

Our Ref : T 0218 / SH 8605K / JW(st)
Your ref : _____
Date : 26-Feb-18

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

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

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

Workshops

Braddell
205 Braddell Road
Singapore 579701

Loyang
59 Loyang Drive
Singapore 508969

Sin Ming
393 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 609286

Ubi
320 Ubi Road 3
Singapore 408649

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

Attn : Motor Claims Department
Dear Sir

WITHOUT PREJUDICE

**ACCIDENT INVOLVING OUR TAXI SH 8605K YOUR INSURED GBC4630R
AND OTHER GBD7640L ON 19.02.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 8605K 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 GBC4630R we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,284.00
2	<u>3</u> days Loss of Rental @ \$ 115.00 per day	\$ 345.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	-
Sub Total :		\$ 1,636.49

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ 80.00 per day	\$ 240.00
Total Claims:		\$ 1,876.49

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 : GBC4630R
c) GIA / Police report/s of : SH 8605K
d) Letter of authority from owner / hirer / operator
() Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
(X) Photograph/s of Accident Scene (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Jim Wong

Deputy Manager

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

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

A member of

COMFORTDELGRO





Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC3/EQI18003397/K1es3

09 MAR 2018

KNT ENGINEERING PTE LTD
10 KAKI BUKIT AVE 4
#08-66 PREMIER @ KAKI BUKIT
SINGAPORE 415874

Dear Sir/Madam,

ACCIDENT INVOLVING GBC 4630R / SH 8605K / OTHERS ON 19/02/2018

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

You are aware that your No-Claim Discount (NCD – if applicable) will be with held for the time being. Pending for final allocation of liability in settlement by our principal EQ INSURANCE COMPANY LIMITED.

Please call us if you have further queries.

Yours faithfully,

Asher

Case Handler

DID: 6841 6051

FAX: 6741 4108

Email: ashersng@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGi 40 SH8605K , GBC 4630 R , GBD7640L
YISHUN AVE 1 TWDS AVE 7

ON 19-Feb-18 17:40

I / We

LOH YORK TIP

(Hirer) NRIC No.: S0171167I

and/or

(Relief) NRIC No.:

Taxi Number

SH8605K

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

23-Feb-2018

Name of Hirer

LOH YORK TIP

Hirer NRIC

S0171167I

Signature :



Address

231 LORONG 8 TOA PAYOH #09-192
310231

Contact No.

96735832

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Mainline + 65 6383 8290 Facsimile + 65 6280 9755

Workshops

Singapore 408640
COMPANY REG. NO.: 199506048W

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GST REG. NO. M2-8921817-3

TAX INVOICE

8010325

EO INSURANCE COMPANY LIMITED

#17-00 5 MAXWELL ROAD TOWER BLOCK
SINGAPORE 069110

CONTACT NO: 62239433

VEHICLE NO
SH 8605K

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
03.06.2014

CHASSIS CODE
KMHLB41UMEU053921

INV. NO/DATE
91358499 23.02.2018

JOB NO.
305118278

ODOMETER READING

JOB TYPE

Description : 3P 19.02.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,200.00
Add GST @ 7.000 %	84.00
Total Invoice amount	1,284.00

Issued by : CHEWBEELENG 23.02.2018 14:56:54
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

[illegible]

Our Ref: CT18020653

Date: 23 February 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 19/02/2018 @ 17:40 hrs
ALONG YISHUN AVE 1 TWDS AVE 7
INVOLVING GBC 4630 R, GBD7640L

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 **SH8605K** (the "Taxi"). The Taxi was hired to **LOH YORK TIP IC NO S0171167I** 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 **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.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GBC4630R	19 Feb 2018 / 17:40:00	Successful	E04	EQ INSURANCE COMPANY LTD

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