

INS. CASE OWNER:

Surveyor:

DOI:

ASSIGNMENT

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

Excess Sec II :SS

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

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

Insured Liability: % Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



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.:

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

Loss of Use (LOU):

S\$

Loss of Income (LOI):

S\$

LOR only ☐ LOU only ☐

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

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:

DATE: 05/11/2012
 Name: Kalvin

REF:

ASSIGNMENT

From: _____ Date: _____
 Estimate Cost: _____
 OD / TP RES / TP RES / OD RES / EVA / INV / MV
 To: Imp of Vehicle No: _____
 at Workshop n/s _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client Record)
 Make of Vhc: _____



(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

Est. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Sent: _____ Consistent? : Yes or No
 Est. Repair: 02 days Res: Yes or No
 Turn Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC 19234 Yr Regn: 31/11/2012
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Hyundai Santa Fe 1991
 Colour: Blue A/C: Ins: 6 / Std / NI / NA
 Sp. Reading: 92839 T/Radio: Ins: 0 / Std / NI / NA
 Eng No: _____
 C/No: KM HETXIVA CA 827005
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Locked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Mod: NI / S/Rim / STD A/Rim or
 Tyre Size: F: 215/60 R16
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Maxar

Front	Rear
R/Bal. 7 mm	R/Bal. 7 mm
L/Bal. 7 mm	L/Bal. 7 mm
D.O.A. 29/1/18	D.O.I. 2/4/18

Survey held at CDGE (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Per 0/1

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
5/4/18	Call 456950/2 R3.
	US \$950 (Reel \$ 1921.30/677.1).

Date/Time, File Pass to?

☐ : Preil. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech Insp (\$

Survey Fee:

Transportation:

\$ + R5, \$

Photos

Notes

TOTAL

member of COMFORTDELGRO

Date/Time: 02.04.2018 10:23 Page : 1

m: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 3814566 JC NO:305137126

COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (O)

EQ

REGN NO: SHC1923U	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL: SONATA	DATE/TIME IN 02.04.2018 09:45
YR OF MANU: 31.07.2012	TARGET DATE
CHASSIS CODE: KMHE141VMCA827005	COMPLETION DATE/TIME:

UNT CARD NO.

JOB DESCRIPTION

cident Date: 29.03.2018
TURE: 3P 29.03.18/B

NO LABOR CODE DESCRIPTION

HECKED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

wedgement Slip

Exit Pass

a No.: SHC1923U FZ EQ

Vehicle No.: SHC1923U

of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

MAKE :

MODEL : HYUNDAI SONATA

DATE 2/4/2018 11:37

Page 1 of 1

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305137126
Date : 04.04.2018

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive, Singapore 508069
Fax: 6546 8156

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No : SHC1923U

Fax :
Date of Accident : 29.03.2018

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

1. The repair job shall bill to: EQ — SJE5212C
2. The finalized amount shall be:


(a) Spare Parts after List discount	\$0.00
(b) Labour Charges	\$0.00
Total for Part-By-Part Repair Cost	\$0.00
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: 20%	\$950.00
Final Lumpsum Repair cost	\$950.00


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 :  Fauzy
Name : FAUZY BIN MOKHTAR
Tel : 62148319
Fax : 65468156

Signature : 
Name : Kaka
Date : 5/4/18

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:

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Panel			\$ 391.80
	Rear Panel Garnish			\$ 95.80
	SUB TOTAL			\$ 1,894.50
	LESS 20%			\$ 378.90
	DISCOUNTED TOTAL			\$ 1,515.60
	Rear Bumper Reverse Sensor			\$ 135.70
	Rear Bumper Advertisement Logo			\$ 50.00
	Rear Bumper Rubber Mat			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00
				\$ 435.70
	Labour Charge			
	Panel Beating			\$ 250.00
	Spray Painting Charge-Bumper/Rear Panel			\$ 500.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 120.00
	TOTAL LABOUR			\$ 970.00
	ESTIMATE TOTAL			\$ 2,921.30

Kalvin (11/11/14)

2/4/8 1245hrs

2 Pys

4/5

After Repair p 4

- 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:

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.

Hsiao Tong (LKKAUTO)

From: Hsiao Tong (LKKAUTO)
Sent: Tuesday, 7 August 2018 2:51 PM
To: 'Jim Wong See Pah'
Subject: Your Ref: T 0318/ SHC1923U/ JW(st) *Our Ref: CC3/EQ118006083/K1pa3
[ACCIDENT INVOLVING SJE 5212C(EQ) & SHC 1923U ON 29/03/2018]

Your Ref: **T 0318/ SHC1923U/ JW(st)**
Our Ref: CC3/EQ118006083/K1pa3

Without Prejudice

Dear Sirs/Madam,

ACCIDENT INVOLVING SJE 5212C(EQ) & SHC 1923U ON 29/03/2018

We refer to the above matter.

We propose settlement at a global sum **\$1,330.00(all-in)**.

Please confirm acceptance.

"Please note that our above settlement is made on a without prejudice basis, and should not be construed as an admission of liability on our part or on the part of our insured/driver. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. Our offer made in respect of this present matter is made solely to resolve this matter only. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Settlement and payment are subject to production of original documents on demand at any time and execution of Discharge Voucher (for settlement sum above \$20,000/-) by the Plaintiff/Claimant. Further all original documents shall be retained by us after we have made payment on the settlement sum."

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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

Hsiao Tong (LKKAUTO)

From: Jim Wong See Pah <jimwong@cdge.com.sg>
Sent: Friday, 10 August 2018 10:56 AM
To: Hsiao Tong (LKKAUTO)
Subject: Re: Your Ref: T 0318/ SHC1923U/ JW(st) *Our Ref: CC3/EQ118006083/K1pa3 [ACCIDENT INVOLVING SJE 5212C(EQ) & SHC 1923U ON 29/03/2018]

Dear Ms Chew

Please process settlement in sum \$ 1330.00 for resolving our property damage claim amicably.

Thank you.

Best Regards

Jim Wong

Claims Dept / ComfortDelgro Engineering Pte Ltd

From: Hsiao Tong (LKKAUTO) <chewht@lkkauto.com>
Sent: Tuesday, 7 August 2018 2:51 PM
To: Jim Wong See Pah
Subject: Your Ref: T 0318/ SHC1923U/ JW(st) *Our Ref: CC3/EQ118006083/K1pa3 [ACCIDENT INVOLVING SJE 5212C(EQ) & SHC 1923U ON 29/03/2018]

Your Ref: **T 0318/ SHC1923U/ JW(st)**
Our Ref: CC3/EQ118006083/K1pa3

Without Prejudice

Dear Sirs/Madam,

ACCIDENT INVOLVING SJE 5212C(EQ) & SHC 1923U ON 29/03/2018

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Please confirm acceptance.

"Please note that our above settlement is made on a without prejudice basis, and should not be construed as an admission of liability on our part or on the part of our insured/driver. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. Our offer made in respect of this present matter is made solely to resolve this matter only. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

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Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately. and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]



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

To : M/s EQ INSURANCE COMPANY LTD

Date: 16/08/2018

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	SJE 5212C (Insd Veh)	Your Ref. No. : DM18HO00932/FN
	SHC 1923U (TP Veh)	Our Ref. No. : CC3/EQ118006083/K1pa3q2
Date of Accident	29/3/2018	

Liability	100%	
Final Repair Cost	: \$ 1,016.50	
Loss of Income	: \$ 100.00	2 days
Rental (If any)	: \$ 215.76	2 days
Others:	: \$ 7.49	
	: \$	
	1,339.75	
Final Settlement Sum	: \$ 1,330.00	GLOBAL SUM
Remarks	:	

Payment Instruction: Payee's Breakdown

1)	COMFORTDELGRO ENGINEERING PTE LTD	: \$ 1,330.00
		: \$

JOANNE LEE
LKK Auto Consultants Pte Ltd

Our Ref : T 0318 / SHC1923U / JW(st)
Your ref : _____
Date : 09-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: 1196004200

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 758158

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
101 Yishun Industrial Park A
Singapore 768732

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

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHC1923U YOUR INSURED SJE5212C AND OTHER _____ ON 29.03.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC1923U 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 SJE5212C we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,016.50
2	<u>2</u> days Loss of Rental @ \$ 107.88 per day	\$ 215.76
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 :		\$ 1,239.75

HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ 80.00 per day	\$ 160.00
Total Claims:		\$ 1,399.75

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

- a) Original repair bill and photocopies of photographs : 7 pcs.
b) LTA search slip/s of : SJE5212C
c) GIA / Police report/s of : SHC1923U
d) Letter of authority from owner / hirer / operator
() Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
() 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.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC3/EQ118006083/K1pa3

13 JULY 2018

LER HOCK TIN
BLK 562 PASIR RIS ST 51
#09-257
SINGAPORE 510562

Dear Sir/Madam,

ACCIDENT INVOLVING SJE 5212C AND SHC 1923U ON 29/03/2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, EQ Insurance Company Ltd to deal with the third party claim against your policy.

We have received a claim from SHC 1923U against your insurance policy.

Based on the accident report and accident scenario, liability is not in your favour. 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 note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

CHEW HSIAO TONG

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: chewht@lkkauto.com

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGSONATA SHC1923U , SJE5212C
TPE EXIT 12 SLIP RD TOWARDS PASIR RIA AVE 8

ON 29-Mar-18 23:45

I / We

ANG SAY KOK

(Hirer) NRIC No.: S0223773C

and/or

(Relief) NRIC No.:

Taxi Number

SHC1923U

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

31-Mar-2018

Name of Hirer

ANG SAY KOK

Hirer NRIC

S0223773C

Signature :



Address

217 PASIR RIS STREET 21 #06-148
510217

Contact No.

96378956

TAX INVOICE

8010325

BQ INSURANCE COMPANY LIMITED

#17-00 5 MAXWELL ROAD TOWER BLOCK
SINGAPORE 069110

CONTACT NO: 62239433

VEHICLE NO
SHC1923U

MAKE
HYUNDAI

MODEL
SONATA

DATE OF REG
31.07.2012

CHASSIS CODE
KMHET41VMCA827005

INV. NO/DATE
91366583 09.04.2018

JOB NO.
305137126

ODOMETRIC READING

JOB TYPE

Description : 3P 29.03.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	950.00
Add GST @ 7.000 %	66.50
Total Invoice amount	1,016.50

Issued by : KATHEKINKITAN 09.04.2018 10:08:19
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

1. WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARE OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED OWNERS' 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 COMPANY BY THE CUSTOMER AND NOT PAID ON THE DATE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE RECEIPT) FOR PERIOD OF DEFAULT.

4. PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR MISCELLANEOUS WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE 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 N

Our Ref: CT18030973

Date: 06 April 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	29/03/2018 @ 23:45 hrs
ALONG	TPE EXIT 12 SLIP RD TOWARDS PASIR RIA AVE 8
INVOLVING	SJE5212C

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 **SHC1923U** (the "Taxi"). The Taxi was hired to **ANG SAY KOK IC NO S0223773C** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$107.88** 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.

[illegible]

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJE5212C	29 Mar 2018 / 23:45:00	Successful	E04	EQ INSURANCE COMPANY LTD

[Previous](#)[OK](#)

SHC19234



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				
EQ INSURANCE COMPANY LTD			Ref : CC3/EQI18006083/K1pa3q2	
5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110			Date : 16-08-2018	
			Code : EQI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SJE 5212C	Veh. Inspected	SHC 1923U	
Policy No.	DMPPHQ17-000433	Coverage (\$)	0.00	
Claim No.	DM18HO00932/FN	Excess (\$)	0.00	
Assign From		Assign Date	02/04/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI SONATA	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	KMHET41VMCA827005	Colour	BLUE	
Odometer	92139	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/60 R16	MAXXIS	7 mm	
L/H Front Tyre	215/60 R16	MAXXIS	7 mm	
R/H Rear Tyre	215/60 R16	MAXXIS	7 mm	
L/H Rear Tyre	215/60 R16	MAXXIS	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	29/03/2018	Inspection Date	02/04/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
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

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1923U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	483.30	-
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
1	REAR PANEL	SERVICEABLE	391.80	-
1	REAR PANEL GARNISH	SERVICEABLE	95.80	-
	LESS 20% DISCOUNT		-378.90	-120.08
			1,515.60	480.32
	<u>SPECIAL NETT ITEMS</u>			
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
			435.70	300.00
	<u>LABOUR</u>			
	PANEL BEATING .		250.00	200.00
	SPRAY PAINTING CHARGE -BUMPER/REAR PANEL .		500.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR .	NOT NECESSARY	120.00	-
			970.00	400.00
	GRAND TOTAL		2,921.30	1,180.32
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			950.00

Report Ref No. CC3/EQ118006083/K1pa3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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