

# COMFORTDELGRO ENGINEERING

Our Ref : T 0318 / SHA4405P /WT(st)  
 Your Ref : \_\_\_\_\_  
 Date : 04-May-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  
 Facsimilie +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

**CHINA INSURANCE CO LTD**  
**3 ANSON ROAD**  
**#16-00 SPRINGLEAF TOWER**  
**SINGAPORE 079909**

**Attn : Motor Claims Department WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA4405P YOUR INSURED SKL2840K  
 AND OTHER \_\_\_\_\_ ON 23.03.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA4405P 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 SKL2840K we are submitting these claims for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$	3,141.61
2	<u>5.5</u> days Loss of Rental @ \$ <u>125.40</u> per day	\$	689.70
3	Survey Report Fees (Surveyed by M/s LKK)	\$	-
4	LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transporation Fees	\$	-
<b>Sub Total :</b>		<b>\$</b>	<b>3,838.80</b>

**HIRER'S CLAIM**

7	<u>5.5</u> days Loss of Income @ \$ <u>80.00</u> per days	\$	440.00
<b>Total Claims :</b>		<b>\$</b>	<b>4,278.80</b>

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

- a) Original repair bill and photocopies of photographs : 6 pcs.
- b) LTA search slip/s of : SKL2840K
- c) GIA / Police report/s of : SHA4405P
- d) Letter of authority from owner / hirer / operator

- ( ) Traffic Compound ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance
- ( X ) Photograph/s of Accident Scen ( 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  
*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**



**Asher Sng (LKKAuto)**

---

**From:** Asher Sng (LKKAuto)  
**Sent:** Thursday, 26 April 2018 12:41 PM  
**To:** 'VICTOR@REXREF.COM'  
**Subject:** ACCIDENT INVOLVING SKL 2840K AND SHA 4405P ON 23/03/2018

**Our Ref: CC3/CTI18005823/R1ea3**

26 APRIL 2018

**LEE CHUEN NAM**

Dear Sir/Madam,

**ACCIDENT INVOLVING SKL 2840K AND SHA 4405P ON 23/03/2018**

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

Kindly note that we have reviewed this matter and would like to advise that you and/or your authorized driver may not be absolved from blame for this accident.

If you have evidence/information to prove that we should not settle the third party claim, kindly let us have them in writing within the next 10 day, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please call us if you have further queries.

Yours faithfully,

Asher  
Case Handler  
DID: 6841 6051  
FAX: 6741 4108  
Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

c.c. *China Taiping Insurance (Singapore) Pte Ltd*  
*(Motor Claims Dept)*

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING TOYOTA PRIUS SHA4405P , SKL2840K ON 23-Mar-18 12:50  
ALONG MIDVIEW CITY OPEN AIR CAR PARK , SIN MING LANE**

I / We **TAN BOON HUAT** (Hirer) NRIC No.: **S1554877J**

and/or **QUEK YEOW MENG** (Relief) NRIC No.: **S1534619A**

Taxi Number **SHA4405P**

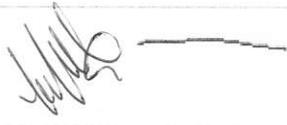
hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

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 **TAN BOON HUAT**  
Hirer NRIC **S1554877J**

Signature :



Address **240 COMPASSVALE WALK #06-574  
540240**

Contact No. **91317500**

Name of Relief **QUEK YEOW MENG**  
Relief NRIC **S1534619A**

Signature :



Address **201B COMPASSVALE DRIVE 14-529  
542201**

Contact No. **97458328**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3038101700 Claim No : SNM18D01619C02/0/LKKDS

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,060.65
DOLLARS TWO THOUSAND SIXTY AND CENTS SIXTY FIVE ONLY

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHA 4405P
Insured Vehicle No. : SKL 2840K

Date of Loss : 23/03/2018
Place of Accident : MIDVIEW CITY OPEN AIR CAR PARK SIN MING LANE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : LEE CHUEN NAM
Driver Name : LIAU MAY LANG (LIAO MEILAN)

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Table with 2 columns: Description and Amount. Rows include General Damages, Cost of Repair/Excess, Loss of Use/Rental/Earning, GIA/Police Reports/Investigation Results/Search Fees, Medical Reports/Expenses, Survey Fees/P.T. Fees, and Cost including Disbursement. Total amount is S\$ 2,060.65.

Claimant Name : COMFORT TRANSPORTATION PTE LTD NRIC No :

Signature : [Handwritten Signature] Date : 13.7.18

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

"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: 1

8010012

CHINA TAIPING INSURANCE CO(S) PTE L  
SPRINGLEAF TOWER

3 ANSON ROAD #16-00  
SINGAPORE SG 079909

CONTACT NO: 62222366

Description : 3P 23.03.18

VEHICLE NO  
SHA4405P

INV. NO/DATE  
91369739 27.04.2018

MAKE  
TOYOTA

JOB NO.  
305128260

MODEL  
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG  
10.08.2017

DATE/TIME IN  
23.03.2018 17:05

CHASSIS CODE  
JTDKB3FU903563173

S/No	Part No.	Qty	Unit Price	%Disc	Net
<b>PART REQUISITION</b>					
0001	04-01-0302-0573	1	922.50	25.00	691.87
0002	04-01-0302-2934	1	198.50	25.00	148.87
0003	04-01-0302-2297	1	86.50	25.00	64.87
0004	04-01-0302-2979	1	44.50	25.00	33.37
0005	04-01-0302-0592	1	1,227.00	25.00	920.25
0006	03-01-0302-2057	1	175.80	25.00	131.85
0007	28-01-0103-0003 (I40)FRT DOOR LOGO SONATA	1	75.00	0.00	75.00
SUB-TOTAL				:	2,066.08

**JOB NATURE**

0001 L PANEL BEATING 400.00 400.00

- WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY OR NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 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 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- 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 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.
8010012	91369739	3,141.61	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 2

8010012

CHINA TAIPING INSURANCE CO(S) PTE L  
SPRINGLEAF TOWER

3 ANSON ROAD #16-00  
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO  
SHA4405P

INV. NO/DATE  
91369739 27.04.2018

MAKE  
TOYOTA

JOB NO.  
305128260

MODEL  
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG  
10.08.2017

DATE/TIME IN  
23.03.2018 17:05

CHASSIS CODE  
JTDKKB3FU903563173

S/No	Part No.		Qty	Unit Price	%Disc	Net
0002	23-502	SPRAYPAINT ON AFFECTED AREA		360.00		360.00
0003	20-00	TUFF COAT ON AFFECTED PARTS.		50.00		50.00
0004	L	TRANSFER OF DOOR		60.00		60.00
SUB-TOTAL :						870.00

Items total	2,936.08
Add GST @ 7.000 %	205.53
Invoice amount	3,141.61

Issued by : CHEWBEELENG 27.04.2018 11:21:16  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

- WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- 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.
- 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 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- 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 TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Singapore 579701

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91369739	3,141.61	

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT18030735

Date: 12 April 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                    23/03/2018    @   12:50 hrs  
ALONG                            MIDVIEW CITY OPEN AIR CAR PARK , SIN MING LANE  
INVOLVING                      SKL2840K

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 **SHA4405P** (the "Taxi"). The Taxi was hired to **TAN BOON HUAT IC NO S1554877J** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.40** 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.

SFA 44405P

DATE	NAME OF DRIVER	MILEAGE READING				MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DR	
		0	9	8	3		6	1			FROM
21/03/18	Mr Bawa Hart	0	9	8	3	6	1	23:56	06:12		
22/03/18	Quek Y m	0	9	8	7	2	5	06:30	18:10		
23/03/18	Mr Bawa Hart	0	9	8	9	6	8	00:01	06:00		
23/03/18	Quek Y m	0	9	9	2	3	7	06:24	17:05		
23/3	Accident							17:05			
28/3	repair								1445		

*[Handwritten signature]*

**Enquire Vehicle Insurer**

**Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name**

SKL2840K 23 Mar 2018 / 12:50:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous OK