| COMFORTDELGRO |
|---------------|
| ENGINEERING   |

Workshops

Sin Ming 363 Sin Ming Drive Singapore 575717

Pandan 45 Pandan Road Singapore 609286

Sungei Kadut

| 0 B / T 00/01 01/400000 / 11/4/4  |                         | (     | Сомі     | FOI |
|---|-------------------------|-------|----------|-----|
| Our Ref : T 0318/ SHA6389P /JW(st)  |                         |       | F        | NO  |
| Your Ref :<br>Date : 13-Mar-18  |                         |       |          | d   |
| 10 110  | CDGE Taxi Claims De     | tq.   | Comfort  |     |
| ECICS LIMITED   | 59 Loyang Drive 4th Fli |       | 205 Bra  |     |
| #10-03  | Singapore 508969        |       |          | E   |
| 7 Temasek Boulevard   |                         |       |          |     |
| Singapore 038987  |                         |       |          |     |
| Attn : Motor Claims Department WITHOUT PREJU  | DICE                    |       |          |     |
|   | I CL                    |       |          |     |
| Dear Sir  | 10160121010200101000    |       | 1922     |     |
| ACCIDENT INVOLVING OUR TAXI SHA6389P  |                         |       |          |     |
| SJY 979B OTHER  | ON .                    | 05    | 5.03.17  |     |
| As the accident was caused by the negligent act of your we are submitting these claim for your consideration on |                         |       |          |     |
|   | benan or the cia        | intan | 13.      |     |
| TAXI OWNER'S CLAIM  |                         |       | 963.00   |     |
| 1 Cost of Repair<br>2 2 days Loss of Rental @ \$ 119.28   | ner day                 | \$    | 238.56   |     |
| 3 Survey Report Fees (Surveyed by M/s   |                         | S     | -        | 501 |
| 4 GIA / LTA Search Fees   | 10                      | \$    | 7.49     |     |
| 5 GIA / Police Report Fees  | 10°                     | \$    | *        |     |
| 6 Towing / Medical / Transporation Fees   | 10                      | \$    | -        |     |
| HIDEOG OF AM  | Sub Total :             | \$    | 1,209.05 | _   |
| HIRER'S CLAIM 7 2 days Loss of Income @ \$ 80.00  | per day                 | \$    | 160.00   |     |
| days coss of modific @ _0 00.00   | Total Claims :          |       | 1,369.05 | -   |
|   | Total Olalilia .        | Ψ     | 1,000.00 | •   |
| We enclosed herewith the following documents to supp  |                         |       |          |     |
| a) Original repair bill and photocopied photographs :   | 9                       | pcs   |          |     |
| b) LTA search slip/s of : SJY 979B  | -                       |       |          |     |

c) GIA / Police report/s of :

SHA6389P

d) Letter of authority from owner / hirer / operator

( ) Certificate of Insurance ( X ) Rental Rate letter ( ) Witness statement/s

( X ) Photograph/s of Accident Scene

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

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

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

Workshops

24 Senoko Łoop Singapore 758156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 7687

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

COMPANY REG. NO.: 199506048W

Page: 1

8010581

ECICS LIMITED

10-03 7 Temasek Boulevard SINGAPORE 038987

Description: 3P 05.03.18

CONTACT NO: 63374779

VEHCLE NO SHA6389P

NV. NO/DATR 91361688 12.03.2018

MAKR HYUNDAT JOB NO. 305122220

MODEL. I - 40 ODOMETER READING

DATK OF RRG 03.06.2014

CHASSIS CODE

JOB TYPE

KMHI.B41.UMKU053958

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt Add GST @ 7

900.00

7.000

63.00

Total Invoice amount

963.00

Issued by Repair Ty

KATHERINETAN 12.03.2018 12:10:38

CLSO/57/

Payment Type/Term : /Credit 30 days

- I) WHILST TAKING ALL BEADOMARLE PRECAUTIONS AGAINST FREE TRAFF ON ACCOUNTRY, ONCYMON THE CONTACT MESPONSIBILITY FOR CARS OF OTHER PROPERTIES BELONGING TO CUSTOMES, AND VERICLES ARE STREET, JULY TO OWNERS RISK.
- CUSTOMERS SHALL INSPECT THEIR VENCLES WANTED ATELY DECK OFLIGETY AND SHALL NOTICE IN VINCING TO THE COMPANY OF ARY COMPLIANTS, OTHERWISE, THE YEARS, ERVING OF CHILD AND THE COMPANY OF ARY COMPLIANTS. IN GOOD ORDER.
- 3) INTEREST OF 196 PER MONTH WILL BE CHARGED ON A DAY TO DAY BASHON EPOPET OF ANY AMOUNT BY COMPANY BY THE DESTONER AND NEXT PAID ON THE DUE DATE OF DESIGNATIVE, AS THE SECRET SEASON DECIDED PERIOD OF DEPAULT.
- 4) PLEASE EXAMINE THIS INVOICE INDIRECTIFUL EPOINT RECEIPT AND ADVISE THE TOWN AND A MOVERNOON, ON A PROPERTY OF A PROPERTY OF THE COMPANY DOOR OF THE COMPANY OF THE COMPANY DOOR FROM THE COMPANY OF THE COMPANY DOOR THE THE COMPANY OF THE COMPANY DOOR THE THE COMPANY OF THE COMPANY OF THE COMPANY DOOR THE THE COMPANY OF THE COMPANY OF THE COMPANY DOOR THE THE COMPANY OF THE COMPANY OF THE COMPANY DOOR THE THE COMPANY DOOR THE THE COMPANY OF THE COMPANY CORRECT AND BINDING.

## ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. BANK/CHQ No. **AMOUNT** 

Kindly note that no receipt shall be issued unless requested.

**CUSTOMER'S COPY** 

Our Ref: CT18030133

Date: 12 March 2018



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

**ACCIDENT ON** 

05/03/2018 @ 12:15 hrs

ALONG

SLIP RD FROM RAFFLES BOULEVARD TWDS

TEMASEK AVE(BEACH RD DIRECTION)

**INVOLVING** 

SJY979B

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 SHA6389P (the "Taxi"). The Taxi was hired to LIM WEE BENG IC NO S1233111H a registered hirer-operator of Comfort Transportation Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$119.28 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.

| DATE     | NAME OF DRIVER | MILEAGE READING | MILEAGE<br>TRAVELLED<br>(KM) | HOURS OPERATED (TIME DATE FROM TO | ш | NAME OF DRIVER |   |
|----------|----------------|-----------------|------------------------------|-----------------------------------|---|----------------|---|
| 81/20/20 | Kwang R. C. F  | 30882           | 822                          | 63                                |   |                | - |
| 3/3      | Ling           | 30718           | 375                          | 0630 Ma                           |   |                | - |
| 02/03/18 | Kwang Kic 7    | 31436           | 23/                          | 17.26 02.56                       |   |                | - |
| 4/3      | Ling 7         | 3 1656          | 276                          | 0630 1705                         |   |                | - |
| 1/203/18 | huang K.C 7    | 3/924           | 897                          | 17.20 02.2!                       |   |                | - |
| 2/3      | 7 M17          | 32053           | 957                          | 0600 120                          |   |                |   |
|          | Aca            |                 |                              |                                   |   |                | - |
| 05050    | Magazin M      |                 | 7                            | ( ) DSG                           |   |                |   |
| 00000    | 19-00          |                 | S                            | 645 -                             |   |                | - |
|          |                |                 |                              |                                   |   |                | - |
|          |                |                 |                              |                                   |   |                | - |

## **LETTER OF AUTHORISATION**

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA6389P , SJY979B

ON 05-Mar-18 12:15

SLIP RD FROM RAFFLES BOULEVARD TWDS TEMASEK AVE(BEACH RD DIRE...

I / We

LIM WEE BENG

(Hirer) NRIC No.: **S1233111H** 

and/or

(Relief) NRIC No.:

Taxi Number

SHA6389P

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

05-Mar-2018

Name of Hirer

LIM WEE BENG

Hirer NRIC

S1233111H

Signature:

Address

**16 HOUGANG AVENUE 3 #20-129** 

530016

Contact No.

96392889

Enquire Vehicle Insurer

Vehicle No. Incident Date/Time

**Search Status** 

**Insurance Company Code** 

**Insurance Company Name** 

SJY979B

05 Mar 2018 / 12:15:00

Successful

E06

**ECICS LIMITED** 

Previous

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