

INS. CASE OWNER: CC 3 / QBE1800 7283, K2 JB34 LKK: IDAC

Surveyor: Edwin DOI: ASSIGNMENT 18/4/18 Date / Time: 18/4/18
Registered in Merimen: -

Pre-assign / CCU / FTE
 Insured Vehicle No.: SFA 7179C Claim No.: VG011405
 Name of Insured: LEAPRUEK SINGAPORE PTE Policy No.: -
 Insured Tel No.: - HP: - Make / Model: TOYOTA
 Excess Sec II :SS: - D.O.A: 18/4/18 Place of Accident: BEND SOUTH RD
 Is driver the owner? (YES/NO) Nature of Accident: -
 If NO. Driver Name / Age: PAREKH Ajay - VIKRAM OI GIA REPORT: YES/NO ; TP GIA REPORT: YES/NO
 Driver Tel No.: - (V/L: YES/NO) Insured Liability: % Final? Yes/No

SHA 4100T → → → → →
 INSRs: WSP: WTE M INSRs: WSP: - INSRs: WSP: - INSRs: WSP: -
 Tel: - Tel: - Tel: - Tel: -
 Liability: - Liability: - Liability: - Liability: -
 RMKS: - RMKS: - RMKS: - RMKS: -

Date/Time	STAGE	DATE / PIC
5/6/18 2018	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI:	NA NA NA NA JOY 7-6-18
7-6-18 @ 407	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: 18/4/18 Sent By: tan

FINALIZATION Date/Time: Confirm with: Confirm by: Email Call

FINAL SETTLEMENT Date/Time: 31-7-18 Confirm with: CAIH Email Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 27
 Repair Cost: \$S 963
 Loss of Rental (LOR): \$S 115 (1 days)
 Loss of Use (LOU): \$S - (x days)
 Loss of Income (LOI): \$S 50 (x days)
 LOR only LOU only LOR + LOU LOR + LOI [Tick only one]
 GIA/LTA Search: \$S 7.49
 Medical: \$S -
 Disbursement: \$S - (e.g. Tow/Independent)
 Legal Cost: \$S -
 Total: \$S 1,135.49 Global Sum \$S: 1,135

FINAL PAYMENT Date/Time: Confirm with: Email Call
 Payee 1: \$S 1,135.XX Name 1: COMFORT DEL GRO ENGINEERING PTE LTD
 Payee 2: (Strike if N.A.) \$S X Name 2: -
 Payee 3: (Strike if N.A.) \$S - 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			
QBE INSURANCE (SINGAPORE) PTE LTD		Ref : CC3/QBE18007283/K1jb3	
1 RAFFLES QUAY #29-10 SOUTH TOWERSINGAPORE 048583		Date : 19-04-2018	
		Code : QBE	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SKQ 7179C	Veh. Inspected	SHA 4100T
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	19/04/2018
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	18/04/2018	Inspection Date	18/04/2018
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.			

member of COMFORTDELGRO

Date/Time: 18.04.2018 11:56 Page : 1

Job: ARC Repair TP(CLSO)1 **JOB CARD** Sales Order: 3818643 JC No305143348

MEMBER NO: 7010045 ADDRESS: 383 SIN MING DRIVE SINGAPORE SINGAPORE 575717 (R) 65508755 (O) (P)	REGN NO: SHA4100T	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL: I-40	DATE/TIME IN: 18.04.2018 08:30
	YR OF MANU: 05.03.2015	TARGET DATE
	CHASSIS CODE: KMHLB41UMFU064733	COMPLETION DATE/TIME

Ident Date: 18.04.2018
 TURE: 3P 18.04.18 - QBE

JOB DESCRIPTION

NO LABOR CODE DESCRIPTION

RECEIVED & PASSED OUT BY: _____

 SERVICE ADVISOR CUSTOMER'S SIGNATURE

Identification Slip
 No.: SHA4100T FZ

 Service Advisor Signature/Date

Exit Pass
 Vehicle No.: SHA4100T

 Name of Service Advisor Date

Returned to Service Reception upon collection

To be kept by Security Guard



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

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

Your ref: To Be Advised
Our ref: CC3/QBE18007283/K1jb3

Date: 19.04.2018

The Motor Claims Department
M/s QBE INSURANCE (INTERNATIONAL) LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHA4100T

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 18.04.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	2,581.58
Revised Estimate Amount	: S\$	1,119.20
"Check" Items Amount	: S\$	792.56
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the Rear Portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 4100T

QBE / LKK

DATE 18/4/2018 10:37

Fz

MAKE :

MODEL : HYUNDAI i40

REAR

Fauzy

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 603.60
	Rear Bumper Reinforcement ?			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH)?	\$	180.00	\$ 360.00
	Rear Bumper Side Bracket ?			\$ 49.00
	Rear Bumper Clips			\$ 22.00
	Rear Bumper Sponge *?			\$ 143.40
	Rear Bumper Under Cover *			\$ 225.00
	SUB TOTAL			\$ 1,907.35
	LESS 20% <i>256</i>			\$ 381.47
	DISCOUNTED TOTAL			\$ 1,525.88
	Rear Bumper Reverse Sensor X			\$ 135.70 Nett
	Rear Bumper Advertisement Logo			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH)	\$	100.00	\$ 200.00 Nett
				\$ 385.70
	Labour Charge			
	Panel Beating			\$ 250.00 <i>200</i>
	Spray Painting Charge			\$ 250.00 <i>200</i>
	Wiring Charge			\$ 50.00 X
	R/Refix Reverse Sensor			\$ 120.00 X
	TOTAL LABOUR			\$ 670.00
	ESTIMATE TOTAL			\$ 2,581.58

Kalvin (LKK)
18/4/18 1400L.
20/1
4/1
After Repair

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 work(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.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305143348
Date : 19.04.2018

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

FINALIZATION FORM

To : LKK Fax : _____
Attn : KALVIN
Vehicle Reg No. : SHA4100T Date of Accident : 18.04.2018

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

1. The repair job shall bill to: QBE — SKQ7179C
2. The finalized amount shall be:

(a) Spare Parts after List discount	<u>\$0.00</u>
(b) Labour Charges	<u>\$0.00</u>
Total for Part-By-Part Repair Cost	<u>\$0.00</u>
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	<u>\$900.00</u>
Final Lumpsum Repair cost	<u>\$900.00</u>

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 : FAUZY BIN MOKHTAR
Tel : 62148319
Fax : 65468156

Signature : 
Name : Calvin
Date : 23/4/18

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:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 4100T

QBE / LKK

DATE 18/4/2018 10:37

MAKE :

MODEL : HYUNDAI i40

REAR

Fauzy

FZ

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>Return</i>			\$ 603.60
	Rear Bumper Reinforcement <i>Xsu</i>			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH) <i>Xsu</i>		\$ 180.00	\$ 360.00
	Rear Bumper Side Bracket <i>Xsu</i>			\$ 49.00
	Rear Bumper Clips <i>mc</i>			\$ 22.00
	Rear Bumper Sponge <i>X Xsu</i>			\$ 143.40
	Rear Bumper Under Cover <i>X su</i>			\$ 225.00
	SUB TOTAL			\$ 1,907.35
	LESS 20% <i>256</i>			\$ 381.47
	DISCOUNTED TOTAL			\$ 1,525.88
	Rear Bumper Reverse Sensor <i>X " "</i>			\$ 135.70 Nett
	Rear Bumper Advertisement Logo <i>mc</i>			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH) <i>mc</i>		\$ 100.00	\$ 200.00 Nett
				\$ 385.70
	Labour Charge			
	Panel Beating			\$ 250.00 <i>200</i>
	Spray Painting Charge			\$ 250.00 <i>200</i>
	Wiring Charge			\$ 50.00 <i>X " "</i>
	R/Refix Reverse Sensor			\$ 120.00 <i>X " "</i>
	TOTAL LABOUR			\$ 670.00
	ESTIMATE TOTAL			\$ 2,581.58

Kalvin (LKK)
18/4/18 1400L.
2 hrs
4 hrs
After Repair

LKK Auto Consultants hence notify the Repairer of the following:

- To survey before after spray painting
- To display damaged parts during survey
- Parts prices are subject to commission
- Third party surveys on a "No Fault Prejudice" basis
- No illegal modifications is allowed
- Supplementary charges must be surveyed and subject to final approval by the Insurance Company

Acknowledged by:
 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.

Shu Pei (LKKAuto)

From: Joyce Foo <joyce.foo@qbe.com>
Sent: Tuesday, 5 June 2018 9:07 AM
To: Shu Pei (LKKAuto)
Cc: Joy Irene (LKKAuto); Admin A
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018
Attachments: SKQ7179C.pdf

Our Ref. VC011405

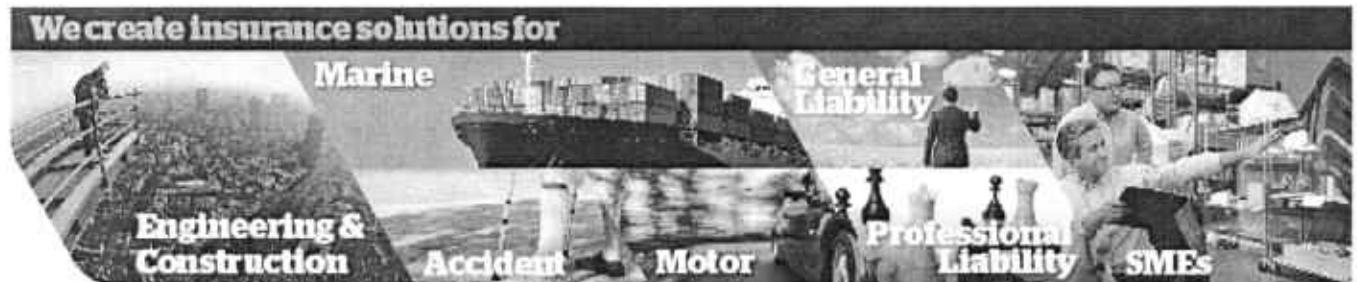
Hi

Attached OI report for your retention. Please proceed to settle TP's claim at best.

Thank You & Best Regards

Joyce Foo
Senior Assistant - Claims
QBE Asia Pacific - Singapore

QBE Insurance (Singapore) Pte Ltd
Phone : 65 9477 1184
Email : joyce.foo@qbe.com
Visit us on the web! at www.qbe.com.sg



From: Shu Pei (LKKAuto) [mailto:shupeil@lkkauto.com]
Sent: Monday, 4 June, 2018 10:53 AM
To: Joyce Foo <joyce.foo@qbe.com>
Cc: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018

WITHOUT PREJUDICE

Dear Sir/Madam,

We refer to the above matter.

Kindly advise whether insured has reported. If so, kindly let us have a copy of insured's accident report for our necessary action.

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

From: Joyce Foo [mailto:joyce.foo@qbe.com]
Sent: Friday, 20 April 2018 8:23 AM
To: Shu Pei (LKKAuto) <shupeil@lkkauto.com>
Cc: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018

Policy No. V0012060

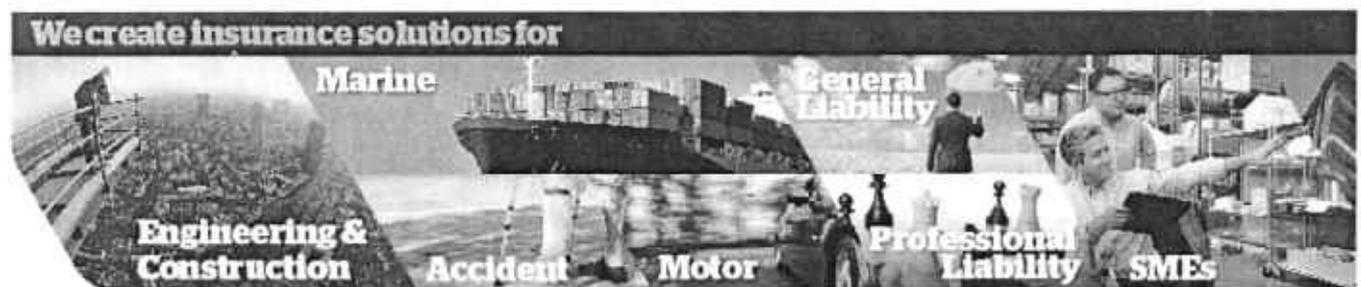
Hi

Our Insured has yet to report.

Thank You & Best Regards

Joyce Foo
Senior Assistant - Claims
QBE Asia Pacific - Singapore

QBE Insurance (Singapore) Pte Ltd
Phone: +65 5477 1164
Email: joyce.foo@qbe.com
Visit us on the web at www.qbe.com.sg



From: Shu Pei (LKKAuto) [mailto:shupeil@lkkauto.com]
Sent: Thursday, 19 April, 2018 6:23 PM
To: Joyce Foo <joyce.foo@qbe.com>
Cc: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>

Subject: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018

WITHOUT PREJUDICE

Dear Sir/Madam,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SHA 4100T at M/s ComfortDelGro Engineering Pte Ltd - Loyang.

Enclosed for your perusal is:

- TP's GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Joy and she can be contacted at DID: 6841 2409 .

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

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Our Ref : T 0418/ SHA4100T /WT(st)

Date : 25-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. 19960648W

QBE INSURANCE (INT'L) LTD
1 Raffles Quay #29-10
South Tower
Singapore 048583

WITHOUT PREJUDICE

Attn : Motor Claims Department

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA4100T YOUR INSURED SKQ7179C
AND OTHER _____ ON 18.04.18

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
501 Yishun Industrial Park A
Singapore 768732

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA4100T 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 : SKQ7179C we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	963.00
2	<u>1</u> days Loss of Rental @ \$ <u>115.00</u> per day	\$	115.00
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 :	\$	1,085.49

HIRER'S CLAIM

7	<u>1</u> days Loss of Income @ \$ <u>80.00</u> per days	\$	80.00
	Total Claims :	\$	1,165.49

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

- a) Original repair bill and photocopied of photographs 4 pcs.
- b) LTA search slip/s of : SKQ7179C
- c) GIA / Police report/s of : SHA4100T
- d) Letter of authority from owner / hirer / operator

- Witness statement/s Towing/Medical bill/receipts Certificate of Insurance
- Photocopies of Accident Scene Downtime/Mileage record 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 18 Email : williamtan@cdge.com.sg

A member of

COMFORTDELGRO



Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Thursday, 7 June 2018 4:13 PM
To: 'ajay@sg.clearpack.com'
Cc: Admin A
Subject: ACCIDENT INVOLVING SKQ 7179C AND SHA 4100T ON 18/04/2018

Our ref: CC3/QBE18007283/K1jb3

CLEARPACK SINGAPORE PTE LTD

Policy Holder

Dear Sir,

ACCIDENT INVOLVING SKQ 7179C AND SHA 4100T ON 18/04/2018

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

Based on the accident report and accident scenario, liability is down against us. 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 7 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.

Best Regards,
Joy Irene | Case Handler
LKK Auto Consultants Pte Ltd
DID: 6841-2409 | email: 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****i 40 SHA4100T , SKQ7179C
BEDOK SOUTH RD TWDS BEDOK SOUTH AVE 3.****ON 18-Apr-18 07:40**

I / We

CHIAM KENG BOON(Hirer) NRIC No.: **S0009054I**

and/or

CHNG CHOR KHEE(Relief) NRIC No.: **S0040253B**

Taxi Number

SHA4100T

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

18-Apr-2018Name of Hirer
Hirer NRIC**CHIAM KENG BOON
S0009054I**

Signature :



Address

**709 TAMPINES STREET 71 #07-112
520709**

Contact No.

96546257Name of Relief
Relief NRIC**CHNG CHOR KHEE
S0040253B**

Signature :



Address

**14 BEDOK SOUTH AVENUE 2 03-582
460014**

Contact No.

84267903

DISCHARGE VOUCHER

Without Prejudice
Save As to Costs

Your Reference : T 0418/ SHA 4100T /WT(st)
Our Reference : VC011405

I/We, **COMFORT TRANSPORTATION PTE LTD** do hereby acknowledge the sum of Singapore Dollars: **One Thousand One Hundred Thirty Five Only (S\$1,135.00)** being full discharge and satisfaction of all claims against QBE Insurance (Singapore) Pte Ltd and their Insured, **CLEARPACK SINGAPORE PTE LTD**, over damage to my/our vehicle **SHA 4100T** from an accident involving **SKQ 7179C** at/along **BEDOK SOUTH ROAD**, which occurred on **18 APRIL 2018** at about **1740** hours.

Further, I/we hereby acknowledge and accept that the above said sum paid to me is 'strictly on a without admission of liability basis' and I/we hereby discharge and release the said QBE Insurance (Singapore) Pte Ltd and their Insured, **CLEARPACK SINGAPORE PTE LTD**, from all claims, demands or action of damages as a result of the said accident.

Also, I/we hereby agree to indemnify and keep indemnified the said QBE Insurance (Singapore) Pte Ltd against all and any claims whatsoever made or to be made by any person or persons on my/our behalf in respect of the said accident.

Dated this (day) 1st of (month) August (year) 2018

Signature

Witness's Signature

Claimant's Name

Witness's Name

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
50 LLOYDS DRIVE
SINGAPORE 508669

DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
50 LLOYDS DRIVE
SINGAPORE 508669

FIN/NRIC No.

FIN/NRIC No.

Address

Address

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

*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 return to:
General Claims Department
QBE Insurance (Singapore) Pte Ltd
1 Raffles Quay
#29-10 South Tower
Singapore 048583
Fax: 6533 3270

Company stamp if applicable

Our Ref: CT18040473

Date: 23 April 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 18/04/2018 @ 07:40 hrs
ALONG BEDOK SOUTH RD TWDS BEDOK SOUTH AVE 3.
INVOLVING SKQ7179C

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 **SHA4100T** (the "Taxi"). The Taxi was hired to **CHIAM KENG BOON IC NO S0009054I** 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.

MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED		DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO								FROM
65781	127	1509	2015	11/14	Chy	6681	228	234	7.50	7.55	
66085	303	2030	0655	14/10	Overd	6682	298	270	2.20	0635	
66254	189	7.50	2555	15/4	Chy	6686	00	202	0650	1955	
66346	92	1502	1934	15/10	Chy	6689	66	311	2.130	0705	
66664	318	2030	0701	16/4	Chy	6691	51	184	7.50	3.10	
66830	156	8.15	255	16/4	Chy	6692	33	82	1520	2000	
66934	104	1509	2019	17/10	Chy	6695	29	291	2.130	0703	
72288	354	2100	0655	17/4	Chy	6696	66	156	7.50	2.55	
74551	163	7.50	3.00	17/4	Chy	6697	65	99	1455	2008	
7570	119	1509	1953	17/10	Chy	6700	60	299	2.130	0720	
7893	323	2006	0709								

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SKQ7179C	18 Apr 2018 / 07:40:00	Successful	Q01	QBE INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SUA 4100T

Joy Irene (LKKAuto)

From: Joyce Foo <joyce.foo@qbe.com>
Sent: Thursday, 26 July 2018 3:32 PM
To: Joy Irene (LKKAuto); claims-singapore@qbe.com
Cc: Admin A
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018 [VC011405]

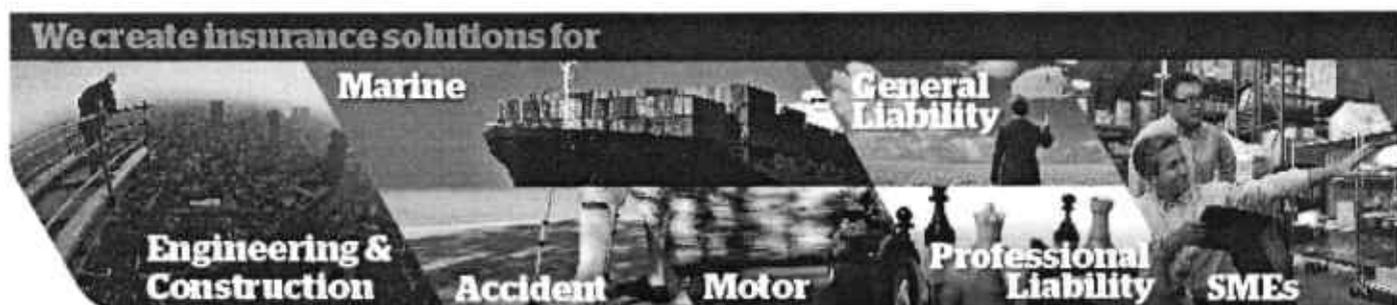
Hi

Please proceed to settle as advised.

Thank You & Best Regards

Joyce Foo
Senior Assistant - Claims
QBE Asia Pacific – Singapore

QBE Insurance (Singapore) Pte Ltd
Phone: +65 6477 1184
Email: joyce.foo@qbe.com
Visit us on the web at www.qbe.com.sg



From: Joy Irene (LKKAuto) [mailto:JoyIrene@lkkauto.com]
Sent: Thursday, 26 July, 2018 11:00 AM
To: Joyce Foo <joyce.foo@qbe.com>; claims-singapore@qbe.com
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018 [VC011405]

Dear Joyce,

This is a front-to-rear scenario where our insured vehicle was behind. BOLA 27-100% .Liability is not in our favour.

Summary to offer to repairer "COMFORTDELGRO ENGINEERING PTE LTD " is as follows:

	Claimed Amount	Revised Amount
Cost of Repair	\$2,581.58 (per estimate)	\$ 963.00 (w/GST)
Loss of Rental	\$ 115.00 (\$115 x 1 day)	\$ 115.00 (\$115 x 1)

Loss of Income	\$ 80.00 (\$80 x 1)	\$ 50.00 (\$50 x 1)
GIA/LTA Search Fee	\$ 7.49	\$ 7.49
Total	\$ 2,784.07	\$ 1,135.49

For your approval please.

Thank you.

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

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From: Joyce Foo [mailto:joyce.foo@qbe.com]
Sent: Thursday, 5 July 2018 4:45 PM
To: Shu Pei (LKKAuto) <shupeil@lkkauto.com>; claims-singapore@qbe.com
Cc: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018 [VC011405]

Hi

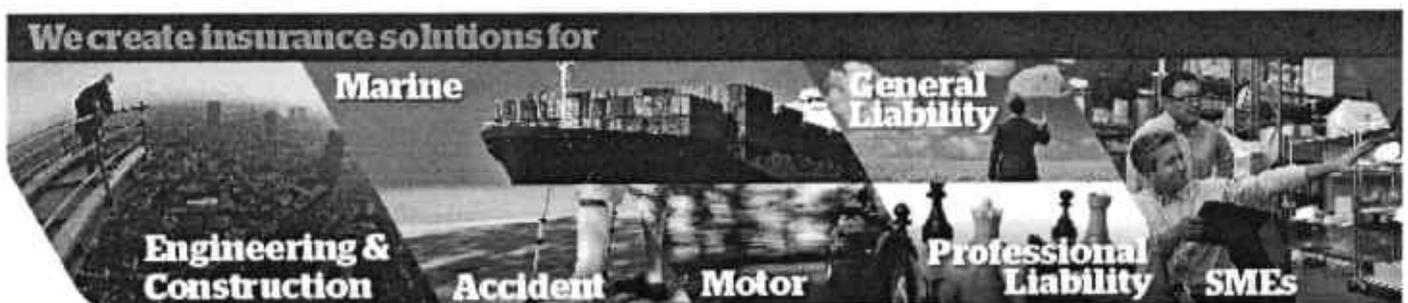
We refer to the above.

Please advise status of the claim. Is your report ready ?

Thank You & Best Regards

Joyce Foo
 Senior Assistant - Claims
 QBE Asia Pacific – Singapore

QBE Insurance (Singapore) Pte Ltd
 Phone: +65 6477 1184
 Email: joyce.foo@qbe.com
 Visit us on the web at www.qbe.com.sg



From: Shu Pei (LKKAuto) [<mailto:shupeil@lkkauto.com>]
Sent: Thursday, 19 April, 2018 6:23 PM
To: Joyce Foo <joyce.foo@qbe.com>
Cc: Joy Irene (LKKAuto) <JoyIrene@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: Direct Settlement - Accident Involving SKQ7179C (OI : QBE - TBA) AND SHA4100T (TP : LKK REF - CC3/QBE18007283/K1jb3) on 18.04.2018

WITHOUT PREJUDICE

Dear Sir/Madam,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SHA 4100T at M/s ComfortDelGro Engineering Pte Ltd - Loyang.

Enclosed for your perusal is:

- TP's GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Joy and she can be contacted at DID: 6841 2409 .

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

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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			
QBE INSURANCE (SINGAPORE) PTE LTD		Ref : CC3/QBE18007283/K1jb3q2	
1 RAFFLES QUAY #29-10 SOUTH TOWERSINGAPORE 048583		Date : 06-08-2018	
		Code : QBE	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SKQ 7179C	Veh. Inspected	SHA 4100T
Policy No.		Coverage (\$)	0.00
Claim No.	VC011405	Excess (\$)	0.00
Assign From		Assign Date	18/04/2018
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU064733	Colour	BLUE
Odometer	670078	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/60 R16	WEST LAKE	7 mm
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	18/04/2018	Inspection Date	18/04/2018
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

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. SHA 4100T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	DEFORMED	603.60	603.60
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	504.35	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$180.00	SERVICEABLE	360.00	-
1	REAR BUMPER SIDE BRACKET	SERVICEABLE	49.00	-
1	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	143.40	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	225.00	-
	LESS 20% DISCOUNT		-381.47	-
	LESS 25% DISCOUNT		-	-156.40
			1,525.88	469.20
SPECIAL NETT ITEMS				
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
			385.70	250.00
LABOUR				
	PANEL BEATING .		250.00	200.00
	SPRAY PAINTING CHARGE .		250.00	200.00
	WIRING CHARGE .	NOT NECESSARY	50.00	-
	R/REFIX REVERSE SENSOR .	NOT NECESSARY	120.00	-
			670.00	400.00
GRAND TOTAL			2,581.58	1,119.20
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				900.00

Report Ref No. CC3/QBE18007283/K1jb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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