

INS. CASE OWNER

Bernard

CC 7/AIG1800

7760, 126th St

LKK  
HDAC

Survivor

kalvin

DOI:

## ASSIGNMENT

81	7	11
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Date / Time

21718

Registered in Merimex:

✓	✓	18
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Pre-assign / CCU / FTE



Insured Vehicle No. \_\_\_\_\_

STY 32215

Name of Insured

Lim HEMAWAT

Insured Tel No. \_\_\_\_\_

HP

97464717

Express Sec II :SS

D.O.A.†

18

Is driver the owner?

(YES / NO)

Nature of Accident

If **NO**, Driver Name / Age :

Driver Tel No.: \_\_\_\_\_

(V/L YES / NO)

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

Insured Liability :	%	Final ? Yes / No
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SHR RGVTK



INRS:  
WSP:  
Tel :  
Liability  
RMKS:

unlike  
us



INRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
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INSRS:  
WSP:  
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<div style="position: relative;"> <div style="position: absolute; top: 10px; left: 10px; font-size: 24px;">20/2/18</div> <div style="position: absolute; top: 40px; left: 10px; font-size: 24px;">711</div> <div style="position: absolute; top: 70px; left: 10px; font-size: 24px;">6/3/18</div> <div style="position: absolute; top: 10px; right: 10px; font-size: 18px;">Spoke to OI, he confirmed the accident details, informed IP claim and he agree to settle.</div> <div style="position: absolute; bottom: 10px; left: 10px; font-size: 24px; opacity: 0.5;">RECEIVED 16 APR 2018</div> </div>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">STAGE</th> <th colspan="2" style="text-align: left;">DATE / PIC</th> </tr> </thead> <tbody> <tr><td colspan="2">Non-Reporting Itr (1st):</td><td></td><td></td></tr> <tr><td colspan="2">Non-Reporting Itr (2nd):</td><td></td><td></td></tr> <tr><td colspan="2">Non-Reporting Itr (Final):</td><td></td><td></td></tr> <tr><td colspan="2">Notification Itr (if non-pickup):</td><td></td><td></td></tr> <tr><td colspan="2">Call OI:</td><td></td><td></td></tr> <tr><td colspan="2">After call Itr to OI:</td><td></td><td></td></tr> <tr><td colspan="2">Documentation Check List:</td><td>Handler</td><td>Typist</td></tr> <tr><td colspan="2">Notification Itr (if non-pickup):</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">After call Itr to OI:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Authorisation To Act:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Release Voucher:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Final Repair Bill:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Car Rental Invoice:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Towing Invoice:</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">LTA / GIA :</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Medical Bill:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">PIR:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Mandate/Reject Instruction:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">LOD:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Payment Breakdown Form:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Post-Repair Photos:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">Others:</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>		STAGE		DATE / PIC		Non-Reporting Itr (1st):				Non-Reporting Itr (2nd):				Non-Reporting Itr (Final):				Notification Itr (if non-pickup):				Call OI:				After call Itr to OI:				Documentation Check List:		Handler	Typist	Notification Itr (if non-pickup):		<input type="checkbox"/>	<input type="checkbox"/>	After call Itr 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 type="checkbox"/>	<input type="checkbox"/>	PIR:		<input type="checkbox"/>	<input type="checkbox"/>	Mandate/Reject Instruction:		<input type="checkbox"/>	<input type="checkbox"/>	LOD:		<input 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"/>																																																																																																			
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Payee 3: (Strike if N.A.)	\$S		Name 3:																																																																																																																																																																																															

Surveyor: Kalvin

REF:

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated cost: \_\_\_\_\_

OD / TP / RS / 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 Vch: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est Repair: 2 days Res: Yes or No

Lum Sum: P/P % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHA 7827K

Yr Regn: 18 Jan 2015

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai

CC: 1.6L

Colour: Blue

A/C: Ins Red / Std / NI / NA

Sp. Reading: 261104

T/Radio: Ins Red / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHLD44MF40 69 603

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / R/Rim or

Tyre Size: F: 205/60R16

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or W&H

Front

Rear

R/Bal. 2 mm

R/Bal. 2 mm

L/Bal. 2 mm

L/Bal. 2 mm

D.O.A. 19/2/18

D.O.I. 21/2/18

Survey held at COHE (107-21)

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

Rear. o/s

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
23/2/18	Check P/P \$1216.18 / 2 days.
	\$1216.18 (Red: \$1195.40 / 50%)

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS \$ \_\_\_\_\_

Photo \_\_\_\_\_

Other \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)

☐

: Interview (\$ \_\_\_\_\_)

☐

: Tech. Invs (\$ \_\_\_\_\_)

☐

: \_\_\_\_\_ (\$ \_\_\_\_\_)

Report Format: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# 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/AIG18003360/K1ub3

78 SHENTON WAY #08-16  
CHARTIS BUILDING  
SINGAPORE 079120

Date : 22-02-2018



Code : AIG

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJY 3221J	Veh. Inspected	SHA 7827K
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	22/02/2018

## 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	19/02/2018	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.
--

OMFORTDELGRO  
ENGINEERING

member of COMFORTDELGRO

ALG

ComfortDeiGro Engineering Pte Ltd  
215 Bras Basah Road Singapore 170211  
Mobile: +65 6562 4260 Fax: +65 6215 9750  
Workshops  
57 Loring Drive Singapore 107629 24 Sekong Loop Singapore 758136  
363 Sin Ming Drive Singapore 510711 7 Sungei Middle Way Singapore 728739  
45 Panaman Road Singapore 660488 6 Telford Avenue 1 Singapore 680027

Date/Time: 20.02.2018 17:45 Page : 1

Job: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO305118310

OWNER COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (P)	REGN NO. SHA7827K MAKE HYUNDAI MODEL I-40 YR OF MANU 18.06.2015 CHASSIS CODE KMHLE41UMFU069603	MILEAGE FUEL E 1/2 F DATE/TIME IN 20.02.2018 10:30 TARGET DATE COMPLETION DATE/TIME
--	---	---

Accident Date: 19.02.2018  
NATURE: 3P 19.02.18

JOB DESCRIPTION

/NO LABOR CODE DESCRIPTION

WORKED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: SHA7827K LIMITS Vehicle No.: SHA7827K

Signature/Date Name of Service Advisor Date

# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305118310  
Date : 22/02/18

## FINALIZATION FORM

To : LKK Fax :  
Attn : KALVIN ANG  
Vehicle Reg No. : SHA7827K Date of Accident : 19-Feb-18

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

- The repair job shall bill to: AIG ASIA --- SJY3221J
- The finalized amount shall be:
  - Spare Parts after List discount \$816.18
  - Labour Charges: \$400.00
  - Total for Part-By-Part Repair Cost** **\$1,216.18**
  - Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20% \_\_\_\_\_  
**Final Lumpsum Repair cost** \_\_\_\_\_
- Estimated normal period for repairs: 2 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 : LIM T S  
Name : LIM T S  
Tel : 62148398  
Fax : 65468156

Signature : KALVIN  
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:

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

JOB NO : 305118310  
REGN NO : SHA7827K  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 18.06.2015  
DATE/TIME IN : 20.02.2018 10:30  
ACCIDENT DATE : 19.02.2018

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0103-0579-G	REAR BUMPER	1	603.60	20.00	482.88
0002 04-01-0101-0111-G	REAR BUMPER CLIPS	10 L	22.00	20.00	17.60
0003 04-01-0103-0738-G	REAR BUMPER UNDER COVER	1	225.00	20.00	180.00
0004 09-01-9999-0068-A	REVERSE SENSOR	1	135.70		135.70

SUB-TOTAL : 816.18

## JOB NATURE

0000 L	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	180.00
0002 L	R/I REVERSE SENSOR	20.00

SUB-TOTAL : 400.00

TOTAL : 1,216.18

  
MVA NAME & SIGNATURE  
DATE :

\_\_\_\_\_  
SURVEYOR NAME & SIGNATURE  
DATE : \_\_\_\_\_

AUTHORISED : YES / NO

## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHA 7827K

MAKE :

MODEL : HYUNDAI i40

DATE 21/2/2018

LKK - Kalvin

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>Refurbish</i>			\$ 603.60
	Rear Bumper Reinforcement <i>Xsu</i>			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH) <i>Xsu</i>		\$ 180.00	\$ 360.00
	Rear Bumper Side Bracket <i>Xsu</i>			\$ 49.00
	Rear Bumper Clips <i>new</i>			\$ 22.00
	Rear Bumper Sponge <i>Xsu</i>			\$ 143.40
	Rear Bumper Under Cover <i>cut</i>			\$ 225.00
	<b>SUB TOTAL</b>			<b>\$ 1,907.35</b>
	<b>LESS 20%</b>			<b>\$ 381.47</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,525.88</b>
	Rear Bumper Reverse Sensor <i>shorted</i>			\$ 135.70
				<b>\$ 135.70</b>
	<b>Labour Charge</b>			<b>200</b>
	Panel Beating			\$ <del>380.00</del>
	Spray Painting Charge			\$ <del>200.00</del> <i>180</i>
	Wiring Charge			\$ <del>50.00</del> <i>X 44</i>
	R/Refix Reverse Sensor			\$ <del>120.00</del> <i>20</i>
	<b>TOTAL LABOUR</b>			<b>\$ 750.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,411.58</b>

Kalvin LKK  
 21/2/18 1035 hr.  
 2 Days  
 PIP  
 Before Paint photo

LKK Auto Consultants hereby notify the Repairer of the following:

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

Acknowledged by Repairer  
 Signature:  
 Date:

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

**COMFORTDELGRO ENGINEERING PTE LTD**  
**REPAIR ESTIMATE\***

ALG ASIACP/P) TS

VEHICLE NO : SHA 7827K

DATE 21/2/2018

MAKE :

LKK - Calvin

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
	<b>SUB TOTAL</b>			<b>\$ 1,907.35</b>
	<b>LESS 20%</b>			<b>\$ 381.47</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,525.88</b>
	Rear Bumper Reverse Sensor ✓			\$ 135.70 <b>Nett</b>
				<b>\$ 135.70</b>
	<b>Labour Charge</b>			<b>200</b>
	Panel Beating			\$ <del>380.00</del>
	Spray Painting Charge			\$ <del>200.00</del> 180
	Wiring Charge			\$ <del>50.00</del> X
	R/Refix Reverse Sensor			\$ <del>120.00</del> 20
	<b>TOTAL LABOUR</b>			<b>\$ 750.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,411.58</b>
	<p>Kalvin LKK</p> <p>M 21/2/18 1035 hr.</p> <p>2 days</p> <p>PIP</p> <p>Before Paint photo</p>			
	<p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>To resurvey before/after spray painting</li> <li>To display damaged part(s) during resurvey</li> <li>Parts prices are subject to confirmation</li> <li>Third party survey is on a "Without Prejudice" basis</li> <li>No illegal modification(s) is allowed</li> <li>Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company</li> </ul> <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p>			
	This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.			



up.

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****i 40 SHA7827K , SJY 3221J  
SOPHIA ROAD IN FRONT PEACE CENTRE****ON 19-Feb-18 21:10**

I / We

**AW KIM SENG**(Hirer) NRIC No.: **S1245730H**

and/or

**ONG SIAH HUA**(Relief) NRIC No.: **S1667652G**

Taxi Number

**SHA7827K**

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

**20-Feb-2018**Name of Hirer  
Hirer NRIC**AW KIM SENG  
S1245730H**

Signature :



Address

**85 WHAMPOA DRIVE #10-276  
320085**

Contact No.

**94518888**Name of Relief  
Relief NRIC**ONG SIAH HUA  
S1667652G**

Signature :



Address

**75 WHAMPOA DRIVE #09-366  
320075**

Contact No.

**98787146**

**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 S\$ 1,301.31 (Repair Cost), S\$ 412.50 (Loss of Use/Rental), S\$ 7.49 (Disbursement) for vehicle no. SHA 7827K that was damaged pursuant to the accident which occurred on 19/02/2018 (date) along SOPHIA ROAD IN FRONT PEACE CENTRE (location) involving vehicle no/s SJY 3221J. This is pursuant to the inspection conducted on 21/02/2018 (date) at "the workshop".

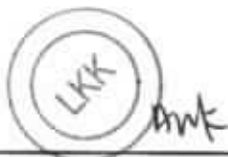
We/I confirm that we/I are/am authorized by the owner COMFORT TRANSPORTATION PTE LTD ("the third party claimant") of vehicle no. SHA 7827K make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose 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 7827K (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 16 APR 2018 (month) 20 (year)



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

#08-15 78 SHENTON WAY, CHARTIS BUILD  
 SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
 SHA7827K

INV. NO/DATE  
 91358496 23.02.2018

MAKE  
 HYUNDAI

JOB NO.  
 305118310

MODEL  
 I-40

ODOMETER READING

DATE OF REG  
 18.06.2015

DATE/TIME IN  
 20.02.2018 10:30

CHASSIS CODE  
 KMHLB41UMFU069603

Description : 3P 19.02.18

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0579	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
0003	04-01-0103-0738	I40VC COVER-RR BUMPER LWR	1	225.00	20.00	180.00
0004	09-01-9999-0068	HYUNDAI REVERSE SENSOR AS	1	135.70	0.00	135.70
SUB-TOTAL				:		816.18

### JOB NATURE

0001	L	PANEL BEATING	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	180.00	180.00
0003	L	R/I REVERSE SENSOR	20.00	20.00
SUB-TOTAL			:	400.00

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	91358496	1,301.31	

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.CHARTIS BUILD  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHA7827K

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
18.06.2015

CHASSIS CODE  
KMHLB41UMFU069603

INV. NO/DATE  
91358496 23.02.2018

JOB NO.  
305118310

ODOMETER READING

DATE/TIME IN  
20.02.2018 10:30

Items total		1,216.18
Add GST @	7.000 %	85.13
Invoice amount		1,301.31

Issued by : CHEWBEELING 23.02.2018 14:45:42  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

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	91358496	1,301.31	

Our Ref: CT18020654

Date: 23 February 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON	19/02/2018 @ 21:10 hrs
ALONG	SOPHIA ROAD IN FRONT PEACE CENTRE
INVOLVING	SJY 3221J

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 **SHA7827K** (the "Taxi"). The Taxi was hired to **AW KIM SENG IC NO S1245730H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS 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  
Assistant Manager, Fleet Safety

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

0  
resting

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO					FROM	TO
333	0545	0810	16/2/18	Ony	259471	376	1910	0600
231	2115	0610	17/2/18	THOMAS	259777	306	0700	1830
87	0700	1800	17/2/18	Ony	266071	294	2110	0615
304	2000	0530	19/2/18	THOMAS	260811	69	0700	1600
253	0700	1830	19/2/18	Ony	261012	203	2040	0330
230	2100	0525	20/2					
238	0700	1800	20/2	Accident			1030	—
315	2025	0540	20/2	repair	LY		—	1045
282	0700	1700						
328	1755	0555						
303	0800	1700						

SHA 7827K

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJY3221J	19 Feb 2018 / 21:10:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

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

Smt 7P2712



## ...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	20 Feb 2018 <a href="#">Edit Reg</a>		21 Feb 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$1,216.18</b> <a href="#">Edit Estimates</a>	<b>S\$1,216.18</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by adjuster]
Insured:	Lim Kheng Wah (Lin Qinghua), ID: 573087441	
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R	
Vehicle Reg. No.:	SHA7827K	Date of Loss: 19/02/2018 21:00 - :59 [32 Months and 1 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 8995622214SG	Policy/Cover Note No.: 2100364316 (Comprehensive)
Vehicle Reg. No. (Insured):	SJY3221J	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 Ler, Bernard-JQ] BernardJiQian.Ler@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 05/03/2018]	

ASSOCIATED MAIL RECEIVED	<a href="#">View All</a>	<a href="#">Compose Case Mail</a>
There are no mail for this case.		

ALL ASSOCIATED TASKS		<a href="#">View All</a>	<a href="#">Search Tasks</a>	<a href="#">Create New Task</a>	<a href="#">Complete</a>				
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SHA7827K (8995622214SG)  
[SJY3221J]  
TP  
COMFORT TRANSPORTATION PTE LTD  
Feb 19 2018 9:00PM  
[Lim Kheng Wah (Lin Qinghua)]  
ComfortDelGro Engineering Pte Ltd

<a href="#">Upload Documents</a> <a href="#">Upload Photos</a> <a href="#">Compose New Letter</a> <a href="#">Upload Video</a> <a href="#">Upload Audio</a>			<b>View</b> <a href="#">View in Browser</a>	
<b>Letters/Correspondences</b>			1 per page <input type="checkbox"/>	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	(Draft)	Third Party Express Settlement - Payment Breakdown		Edit
<b>Assessment Reports</b>			1 per page <input type="checkbox"/>	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	23/02/18 16:00	<b>Accident Statement</b> <small>From: SC - Reg. No: SJY3221J, Claimant: LIM KHENG WAH</small>		Load HTML
<b>Photos/Images</b>			3 per page <input type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	23/02/18 08:49	General View		Load JPG
2	23/02/18 08:49	General View		Load JPG
3	23/02/18 08:49	General View		Load JPG
4	23/02/18 08:49	General View		Load JPG
5	23/02/18 08:49	General View		Load JPG
6	23/02/18 08:49	General View		Load JPG
7	23/02/18 08:49	General View		Load JPG
8	23/02/18 08:49	General View		Load JPG
9	23/02/18 08:49	General View		Load JPG
10	23/02/18 08:49	General View		Load JPG
11	23/02/18 08:49	General View		Load JPG
12	23/02/18 08:49	General View		Load JPG
13	23/02/18 08:49	General View		Load JPG
14	23/02/18 08:49	General View		Load JPG
15	23/02/18 08:49	General View		Load JPG
16	23/02/18 08:49	General View		Load JPG
17	23/02/18 08:49	General View		Load JPG
18	23/02/18 08:49	General View		Load JPG
19	23/02/18 08:49	General View		Load JPG
20	23/02/18 08:49	General View		Load JPG
21	23/02/18 09:02	Reinspection Photo		Load JPG
22	23/02/18 09:02	Reinspection Photo		Load JPG
23	23/02/18 09:02	Reinspection Photo		Load JPG
<b>Documentation</b>			1 per page <input type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	22/02/18 18:46	TP ESTIMATE- MARKED		Load PDF
2	22/02/18 18:46	TP GIA REPORT		Load PDF
3	17/04/18 13:52	WORKSHOP INVOICE		Load PDF
4	17/04/18 13:52	AUTHORISATION TO ACT FORM		Load PDF
5	17/04/18 13:52	Release Voucher		Load PDF

Letters/Correspondences			1 per page	<input type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail Print
6	17/04/18 13:52	RENTAL RECEIPT		Load PDF
7	17/04/18 13:52	LTA SEARCH		Load PDF
8	17/04/18 13:52	LETTER TO OI		Load PDF

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	Reset	Save	Print
There are no document checklists configured.			

**Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**

**Show Remarks To:** ☐ Handling Insurer  
Note: Remarks are private unless you show it to other parties.

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM \_\_\_\_\_

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SJY3221J (Insd veh)	Model:	HYUNDAI I40 1.7 D (A)
	SHA7827K (TP veh)		
Date of Accident:	19/02/2018		

Global Sum Settlement	:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Repair Estimate	:	\$	2,580.39
Final Repair Cost	:	\$	1,301.31
Loss of Use	:	\$	125.00
Rental (if any)	:	\$	287.50
LTA / GIA Search Fee	:	\$	7.49
Others:	:	\$	0.00
	:	\$	
Final Settlement Sum	:	\$	1,721.30

2.50 days at \$50.00 per day  
2.50 days

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: 27

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	:	\$ 1,721.30
2)		:	\$
3)		:	\$
4)		:	\$
5)		:	\$

JOANNE LEE KHANG MIN

17 Apr  
2018

LKK Auto Consultants Pte Ltd

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/AIG18003360/K1UB3Q2

Date: 17/04/2018

## REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100364316  
 Claimant Vehicle No: SHA7827K Insured Vehicle No: SJY3221J  
 Date of Loss: 19/02/2018 Nature of Claim: TP Claim No: 8995622214SG

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SHA7827K  
 Make & Model: HYUNDAI I40, 1.7 D (A) Engine No: D4FDFU504526  
 Reg. Date: 18/06/2015 (Man. Year: 2015) Chassis No: KMHLB41UMFU069603  
 Colour: Blue Odometer: 261104 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:

## 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	1,661.58	816.18	845.40	50.88
Miscellaneous Items	0.00	0.00	0.00	
Labour	750.00	400.00	350.00	46.67
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>2,411.58</b>	<b>1,216.18</b>	<b>1,195.40</b>	<b>49.57</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>168.81</b>	<b>85.13</b>	<b>83.68</b>	<b>49.57</b>
<b>Nett Amount (S\$)</b>	<b>2,580.39</b>	<b>1,301.31</b>	<b>1,279.08</b>	<b>49.57</b>
<b>+ Loss of Use (2.5 x S\$50.00/day) (S\$)</b>		<b>125.00</b>		
<b>+ Car Rental (2.5 x S\$115.00/day) (S\$)</b>		<b>287.50</b>		
<b>+ Doc/Search Fee (S\$)</b>		<b>7.49</b>		
<b>Nett Liability (S\$)</b>		<b>1,721.30</b>		

## INSPECTION

Date of Assignment: 21/02/2018  
 Date Inspected: 21/02/2018 Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang)  
 59 Loyang Drive  
 Singapore 508969

Estimated Period of Repair: 2.0 days

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**Adjuster:** KALVIN ANG WEI KUN**Manager:** THIN THIN HLAING

*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		*REAR BUMPER	Deformed	603.60 FL	*603.60 FL
2	1		*REAR BUMPER REINFORCEMENT	Serviceable	504.35 FL	*- FL
3	2		*REAR BUMPER REINFORCEMENT BRACKET (LH/RH)	Serviceable	360.00 FL	*- FL
4	1		*REAR BUMPER SIDE BRACKET	Serviceable	49.00 FL	*- FL
5	1		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
6	1		*REAR BUMPER SPONGE	Serviceable	143.40 FL	*- FL
7	1		*REAR BUMPER UNDER COVER	Cut	225.00 FL	*225.00 FL
8	1		*REAR BUMPER REVERSE SENSOR	Shorted	135.70 FS	*135.70 FS

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

<b>Sub Total (S\$)</b>	<b>2,043.05</b>	<b>986.30</b>
<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	<b>381.47</b>	<b>170.12</b>
<b>Total Parts (S\$)</b>	<b>1,661.58</b>	<b>816.18</b>

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
<b>Labour Items</b>				
1	PANEL BEATING	New	380.00	200.00
2	SPRAY PAINTING CHARGE	New	200.00	180.00
3	WIRING CHARGE	New	50.00	0.00
4	R/REFIX REVERSE SENSOR	New	120.00	20.00
Gross Labour Cost (\$\$)			<b>750.00</b>	<b>400.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >