 |
| NAME |  EMAIL RECEIVED FROM WORKSHOP.msg |
| TYPE | Other |
| SUB-TYPE | Other |
| AUTHOR | OHIWAR Namrata |
| DATE UPLOADED | 21 February 2018 |