

CASE OWNER:

TE

CC 4, Asm 18004402, Cima3

LKK  
IDAC

33677

Surveyor:

Ank

DOA:

ASSIGNMENT

Date / Time:

Registered in Merimen:

6/3/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

STX 9819B

Name of Insured:

Lee Long Meng

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A: 2/3/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Rospidah Bte Tukman

Driver Tel No.:

97991144

(V/L: YES / NO)

Claim No.:

S8M00A48

Policy No.:

GA090763

Make / Model:

BMW X1

Place of Accident:

Serina Rd

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

Insured Liability: % Final ? Yes / No

SHC 1544E



INSRS:

WSP:

Tel:

Liability:

RMKS:

C0670003



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)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

N2L

If NO or B 28, Ass. Lin:

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(\$

x

days)

Loss of Income (LOI):

S\$

(\$

x

days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/Independent)

Legal Cost

S\$

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350

Surge Unit Kalvin REF:

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estima #/Cost: \_\_\_\_\_  
 OD / T / P / S / TPRES / OD RES / EVA / INV / MV  
 To Insp # Vehicle No: \_\_\_\_\_  
 at Work #/p.m.s: \_\_\_\_\_  
 at: \_\_\_\_\_  
 insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claims No: \_\_\_\_\_  
 Sum in \$: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

(Policy/Condition)

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

NIS	O/S

Est. or Market Value: \_\_\_\_\_

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

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

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

Veh No: SHC 1544E Yr Regn: 13 Dec 2017  
 Type: M/Car / M/Cycle / Bus / Van / Lorry / T/O / Prime Mover /  
 Truck / Trailer or  
 Make: Hyundai 240 cc 1685  
 Colour: Blue A/C: Insured / Std / NI / NA  
 Sp. Reading: 34877 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: KMHLC0414AH4 098635  
 Gen. Cond: Good / P / Poor / Burnt  
 Steering: Ino der / Jammed / Leaked / Burnt or  
 Brakes: Ino der / Jammed / Leaked / Burnt or  
 Modl: NI / S/Rim / ST O / Rim or  
 Tyre Size: F: 205 / 60 R16  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Haruk  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal: 2 mm R/Bal: 2 mm  
 L/Bal: 2 mm L/Bal: 2 mm  
 D.O.A: 2/3/0 D.O.I: 2/3/0  
 Survey held at: CDHE (Loyang)  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
N/S Frnt.  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
<u>1/3/18</u>	<u>CHD PIP 1790.40/2A.</u>
	<u>(Red: \$ 1665.76 / 48%)</u>

Date/Time, File Pass to?

☐ : Prel. Report

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

1) \_\_\_\_\_  
 Date/Time, File Return to?

☐ : Final Report

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

2) \_\_\_\_\_

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

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

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

☐ B + Rd. \$ \_\_\_\_\_




# 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				
AXA INSURANCE PTE LTD			Ref : CC4/ASM18004402/K1ma3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811			Date : 07-03-2018	
			Code : ASM	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SJX 9819B	Veh. Inspected	SHC 1544E	
Policy No.		Coverage (\$)	0.00	
Claim No.	S8M00A48	Excess (\$)	0.00	
Assign From		Assign Date	07/03/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	02/03/2018	Inspection Date	07/03/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: S8M00A48  
Our ref: CC4/ASM18004402/K1ma3

Date: 08.03.2018

The Motor Claims Department  
M/s AXA INSURANCE PTE LTD

Dear Sir/Madam,

**PRELIMINARY ADVICE OF VEHICLE NO.**

**SHC 1544E**

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 07.03.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

Workshop Estimate Amount	: S\$	3,456.16
Revised Estimate Amount	: S\$	1,790.40
"Check" Items Amount	: S\$	-
Total (Including Check Items)	: S\$	1,790.40

Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:  
The vehicle sustained damages at the  
N/S Front Portion



Comments/Present Status:  
Damages Consistent  
Estimated normal period for repairs: 2.0 days

Yours faithfully,

KALVIN ANG  
Licensed Appraiser

## REPAIR ESTIMATE\*

DATE 6/3/2018 12:25

VEHICLE NO : SHC 1544E

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>X repair</i>			\$ 1,052.20
	Front Bumper Sponge <i>X su</i>			\$ 142.20
	Front Bumper Bracket (LH) <i>X su</i>			\$ 24.60
	Headlamp (LH) <i>cut</i>			\$ 1,388.00
	Frt Wheel Hub Cap, LH <i>X su</i>			\$ 150.70
	<i>Front (LH) fender X repair</i>			\$ 2,757.70
	SUB TOTAL			\$ 551.54
	LESS 20%			\$ 2,206.16
	DISCOUNTED TOTAL			
	Labour Charge			
	Panel Beating- Repair Frt LH Fender			\$ <del>800.00</del> <i>300</i>
	Spray Painting Charge			\$ <del>400.00</del> <i>260</i>
	Wiring Charge			\$ <del>50.00</del> <i>20</i>
	TOTAL LABOUR			\$ 1,250.00
	ESTIMATE TOTAL			\$ 3,456.16

Kalin 11/11/18

7/3/18 11:56h

2 Days

PIP

After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

- To resolve before/after spray painting
- To display damaged part during resolve
- Parts price are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modifications allowed

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.

Signature:

Date:

REPAIR ESTIMATE\*

VEHICLE NO : SHC 1544E

DATE 6/3/2018 12:25

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>X repair</i>			\$ 1,052.20
	Front Bumper Sponge <i>x</i>			\$ 142.20
	Front Bumper Bracket (LH) <i>x</i>			\$ 24.60
	Headlamp (LH) <i>/</i>			\$ 1,388.00
	Frt Wheel Hub Cap, LH <i>x</i>			\$ 150.70
	<i>Front (LH) fender x repair</i>			
	SUB TOTAL			\$ 2,757.70
	LESS 20%			\$ 551.54
	DISCOUNTED TOTAL			\$ 2,206.16
	<b>Labour Charge</b>			
	Panel Beating- Repair Frt LH Fender			\$ <del>800.00</del> <i>200</i>
	Spray Painting Charge			\$ <del>400.00</del> <i>260</i>
	Wiring Charge			\$ <del>50.00</del> <i>20</i>
	TOTAL LABOUR			\$ 1,250.00
	ESTIMATE TOTAL			\$ 3,456.16
<p><i>Kalvin LKK</i></p> <p><i>7/3/18 11:55hr</i></p> <p><i>2 Dps</i></p> <p><i>PIP</i></p> <p><i>After Repair photo</i></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 parts 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 modifications is allowed</li> <li>Supplies and materials must be well tagged and</li> </ul>				
<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.</p>				

Signature:

Date:

nam: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO: 305122570

OMER	COMFORT TRANSPORTATION PTE LTD	REGN NO	SHC1544E	MILEAGE
IS	7010045	MAKE	HYUNDAI	FUEL
OMER NO	383 SIN MING DRIVE	MODEL	1-40	E 1/2 F
IESS	Singapore SINGAPORE 575717	YR OF MANU	13.12.2017	DATE/TIME IN
(R)	65508755	CHASSIS CODE	KMHLB41UMHU098635	TARGET DATE
(P)				COMPLETION DATE/TIME
JUNT CARD NO.				

ccident Date: 02.03.2018  
ATURE: 3P 02.03.18/C

JOB DESCRIPTION

/NO LABOR CODE DESCRIPTION

CKED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

ledgement Slip

Exit Pass

No.: SHC1544E JU AXA

Vehicle No.: SHC1544E

if Service Advisor Signature/Date Name of Service Advisor Date

eturned to Service Reception upon collection To be kept by Security Guard

## COMFORTDELGRO ENGINEERING

Our Job Ref No : 305122570  
Date : 08/03/18

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

### FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHC1544E

Date of Accident : 02/03/18

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

1. The repair job shall bill to: AXA — SJX9819B  
###
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \$1,110.40
  - (b) Labour Charges ### \$680.00  
**Total for Part-By-Part Repair Cost** \$1,790.40
  - (c) 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 : [Signature]  
Name : JUMANI  
Tel : 6214 8315  
Fax : 65468156

Signature : [Signature]  
Name : Kalvin  
Date : 9/3/18

### 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  
REPAIR ESTIMATE

Date: 08.03.2018  
Time: 15:51:35  
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 : 305122570  
REGN NO : SHC1544E  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 13.12.2017  
DATE/TIME IN : 06.03.2018 09:45  
ACCIDENT DATE : 02.03.2018

JOB / PARTS DESCRIPTION QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0781-A 140V2 LAMP ASSY-HEAD LH# 1 1,388.00 20.00 1,110.40

SUB-TOTAL : 1,110.40

JOB NATURE

0000 L PANEL BEATING- FRT. 300.00  
0001 23-502 SPRAYPAINT ON AFFECTED AREA 360.00  
0002 17-01 CHECK ALL LIGHTING 20.00

SUB-TOTAL : 680.00

TOTAL : 1,790.40

MVA NAME & SIGNATURE  
DATE:

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE:

Service Address

...

Primary Contact/Insured

LEE KONG MENG@ DEAN LEE KONG MENG  
106 PUNGGOL WALK, #17-14, 828793, Singapore  
  
APPLE@DONMOTORING.COM.SG

Claim Handler

TAY Ernest  
6568804835  
ernest.tay@axa.com.sg  
  
Additional Instructions

- Messages
- Invoices
- History
- Documents
- Assessment
- Metrics
- Notes

New Message

Our Ref : T 0318/ SHC1544E /WT(st)

Your Ref :

Date : 04-Apr-18

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: 199303449Y

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 728791

**Yishun**  
Yishun Industrial Park A  
Singapore 768732

**AXA Insurance Pte Ltd**  
8 Shenton Way  
#24-01, AXA Tower  
Singapore 068811

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC1544E YOUR INSURED SJX9819B  
AND OTHER \_\_\_\_\_ ON 02.03.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SHC1544E 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 SJX9819B we are submitting these claim for your consideration on behalf of the claimants.

#### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,915.73
2	<u>3</u> days Loss of Rental @ \$ 117.00 per day	\$ 351.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	GIA / LTA Search Fee	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
<b>Sub Total :</b>		<b>\$ 2,274.22</b>

#### HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ 80.00 per days	\$ 240.00
<b>Total Claims:</b>		<b>\$ 2,514.22</b>

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

- Original repair bill and photocopies of photographs 4 pcs
- LTA search slip/s of : SJX9819B
- GIA / Police report/s of : SHC1544E
- Letter of authority from owner / hirer / operator
  - ( X ) Photocopies of Accident Scene Photo/s ( ) Traffic Compound ( ) PIR
  - ( ) Witness statement/s ( x ) Rental Rate letter ( 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

*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.

A member of

**COMFORTDELGRO**



8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO  
SHC1544K

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
13.12.2017

CHASSIS CODE  
KMHLB41UMHU098635

TRV. NO/DATE  
91364356 27.03.2018

JOB NO.  
305122570

OILMETER READING

DATE/TIME IN  
06.03.2018 09:45

Description : 3P 02.03.18

S/No	Part No.	Qty	Unit Price	Disc	Net
------	----------	-----	------------	------	-----

### PART REQUISITION

0001	04-01-0103-0781	140V2 LAMP ASSY-HEAD LH#	1	1,388.00	20.00	1,110.40
SUB-TOTAL:				:		1,110.40

### JOB NATURE

0001	I	PANEL HEATING- FRT.	300.00		300.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	360.00		360.00
0003	17-01	CHECK ALL LIGHTING	20.00		20.00
SUB-TOTAL:				:	680.00

1. WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR VOLUNTARY DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARE OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE KEPT AT OWNERS' RISK.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY FURNISH NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY VEHICLE OR VEHICLES DELIVERED TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) PLUS THE PERIOD OF DEFAULT.

4. PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL DEEM THIS INVOICE BE CORRECT AND BINDING.

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.
8010010	91364356	1,915.73	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 2

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO  
SHC1544R

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
13.12.2017

CHASSIS CODE  
KMHL841UMHU098635

INV. NO/DATE  
91364356 27.03.2018

JOB NO.  
305122570

ODOMETER READING

DATE/TIME IN  
06.03.2018 09:45

Items total		1,790.40
Add GST @	7.000 %	125.33
Invoice amount		1,915.73

Issued by : KATHKRINETAN 27.03.2018 08:51:15  
Repair type : CLSO/57/57  
Payment type/Term: /Credit 30 days

1. WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARB OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED IN OWNERS' RISK.  
2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 3 DAYS FROM SUCH DELIVERY THE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE THE VEHICLE WILL BE TREATED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY ACCOUNT DUE AND OWEING TO THE COMPANY BY THE CUSTOMER AND NOT END ON THE DUE DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE INVOICE FOR THE PERIOD OF DEFAULT.  
4. PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DISCREPANCY OR DISCREPANCY WITHIN 15 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THE INVOICE AS CORRECT AND BINDING.

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.
8010010	91364356	1,915.73	

Our Ref: CT18030086

Date: 12 March 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      02/03/2018    @   14:05 hrs  
ALONG                                466 HOUGANG AVE 8 C/P DRIVEWAY  
INVOLVING                        SJX9819B

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 **SHC1544E** (the "Taxi"). The Taxi was hired to **CHAN SIEW KHONG IC NO S2503138E** 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.

SHC 1544E

READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING		HOURS OPERATED (TIME)	
		FROM	TO					FROM	TO
507									
729	222	1750	0524	06/03/18	Verdon	14	11.20	0945	-
744	015	0842	0915	08/03/18	Repar			1300	-
841	097	1048	1125						
090	249	1740	0520						
190	50	0805	1043						
436	296	1128	137						
536	090	1051	175						
864	328	1710	0520						
897	32	0745	0938						
		0938							
898		1244							

## LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING** **I 40 SHC1544E , SJX9819B**  
**ALONG** **466 HOUGANG AVE 8****ON 02-Mar-18 14:05****I / We** **CHAN SIEW KHONG** (Hirer) NRIC No.: **S2503138E**

and/or (Relief) NRIC No.:

Taxi Number **SHC1544E**

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 **03-Mar-2018**Name of Hirer **CHAN SIEW KHONG**  
Hirer NRIC **S2503138E**

Signature :

Address **685 HOUGANG STREET 61 #05-154**  
**530685**Contact No. **81272669**



3/3/2018

Insurance Particulars Enquiry By Agents Detail

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJX9819B	02 Mar 2018 / 14:05:00	Successful	A12	AXA INSURANCE PTE LTD

Previous

OK

SNC 1544 E

## Bevan Lim (LKK Auto)

---

**From:** Bevan Lim (LKK Auto)  
**Sent:** Tuesday, 12 June 2018 4:48 PM  
**To:** 'William Tan Thoo Seng'; 'Catherine Koh Mui Gek'  
**Cc:** Vic (LKKAuto); Admin A  
**Subject:** Your Ref: TBA Our Ref: CC4/ASM18004402/K1ma3 ACCIDENT INVOLVING SJX 9819B AND SHC 1544E ON 02/03/2018  
**Attachments:** Video - Accident (8).mp4

Your Ref: TBA  
Our Ref: CC4/ASM18004402/K1ma3

Dear Sir/Madam,

ACCIDENT INVOLVING SJX 9819B AND SHC 1544E ON 02/03/2018

We refer to the above matter.

Based on footage, Your Client was travelling against the Traffic flow to overtake the vehicles queuing. As your client make the turn and collided with our insured vehicle. Your client shouldn't overtake against the traffic flow which resulted in the collision.

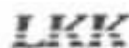
As such we have our principal instruction to deny liability and we are unable to look into your client claim.

Best Regards,  
Bevan Lim | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6749-4274 | email: [BevanLim@lkkauto.com](mailto:BevanLim@lkkauto.com) | fax: 6741-4108

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



Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*



## Re:RE: REJECT TP CLAIM

Type

 Information

Message

Based on TP video, please reject claim as TP travelled against traffic flow. Thanks.

Reply

## Thin Thin (LKKAUTO)

---

**From:** Thin Thin (LKKAUTO)  
**Sent:** Friday, 7 December 2018 1:29 PM  
**To:** William Tan Thoo Seng  
**Cc:** Vic (LKKAUTO); Olivia Lau (LKKAUTO); KKLau; Hsiao Tong (LKKAUTO)  
**Subject:** RE: Your Ref: TBA Our Ref: CC4/ASM18004402/K1ma3 ACCIDENT INVOLVING SJX 9819B AND SHC 1544E ON 02/03/2018  
**Attachments:** Video - Accident (8).mp4

Your Ref: SHC 1544E  
Our Ref: CC4/ASM18004402/K1ma3

Dear Sir/Madam,

### ACCIDENT INVOLVING SJX 9819B AND SHC 1544E ON 02/03/2018

We refer to the above matter.

Based on footage, Your Client was travelling against the Traffic flow to overtake the vehicles queuing. As your client make the turn and collided with our insured vehicle. Your client shouldn't overtake against the traffic flow which resulted in the collision.

As such we have our principal instruction to deny liability and we are unable to look into your client claim.

Best Regards,

**Thin Thin Hlaing** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-2360 | email: [thinthin@lkkauto.com](mailto:thinthin@lkkauto.com) | fax: 6741-4108

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



# 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				
AXA INSURANCE PTE LTD		Ref : CC4/ASM18004402/K1aa3q2		
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:ERNEST TAY		Date : 17-12-2018 Code : ASM		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SJX 9819B	Veh. Inspected	SHC 1544E	
Policy No.	GA098263	Coverage (\$)	0.00	
Claim No.	S8M00A48	Excess (\$)	0.00	
Assign From		Assign Date	06/03/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	KMHLB41UMHU098635	Colour	BLUE	
Odometer	34897	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/60 R16	HANKOOK	7 mm	
L/H Front Tyre	205/60 R16	HANKOOK	7 mm	
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	02/03/2018	Inspection Date	07/03/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		

**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

Page No.:1 of 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1544E**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	FRONT BUMPER COVER (CONSISTENT)	TO REPAIR SEE LABOUR	1,052.20	-
1	FRONT BUMPER SPONGE (CONSISTENT)	SERVICEABLE	142.20	-
1	FRONT BUMPER BRACKET (LH)(CONSISTENT)	SERVICEABLE	24.60	-
1	HEADLAMP (LH)(CONSISTENT)	CUT	1,388.00	1,388.00
1	FRT WHEEL HUB CAP,LH(CONSISTENT)	SERVICEABLE	150.70	-
1	FRONT (LH) FENDER (NPA)(CONSISTENT)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-551.54	-277.60
			2,206.16	1,110.40
	<b><u>LABOUR</u></b>			
	PANEL BEATING -REPAIR FRT LH FENDER .INCLUSIVE OF THE REPAIR OF FRONT BUMPER COVER AND FRONT (LH) FENDER.		800.00	300.00
	SPRAY PAINTING CHARGE.		400.00	360.00
	WIRING CHARGE.		50.00	20.00
			1,250.00	680.00
	<b>GRAND TOTAL</b>		<b>3,456.16</b>	<b>1,790.40</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>1,790.40</b>

Report Ref No. CC4/ASM18004402/K1aa3q2

**KALVIN ANG WEI KUN**

Automotive Assessor / Investigator

**HO LEONG CHUAN**

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.



