

INS. CASE OWNER:

UR  
CC 3/AIG1800 5732, R1 1035P

LKK:  
IDAC:

Surveyor: Rasul

ASSIGNMENT  
DOI: 20/3/18

Date / Time: 20/3/18  
Registered in Merimen: 20/3/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SLG 1035P  
Name of Insured : URP  
Insured Tel No. :  
Excess Sec II : \$5  
D.O.A: 22/3/18

Claim No. :  
Policy No. : 90004578  
Make / Model : HONDA  
Place of Accident : LUNEH ST

Is driver the owner? (YES/NO) Nature of Accident:  
If NO, Driver Name / Age: WEE KIANG SIM  
Driver Tel No.: (V/L-YES/NO)

OI GIA REPORT: YES/NO ; TP GIA REPORT: YES/NO  
Insured Liability: % Final? Yes/No

SHA 7720J



INSRS: WSP: WEE  
Tel: W  
Liability:  
RMKS:



INSRS: WSP:  
Tel:  
Liability:  
RMKS:



INSRS: WSP:  
Tel:  
Liability:  
RMKS:



INSRS: WSP:  
Tel:  
Liability:  
RMKS:

Date/Time	STAGE	DATE / PIC
21/4/18	Non-Reporting ltr (1st):	
20/3/18	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	NA
	Notification ltr (if non-pickup):	
16-5-18	Call OI:	JUY 4-4-18
	After call ltr to OI:	
	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup)	<input checked="" type="checkbox"/> <input type="checkbox"/>
	After call ltr 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 checked="" type="checkbox"/> <input type="checkbox"/>
	PIR:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	LOD	<input checked="" 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"/>

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: \$5 ( days) Reduction: % Email  Call

FINAL SETTLEMENT Date/Time: 10-5-18 Confirm with: CECILIA Email  Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 106 15 If NO or B 28, Ass. Lia:

Repair Cost: GST \$5 910.16 OI FILTERED LANE

Loss of Rental (LOR): \$5 460 ( 4 days) X115 ✓ BY: JOY

Loss of Use (LOU): \$5 ( \$ x days) JIB

Loss of Income (LOI): \$5 200 ( \$ 50 x 4 days) 16-5-18

LOR only  LOU only  LOR + LOU  LOR + LOI  [Tick only one]

GIA/LTA Search \$5 7.49

Medical: \$5 X 1) Claim status: Normal/Reject/Private Settle

Disbursement: \$5 X (e.g. Tow/Independent) 2) Report Format:

Legal Cost \$5 X 3) Survey fee:

Total: \$5 1,577.59 Global Sum \$5: 1,575.XX

FINAL PAYMENT Date/Time: Confirm with: Email  Call

Payee 1: \$5 1,575.XX Name 1: COMFORTDELGRO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.) \$5 X Name 2: X

Payee 3: (Strike if N.A.) \$5 X Name 3: X





## 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/LCR18005732/R1jb3	
78 SHENTON WAY #08-16 CHARTIS BUILDINGSINGAPORE 079120		Date : 28-03-2018	
		Code : LCR	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SLG 1035P	Veh. Inspected	SHA 7720J
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	28/03/2018
<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	23/03/2018	Inspection Date	26/03/2018
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.			

Team: ARC Repair TP(CLSO)1

**JOB CARD** Sales Order:

JC NO:305128033

CUSTOMER NAME: COMFORT TRANSPORTATION PTE LTD CUSTOMER NO: 7010045 ADDRESS: 383 SIN MING DRIVE Singapore SINGAPORE 575717 TEL (R): 65508755 (O): (P): SCOUNT CARD NO.	REGN NO: SHA7720J	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL: I-40	DATE/TIME IN 23.03.2018 11:55
	YR OF MANU: 02.04.2015	TARGET DATE
	CHASSIS CODE: KMHLE41UMFU067865	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 23.03.2018  
 NATURE: 3P 23.03.2018

S/NO	LABOR CODE	DESCRIPTION
		AKH - taxi Right front damage LKK/

CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: **SHA7720J**  
 Name: **LARRY**

Vehicle No.: **SHA7720J**

*Larry Ng*

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305128033

Date : 28. Mar. 2018

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : RASUL

Vehicle Reg No. : SHA7720J

Date of Accident: 23.03.2018

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

1. The repair job shall bill to: AIG SLG1035P
2. The finalized amount shall be:
 

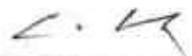
(a) Spare Parts after List discount	\$120.56
(b) Labour Charges	\$730.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$850.56</b>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: _____	
Final Lumpsum Repair cost	

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.

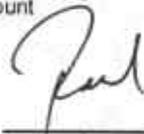
We confirm the estimates and finalized amount

Signature : 

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : Paul

Date : 30/04/18

### 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:

\_\_\_\_\_

\_\_\_\_\_

COMFORTDELGRO ENGINEERING PTE LTD

Date: 28.03.2018

REPAIR ESTIMATE

Time: 12:30:09

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 : 305128033  
REGN NO : SHA7720J  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 02.04.2015  
DATE/TIME IN : 23.03.2018 11:55  
ACCIDENT DATE : 23.03.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0658-G I40VC CAP ASSY-WHEEL HUB 1 150.70 20.00 120.56

SUB-TOTAL : 120.56

JOB NATURE

0000 L PANEL BEATING 200.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 440.00

0002 20-00 TUFF COAT ON AFFECTED PARTS. 30.00

0003 20-08 ADJUST FRONT WHEEL ALIGNMENT 60.00

SUB-TOTAL : 730.00

TOTAL : 850.56

\_\_\_\_\_  
MVA NAME & SIGNATURE  
DATE:

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

AUTHORISED : YES / NO

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHA 7720J

DATE 3/24/2018 10:04

MAKE :

MODEL : HYUNDAI i40

DOT: 23.03.18

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Door Mirror (RH)			\$ 980.50
	Front Wheel Hub Cap (RH)		150.70	\$ 150.70
	<b>SUB TOTAL</b>		20%	\$ 1,131.20
	<b>LESS 20%</b>		120.56	\$ 226.24
	<b>DISCOUNTED TOTAL</b>			\$ 904.96
	<b>Labour Charge</b>			
	Panel Beating			\$ 250.00
	Spray Painting Charge (Mirror/Fender/Bumper)		730	\$ 600.00
	Tuff Kote			\$ 50.00
	FRT Wheel Alignment			\$ 80.00
	<b>TOTAL LABOUR</b>			\$ 980.00
	<b>ESTIMATE TOTAL</b>			\$ 1,884.96

R  
SUA

200  
440  
30  
60

120.56  
730.00  
850.56  
Days

Resul  
Hp 2001218  
(2) \$ days  
P/P  
26/03/18 @ 1210  
Reg 64 pakt

LKK Auto Consultants hence 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:

Larry Ng

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.

Our Ref : T 0318 / SHA7720J /CL(st)  
 Your Ref: \_\_\_\_\_  
 Date : 3-May-18

**AIG ASIA PACIFIC INSURANCE PTE LTD**  
**CHARTIS Building**  
**78 Shenton Way**  
**#07-16**  
**Singapore 079120**

CDGE Taxi Claims Dept  
 59 Loyang Drive 4th Floor  
 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: 19250649W

**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 408549

**Senoko**  
 24 Senoko Loop  
 Singapore 758156

**Sungei Kadut**  
 7 Sungei Kadut Way  
 Singapore 728791

**Defu**  
 6 Defu Avenue 1  
 Singapore 539537

**Yishun**  
 501 Yishun Industrial Park A  
 Singapore 766732

**Attn : Motor Claims Department WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA7720J YOUR INSURED SLG1035P  
 AND OTHER \_\_\_\_\_ ON 23.03.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA7720J 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 SLG1035P we are submitting these claim for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$	910.10
2	<u>5</u> days Loss of Rental @ \$ 115.00 per day	\$	575.00
3	Survey Report Fees ( <i>Surveyed by M/s LKK</i> )	\$	-
4	GIA / LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transportation	\$	-
<b>Sub Total :</b>		\$	<u>1,492.59</u>

**HIRER'S CLAIM**

7	<u>5</u> days Loss of Income @ \$ 80.00 per days	\$	400.00
<b>Total Claims :</b>		\$	<u>1,892.59</u>

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

- a) Original repair bill and photocopies of photographs : 9 pcs.
- b) LTA search slip/s of : SLG1035P
- c) GIA / Police report/s of : SHA7720J
- d) Letter of authority from owner / hirer / operator
  - ( X ) Photograph/s of Accident Scene ( ) Certificate of Insurance
  - ( ) Witness statement/s ( 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

*Cecilia Lee*

Executive

CDGE Claims Department

Tel : 6214 8354 Fax: 6214 1843 Email : ceciliale@sparkcarcare.com

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

A member of

**COMFORTDELGRO**



SHA 77203

DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER
		3	4	5		FROM	TO		
19/03/2018	M. NIZAM	3	4	9	1630	0400			
20-3-18	Babjan	3	5	0	292	4:09 AM			
20/03/2018	M. NIZAM	3	5	0	230	0540			
21-3-18	Babjan	3	5	0	384	5-47 AM	4:38 PM		
21/03/2018	M. NIZAM	3	5	0	200	1730	0520		
22-3-18	Babjan	3	5	1	289	5-28 AM	4:13 PM		
22-3-18	M. NIZAM	3	5	1	404				
23-3-18	Babjan	3	5	1	106	6:00 AM	1:30 PM		
23.03.18	ACCIDENT				174	1155	-		
27.03.18	REPAIR				007	1315	-		

4- DOA - 23 MAR 18 (FRI)  
 3- (SAT)  
 25 (SUN)

1 - 001 (MON)  
 2 - 27 (TUE) OUT 1315

**Joy Irene (LKKAuto)**

---

**From:** Joy Irene (LKKAuto)  
**Sent:** Wednesday, 4 April 2018 5:32 PM  
**To:** 'Eileen, May Hwee Yap'  
**Cc:** Vivian Lau (LKKAuto); Admin A  
**Subject:** ACCIDENT INVOLVING SLG 1035P (LCRF) & SHA 7720J ON 23/03/2018(09:00)  
ALONG CHURCH ST./CECIL ST.

04 April 2018

**LION CITY RENTALS PTE LTD**

Policy Holder

LKK : CC6/LCR18005732/R1jb3

Dear Sir/Madam,

**ACCIDENT INVOLVING SLG 1035P (LCRF) & SHA 7720J ON 23/03/2018(09:00) ALONG CHURCH ST./CECIL ST.**

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

We have received a claim from SHA 7720J against your insurance policy.

Based on the information on hand, we are of the opinion that we cannot be absolved from liability. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

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.

Please call us if you have further queries.

Best Regards,  
Joy Irene | Case Handler  
LKK Auto Consultants Pte Ltd  
DID: 6841-2409 | email: [joyirene@lkkauto.com](mailto:joyirene@lkkauto.com) | Fax: 6741-4108  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****SONATA SHA7720J , SLG1035P  
T JUNCTION OF CECIL ST AND CHURCH ST****ON 23-Mar-18 09:00**

I / We

**BABJAN B BACHIK**

(Hirer) NRIC No.:

**S0038964A**

and/or

(Relief) NRIC No.:

Taxi Number

**SHA7720J**

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-Mar-2018**

Name of Hirer

**BABJAN B BACHIK**

Hirer NRIC

**S0038964A**

Signature :



Address

**110 PASIR RIS STREET 11 #04-615  
510110**

Contact No.

**90178526**

**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\$1,575.00 (Global Sum) for vehicle no. SHA 7720J that was damaged pursuant to the accident which occurred on 23/03/2018 (date) along CHURCH STREET (location) involving vehicle no/s SLG 1035P. This is pursuant to the inspection conducted on 26/03/2018 (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 7720J 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 7720J (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 10 (day) of 05 (month) 2018 (year)



Signed by appointed surveyor

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
205 BRADDELL ROAD  
SINGAPORE 579701

Signed by "the workshop" (with chop)

"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."

Please forward your cheque made payable to:-  
COMFORTDELGRO ENGINEERING PTE LTD

**Workshops**

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  
SHA7720J

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
02.04.2015

CHASSIS CODE  
KMHLB41UMFU067865

INV. NO/DATE  
91370270 30.04.2018

JOB NO.  
305128033

ODOMETER READING

DATE/TIME IN  
23.03.2018 11:55

Items total		850.56
Add GST @	7.000 %	59.54
Invoice amount		910.10

Issued by : CHEWBEELENG 30.04.2018 14:59:48  
Repair type : CL80/57/57  
Payment Type/Term: /Credit 30 days

- 1) WITHOUT TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT CUSTOMER'S RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE 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 AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 25 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 15 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS 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.
8010004	91370270	910.10	

Our Ref: CT18030718

Date: 30 April 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                    23/03/2018 @ 09:00 hrs  
ALONG                            T JUNCTION OF CECIL ST AND CHURCH ST  
INVOLVING                    SLG1035P

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 **SHA7720J** (the "Taxi"). The Taxi was hired to **BABJAN B BACHIK IC NO S0038964A** 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.

### Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLG1035P	23 Mar 2018 / 09:00:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

Previous

OK

SHA7720J

### ...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	29 Mar 2018 <a href="#">Edit Reg</a>		26 Mar 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$850.56</b> <a href="#">Edit Estimates</a>	<b>S\$850.56</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured: <b>LCRF Pte Ltd</b> , Co. Reg. No.: NA									
Main Claimant: <b>COMFORT TRANSPORTATION PTE LTD</b> , Co. Reg. No.: 199303821R									
Vehicle Reg. No.: <b>SHA7720J</b>		Date of Loss: 23/03/2018 09:00 - :59	[35 Months and 21 Days From LTA Reg Date (Man Yr)]						
Claim Type: <b>TP / 9894010829SG</b>		Policy/Cover Note No.:	(Comprehensive)						
Vehicle Reg. No. (Insured): <b>SLG1035P</b>		Policy No. (Claimant):	D-18088936MFSH						
		Excess:							
Repairer: <b>ComfortDelGro Engineering Pte Ltd (Loyang)</b> 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300									
Handling Insurer: <b>AIG Asia Pacific Insurance Pte. Ltd. (Express)</b> - Tel: 65-6419-3000 ... [Handled by <b>Ng, Hai-Chuan</b> ] Hai-Chuan.Ng@aig.com									
Claimant's Insurer: <b>MS First Capital Insurance Ltd (HQ)</b> - Tel: 62222311									
Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>MOHD RASUL</b> ] ... [Final Rpt due 09/04/2018]									
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
<b>Due Date</b>	<b>Priority</b>	<b>Type</b>	<b>Task Group</b>	<b>Subject</b>	<b>Handler</b>	<b>Assigned By</b>	<b>Completed On</b>	<b>Created On</b>	<b>Done?</b>
No results.									

### Claim Documents

**\*SHA7720J (9894010829SG)**  
**[SLG1035P]**  
**TP**  
**COMFORT TRANSPORTATION PTE LTD**  
**Mar 23 2018 9:00AM**  
**[LCRF Pte Ltd]**  
**ComfortDelGro Engineering Pte Ltd**

Upload Documents		Upload Photos		Compose New Letter		Upload Video		Upload Audio		View <span style="border: 1px solid black; padding: 2px;">View in Browser</span>
<b>Letters/Correspondences</b>										1 per page <input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print	
1	(Draft)	Third Party Express Settlement - Payment Breakdown							Edit	
<b>Documentation</b>										1 per page <input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print	
1	28/03/18 17:55	TP ESTIMATE- MARKED							Load PDF	
2	28/03/18 17:55	TP GIA REPORT							Load PDF	
3	04/04/18 17:34	LETTER TO LCRF							Load PDF	
4	23/05/18 09:21	WORKSHOP INVOICE							Load PDF	
5	23/05/18 09:21	AUTHORISATION TO ACT FORM							Load PDF	
6	23/05/18 09:21	Release Voucher							Load PDF	
7	23/05/18 09:21	RENTAL RECEIPT							Load PDF	
8	23/05/18 09:21	LTA SEARCH							Load PDF	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)						Thumbnail	Print	
1	29/03/18 14:42	OI GIA Report							Load PDF	

### Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>			
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM \_\_\_\_\_

**THIRD PARTY EXPRESS SETTLEMENT  
(PAYMENT BREAKDOWN)**

<b>Vehicle No:</b>	SLG1035P (Insd veh)	<b>Model:</b>	HYUNDAI I40 1.7 D (A)
	SHA7720J (TP veh)		
<b>Date of Accident:</b>	23/03/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	2,016.91
Final Repair Cost	:	\$	1,575.00
Loss of Use	:	\$	4.00 days at \$50.00 per day
Rental (if any)	:	\$	4 days
LTA / GIA Search Fee	:	\$	
Others:	:	\$	
	:	\$	
Final Settlement Sum (Global Sum)	:	\$	1,575.00
<b>Is Third Party Workshop GIA Registered?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
<b>A) For Non GIA Registered Workshop:</b>		Agreed Liability _____ (%)	
<b>B) For GIA Registered Workshop:</b>		BOLA Applicable: Yes/ <del>No</del> BOLA Scenario No: _____	
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	:	\$ 1,575.00
2)		:	\$
3)		:	\$
4)		:	\$
5)		:	\$

JOANNE LEE KHANG MIN

LKK Auto Consultants Pte Ltd

23 May  
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))

## 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/LCR18005732/R1JB3Q2  
Date: 23/05/2018

#### REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd.	Policy No:		
<b>Claimant Vehicle No :</b> SHA7720J	<b>Insured Vehicle No :</b>	SLG1035P	
Date of Loss: 23/03/2018	Nature of Claim:	TP	Claim No: 9894010829SG

#### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	<b>SHA7720J</b>	Engine No:	D4FDEU493782
Make & Model:	HYUNDAI I40, 1.7 D (A)	Chassis No:	KMHLB41UMFU067865
Reg. Date:	02/04/2015 (Man. Year: 2015)	Odometer:	351644 km
Colour:	Blue		
Engine Capacity:	1685 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	<b>Market Value/New Car Price</b>		

#### 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:	Hankook 5 mm	Rear Left Side:	Hankook 5 mm
Front Right Side:	Hankook 5 mm	Rear Right Side:	Hankook 5 mm

*The above values represent the remaining tyre treads depth*

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	904.96	120.56	784.40	86.68
Miscellaneous Items	0.00	0.00	0.00	
Labour	980.00	730.00	250.00	25.51
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>1,884.96</b>	<b>850.56</b>	<b>1,034.40</b>	<b>54.88</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>131.95</b>	<b>59.54</b>	<b>72.41</b>	<b>54.88</b>
<b>Nett Amount (S\$)</b>	<b>2,016.91</b>	<b>910.10</b>	<b>1,106.81</b>	<b>54.88</b>
<b>+ Loss of Use (4.0 x S\$50.00/day) (S\$)</b>		200.00		
<b>+ Car Rental (4.0 x S\$115.00/day) (S\$)</b>		460.00		
<b>+ Doc/Search Fee (S\$)</b>		7.49		
<b>Nett Liability (S\$)</b>		<b>1,577.59</b>		
<b>Global Sum Settlement (S\$)</b>		<b>1,575.00</b>		

#### INSPECTION

Date of Assignment:	26/03/2018	
Date Inspected:	26/03/2018 Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang)

59 Loyang Drive  
Singapore 508969

Estimated Period of Repair: 2.0 days

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**Adjuster:** MOHD RASUL

**Manager:** Joy Irene Bascao

*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		*FRONT DOOR MIRROR (RH)	Repair	980.50 FL	*- FL	
2	1		*FRONT WHEEL HUB CAP (RH)	Scratched	150.70 FL	*150.70 FL	
					<b>Sub Total (\$\$)</b>	<b>1,131.20</b>	<b>150.70</b>
					- List Item Discount on L Items 20.00/20.00% (\$\$)	226.24	30.14
					<b>Total Parts (\$\$)</b>	<b>904.96</b>	<b>120.56</b>

F=Franchise part. L=ListItemDisc.

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
<u>Labour Items</u>				
1	PANEL BEATING	New	250.00	200.00
2	SPRAY PAINTING CHARGE (MIRROR/FENDER/BUMPER)	New	600.00	440.00
3	TUFF KOTE	New	50.00	30.00
4	FRT WHEEL ALIGNMENT	New	80.00	60.00
Gross Labour Cost (S\$)			<b>980.00</b>	<b>730.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >