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INS: CASE OWNER	R: YWW	CC 3/AIG1800	16×1/4	TWPPAN IDVC		
* Surveyor.	talun	DOI: ASSIGN	MENT 4 18	Date / Time	4118	,
				Registered in Merimen:	MARIA	7
Pre-assign / CCU	A CONTRACTOR OF THE PARTY OF TH	9210		W. A. W. 3		
Insured Vehicle No	SLN	8369	Claim No.	1827042	7434	
Name of Insured	UF		Policy No.	GAMMAN	383	
Insured Tel No.	-	HP:	Make / Model	Muzzon		
Excess Sec II :S\$		D.O.A: 214/18	Place of Acciden	2222 F 12	KAVE KI	n
Is driver the owner		Nature of Accident	Fince in Acciden			
		BIN MOHAMED YATE	M: or or a proposi	- GO UN - 27 - 27 - 27 - 27 - 27 - 27 - 27 - 2		á
Driver Tel		(V/L: YES)NO)	Insured Liability	ESNO : TP GIA REPO		2
SHB 36	09u					
INSRS: A	C INS	RS:	INSRS:	INSR	S:	
WSP: WY	WS WS	P. (2)	WSP:	WSP		
Tel: Liability:	VO Light	illity:	Tel : Liability :	Tet: Liabi		
RMKS:	RM.	(() - 1)	RMKS:	RMK		
Date/Time		500A DECEMBER 1	2020			
1.111	CHES GLOTHER	SUMED -	4	STAGE	DATE / P	1C
W/4/14				Non-Reporting ltr (1st): Non-Reporting ltr (2nd):		
JON.	OI CHA	NGED LANE		Von-Reporting Itr (Final):		
ho o l	0.			Notification ltr (if non-pickup)		
				Miler call itr to Of:	17-4-1	8
				Documentation Check List: Ha	andler Typi	ist
				Nonfication ltr (if non-pickup)	×	
				After call fir to OI:	/	
				Authorisation To Act: Release Voucher:	4	=
				Final Repair Bill:	4	=
				Car Rental Invoice:		
	OF IVE) 1 U.MAC 2018		Fowing Invoice	X	
	RECEIVE			TA/GIA:		
				Medical Bill:	×	=
				MR: Mandate/Reject Instruction:	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	==
				LOD		
				Payment Breakdown Form:		
PRELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos:		\Box
		Sea on person of the pro-		Others:		
FINALIZATION	Date/Time:	Confirm with: days) Reduction:	9	Confirm by:	Cill	1
Repair Cost: FINAL SETTLEMENT	Date/Time: 10-5-	S Confirm with CECILIA		Email Call		
Final Liability:	S IDO (Age	od / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia:		
Repair Cost: 65T	55 2, 983.50	2 (
Loss of Rental (LOR):	55 402.50	3.5 days) × 115		TO THE STATE OF TH	157	
Loss of Use (LOU): Loss of Income (LOI):	SS 175 1550	3.5 days)		10019	511	
LOR only LOU only	The second secon	LOR + LOI Tick only one	1			
GIA/LTA Search	ss 7.49					
Medical:	SS V			Claim status: Normal/Rejec Report Format	i/Private Seul	e
Disbursement: Legal Cost	SS 2 5/ 0	(e.g. Tow/ Independer		2) Report Format: 3) Survey fee:		
Total:	55 3 .568.	49Global Sum SS: 3,560	5	1.000.00.000		
FINAL PAYMENT	Date/Time:	Confirm with:		Email Call		1 2000
Payee 1:	55 3,560	Name 1: COMFORT	DELGRO	ENGINEERIN	o PIE	CID
Payee 2: (Strike if N.A.)	ss X	Name 2: X				
Payee 3: (Strike if N.A.)	SS ×	Name 3:				

(MANY32	
Sime REF:	
ASS	IGNMENT
From Date	Veh No: SHB 3 6094 Yr Regn: Mey 2015
Estimat Clos	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD / TP RES / OD RES / EVA / INV / MV	Truck / Frailer or
To insp extends No:	Makes Unida Z Vo 00 /685
at Work in the	Make: Hulr Z Vo oc /685 Colour XII/on AIC: In Oded / Std / NI / NA
til	Sp.Reading 5-07/83 T/Radio: Ins@ed / Std / NI / NA
Insured:	Eng/No:
Policy N ←	CINO: KMHLBX14A6407×922
Claims 1—lt	Gen. Cond: Good / Fig / Poor / Burnt
Sumins Citi Excess:	Steering: Inorgan / Jammed / Leaked / Burnt or
(Client *sRecord)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Wt:	Modi: Nil / S/Rim / STD Rim or
V	Tyre Size; F: 205/60116
(Policy Condition)	R:
Remark: The with had commenced its N/S 0/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PJR / SUMI /
apair at the time of Inspection.	TOYOTYOKO OF Wellie
Bal. or MalletValue:	Front Rear
IDACAccilentRport: Consistent?: Yes or No	R/Bail. 7 mm R/Bail. 3 mm
GLA / PR Seen: Consistent? : Yes or No	L/Bal. + mm L/Bal. + mm
Est Repair3 days Res.: Yes or No	D.O.A. 21/4/12 D.O.I. 23/4/4
Lum Sum: % 3 Val.: Yes or No	Survey held at (D4E (Loyang)
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN/OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction 24/4/4 (Line 1/9 \$ 2781-72/)	Blow AZK
11/ 12/06/07	FIP
2	
	(R \$2,951.60/519)
	(P = 10 / 3/2
Datafina, File Passio? : Prell. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Datafina File Return to?	Transportation:
2) Add Fe	e:: Site Insp (\$)s+Rssi
	: Interview (\$) Photos
F. 500070 (1981)	Tack or a c2 West
- discourse 1-2-11 (6)	1 August 1



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

78 SH CHAR	ENTON WAY #0	INGAPORE 079120	Date: 24-04-2018 Code: LCR Itars:-THIRD PARTY CLAI Veh. Inspected Coverage (\$)	
1.	Insured Veh. Policy No. Claim No.	Policy Particu	Code: LCR liars:-THIRD PARTY CLAI Veh. Inspected	M
	Policy No. Claim No.		Veh. Inspected	
	Policy No. Claim No.		Veh. Inspected	
	Policy No. Claim No.	SLN 836P		SHB 3609U
	Claim No.		Coverage (\$)	
	CHARLEST AND THE STREET		9-1-1	0.00
_	Assign From		Excess (\$)	0.00
2.			Assign Date	24/04/2018
		Vehicle I	Particulars & Condition	
	Make & Model		c.c	0
	Engine No. HIDDEN		Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Co	nditions 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.		Desc	ription of Damages	
5.		Ge	neral Information	
	Accident Date		Inspection Date	23/04/2018
\rightarrow	Survey held at			
	, and the second	59 LOYANG DRIVE SINGAPORE 508969		
5a.			Remarks	

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

Date/Time: 23.04.2018 12:48

'eam: ARC Repair TP(CFSO)1	JOB CARD Sales Order:	JC NO305144790
STOMER	REGN NO. SHB3609U	MILEAGE
MS CITYCAB PTE LTD STOMERNO 7010070 SHESS 383 SIN MING DRIVE	MAKE HYUNDAI	FUEL 1/2 F
Singapore Singapore 5/5/1/	7 MODEL 1-40 21	.04.2018 14:55
(P) 65551188 (O)	YR OF MANU. 30.05, 2015	TARGET DATE
COLINIT OXEID NO	CHASSIS CODE KMHT.B41UMGU074922	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 21.04.2018

(ATURE: 3P 21.04.2018

returned to Service Reception upon collection

LABOR CODE DESCRIPTION A(G-taxi left fear damage LKK/felmi-

ECKED &	PASSED OUT BY:				
	SERVICE ADVIS	SOR			CUSTOMER'S SIGNATURE
owledgeme	ent Slip			Exit Pass	
z a: e No::	SHB3609U	LARRY		Vehicle No.: SHB3609U	
ı of Service			Signature/Date	Name of Service Advisor	Date

To be kept by Security Guard

. CITY CAB PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHB 3609U

· MAKE :

2.0

MODEL : HYUNDAI i40

ALG

DATE 23/4/2018 9:56

DOA: 21.04.18

	Parts Description/ Labour	Type	Unit Price	- 2	Amount
	Rear Fender (LH) X Mar			\$	2,020.10
	Rear Fender Inner Lining (LH) 🔀			\$	164.40
	Rear Windscreen Moulding 😾			5	60.00
	Rear Door (LH)			\$	1,351.10
	Rocker Panel Outer Garnish (LH)			S	483.60
	Rear Wheel Hup-Cap (LH)			5	150.70
	SUB TOTAL			s	4,229.90
	LESS 20%			S	845.98
	DISCOUNTED TOTAL			S	3,383.92
	Rear Windscreen Sealant 🗴			s	46.00
	Rear Door Comfortdelgro & Apps Sticker (LH)			s	80.00
				\$	126.00
	Labour Charge				400
	Panel Beating			5	750.00
	Spray Painting Charge-Fender/Door/Rocker Panel			5	750:00
	Wiring Charge			S	50.00
	Tuff Kote			S	50.00
	Remove/Refix Cushion & Upholstery Rear		Villan	5	150.00
	Remove/Refix Rear Windscreen Glass	Auto Consi	Itants hence notify he following:	S	120.00
	Remove/Refix Reverse Sensor	Repairer or s	cater spray painting	\$	120.00
		display dame?	ed points conferration	5	120.00
	Rear Wheel Alignment	sed party Tury	Contract Street		120.00
	TOTAL LABOUR	upperential Loubject 10 Tr	repressitation insurance Con	npan's	2,230.00
1555	Kah ICICIU ESTIMATE TOTAL	Anceredged to	RECORM	s	5,739.92
BITY 149	Kahrilde ESTIMATE TOTALS 1 23/4/8 13 45h. 3 lys PIP Behar	9/0		T	
	3 Mg Be for	P-4)	oll		
	This is an initial estimate based on a visual inspection of the		manufacture of the state of the	quantu	m will

COMFORTDELGRO ENGINEERING

Our.	Job Re	of No . 3051	44790			NGINEERING
Date			or. 2018		Comfort 59 Love	DelGro Engineering Pte Ltd ng Drive Singapore 508969
INA	LIZAT	TION FORM			Fax: 654	46 8156
0	2	L	KK		Fax:	
ltn			ALVIN			
ehlo	cle Re	g No. : SHB36	09U	Dat	te of Accident:	21.04.2018
he s	survey	and estimates of th	e repairs of the al	bove-mentione	d vehicle are as f	ollows:-
	The	repair job shall bill t	0:	AIG		SLN836P
	The	finalized amount sh				
	(a)	Spare Parts after				E4 000 00
	(b)	Labour Charges	List discount			\$1,668.33
	(0)	Total for Part-By	Dart Danals Co.			\$1,120.00
		rotat for Part-By	-Part Repair Gos	st		\$2,788.3
	(c.)	Lumpsum Repair	(if applicable)			
		Total for Lumpsur Final Lumpsum		Less:	- 1	
			THE STANCE THE SERVE			
	Wes	nated normal period shall treat the abov in 7 working days				no reply from you
	We s within	shall treat the abov in 7 working days ak you for your assis	e amount as Cor	rect and Cont W	firmed if there is the confirm the esti- nalized amount	×
	We s within	shall treat the above in 7 working days ak you for your assis	e amount as Constance.	rrect and Cont W fir	firmed if there is the confirm the esti- salized amount gnature:	mates and
	We s within Than Signa Name	shall treat the above in 7 working days alk you for your assis ature :	e amount as Constance.	rrect and Cont	firmed if there is the confirm the estimalized amount gnature:	mates and
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	We s within Than Signal Name Tel	shall treat the above in 7 working days alk you for your assis ature : E : 6214 8316 E : 6546 8156	e amount as Constance.	rrect and Cont	firmed if there is the confirm the estimalized amount gnature:	mates and
or C	We s within Than Signal Name Tel	shall treat the above in 7 working days alk you for your assistature :	e amount as Constance.	rrect and Cont	firmed if there is the confirm the estimalized amount gnature:	mates and
er C	We s within Than Signal Name Tel	shall treat the above in 7 working days alk you for your assis ature : E : 6214 8316 E : 6546 8156	e amount as Constance.	rrect and Cont	firmed if there is the confirm the estimalized amount gnature:	mates and
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Re	We s within Than Signal Name Tel Fax Official	shall treat the above in 7 working days alk you for your assis ature : e : 6214 8316 : 6546 8156 Use Only	e amount as Constance.	rect and Cont W fir Si Ni Di Document Attached Yes or No	firmed if there is the confirm the estimatized amount gnature: ame : ate : Confirm By	Kalina 2 4/4/2
Re	We s within Than Signal Name Tel Fax Official	shall treat the above in 7 working days alk you for your assis ature : Example Ex	e amount as Constance.	rect and Cont W fir Si Ni Di Document Attached Yes or No	firmed if there is the confirm the estimatized amount gnature: ame : ate : Confirm By	Calif
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COMFORTDELGRO ENGINEERING PTE LTD

Date: 24.04.2018 Time: 16:17:40

REPAIR ESTIMATE

Page: 1

COMPA_NY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010070

ADDRE SS: CITYCAB PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65551188

JOB NO : 305144790 REGN NO : SHB3609U MILEAGE : 0000000000

MAKE MODEL : HYUNDAI

: I-40

DATE OF REGN : 30.05.2015 DATE/TIME IN : 21.04.2018 14:55

ACCIDENT DATE : 21.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0596-G 140VC PANEL ASSY-RR DR LH 1 1,351.10 20.00 1,080.88

0002 04-01-0103-0813-G 140VC MOULDING ASSY-SIDE 1 483.60 20.00 386.88

0003 28-01-0103-2014-A I40V3 APP LOGO REAR DOOR 1 80.00 : 80.00

0004 04-01-0103-0658-G 140VC CAP ASSY-WHEEL HUB 1 150.70 20.00 120.56

SUB-TOTAL : 1,668.32

JOB NATURE

0000 L	PANEL BEATING	400.00	
0001 23-502	SPRAYPAINT ON AFFECTED AREA	600.00	
0002 20-00	TUFF COAT ON AFFECTED PARTS.	20.00	
0003 20-204	REMOVE/REFIX UPHOLSTERY ASST REPAIR		50.00
0004 L	TRANSFER OF DOOR	50.00	

SUB-TOTAL : 1,120.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 24.04.2018 Time: 16:17:40

Page: 2

COMPAINY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010070

ADDRESS: CITYCAB PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65551188

JOB NO REGN NO

: 305144790 : SHB3609U

MILEAGE MAKE

: 0000000000

: HYUNDAI

MODEL

: I-40

DATE OF REGN DATE/TIME IN

: 30.05.2015 : 21.04.2018 14:55

ACCIDENT DATE : 21.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 2,788.32

MVA NAME & SIGNATURE DATE:

AUTHORISED: YES / NO SURVEYOR NAME & SIGNATURE

DATE:

REPAIR ESTIMATE*

VEHICLE NO: SHB 3609U

* MAKE

MODEL : HYUNDAI i40

ALG

DATE 23/4/2018 9:56

DOA: 21.04.18

Qty	Parts Description/ Labour	Type	Unit Price		Amount
	Rear Fender (LH) X Fqu			5	2,020.10
	Rear Fender Inner Lining (LH)			S	164.40
	Rear Windscreen Moulding			S	60.00
	Rear Door (LH)			5	1,351.10
	Rocker Panel Outer Garnish (LH)			\$	483.60
	Rear Wheel Hup-Cap (LH) - 6~24			\$	150.70
	SUB TOTAL			5	4,229.90
	LESS 20%			5	845.98
	DISCOUNTED TOTAL			5	3,383.92
	Rear Windscreen Sealant 🗴 😘			5	46.00
	Rear Door Comfortdelgro & Apps Sticker (LH)	MPL.		S	80.00
	ten ben comorninge a rippo onene (211)				100 He / Sec. 50
				\$	126.00
	Labour Charge			10.00	400
	Panel Beating			\$	750.00
	Spray Painting Charge-Fender/Door/Rocker Panel			S	759:00
	Wiring Charge			5	50.00
	Tuff Kote			15	50.00
	Remove/Refix Cushion & Upholstery Rear	· 6 19	to higher notify	S	150.00
			and the second second	S	120.00
	Remove/Refix Reverse Sensor	THE PARTY	www.cz.leicht.de.k	S	120.00
	Transfer of Door	tak of 1	to to a metico	1	120.00
	Rear Wheel Alignment Parts Third		to the second second	1	120.00
	TOTAL LABOUR	ped to tree -	savel from manual and	s	2,230.00
. 19	Kahrilde ESTIMATE TOTAL	wiedged by Ri dure:	pairet	s	5,739.92
419	Kahrilde ESTIMATE TOTAL 123/8/8 13 85L. Dois 3 lys 1910 Behar	P-4	e ll		
	This is an initial estimate based on a visual inspection of the			luanti	um will
	The state of the s		ed by the insurance cor		

Our Ref	CC18040592/ SHB3609	U /CL(st)	Co	MFORTDELGRO
Date :	30-Apr-18			Engineering
AIG ASIA	PACIFIC INSURANCE PTE		Taxi Claims Dept	ComfortDelGro Engineering Pte Ltd 95 Briddell Road Singapore 579701
CHARTIS 78 Shenton		Singap	ore 508969	Mainline +65 6383 6280 Facsimilie +65 6280 9755
#07-16	5			www.odge.com.sg
Singapore (079120			Errory Rightmer no (1800) and
Attn: Mot	tor Claims Department W	ITHOUT PREJUDICE		Workshops Braddell 205 Braddell Road Singaposs 579701
	T INVOLVING OUR TAXI		R INSURED 21.04.18	Loyang 59 Loyang Orive Singapore 508969
7.0-030 80.74	authorised repair workshop for C	DAY SOOK MINDS AN	19 36 56	Sin Ming 383 Sm Ming Drive Singapore 575717
Commence of the Commence of th	 which was involved in the ca owner and the taxi driver concern 			The Contract
	senting their claims against the pa mage to the vehicle.	arty responsible for all	applicable matte	ers arising Ubi 320 Ubi Road 3 Singapore 408649
	ent was caused by the negligent ac nitting these claim for your consid			Senako 24 Senako Loop Singapore 758156
	ER'S CLAIM of Repair		\$ 2,983.50	Sungei Kadut 7 Sungei Kadut Way Singapore 728791
		\$ 115.00 per day d by M/s LKK)	\$ 460.00	6 Defu Avenue 1 Singapore 539537
	Search Fees Police Report Fees		\$ - \$ 7.49	Yishun 501 Yahun Industrial Park A
	ng / Medical / Transporation Fees	Sub Total	\$ -	Singapore 768732
HIRER'S CI		120 2202000000000		
74	days Loss of Income @	Total Claims		

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

Original repair bill and photocopies of photographs: a)

SLN 836P

7

pcs.

LTA search slip/s of : b)

GIA / Police report/s of : c)

SHB3609U

d) Letter of authority from owner / hirer / operator

() Witness statement/s

() Certificate of Insur. (x) Rental Rate letter

(X) Photograph/s of Accident Scene

(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: cecilialee@sparkcarcare.com

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

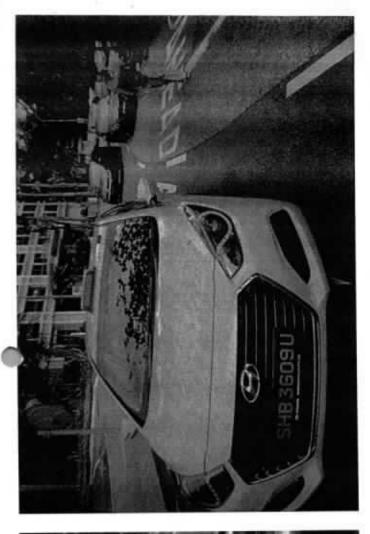
A member of COMFORTDELGRO

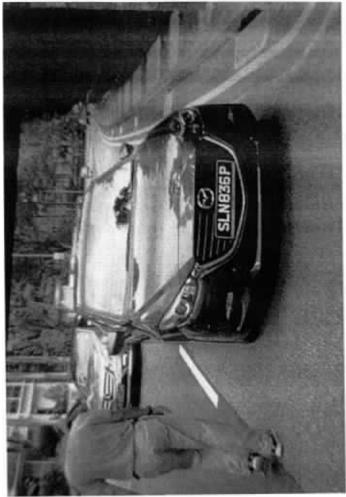






	SHS 560 V	MILEAGE	HOURS OPERATE	ATELL (TIME)
OURS OPERATED (TIME DATE	NAME OF DRIVER MILEAGE READING	TRAVELLED (KM)	FHOM	5
15/ //	14 1 50 2 / 4 WH	2/2	1528	2330
37 /2/	8 t 6 2 0 J	400	0/20	15-50
16.52 16/4/11	280201	101	201	2231
511110	501 60 7 6 6 7	380	04%	15 49
0/3/6/65-51	203665	202	SET	2350
0121	74 10 40 -	350	04.1.	74.51
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	サーレコート	197	04-1.	34.91
13-511 914 (18	2000	072	3.4.5	16.59
22 20/4/18	10/10 3 0 (3)	37.	(455	. (
81.40.18 8100	A CCCD CON)	247	1	1645
8). 4:0+:04:18	Repail			









Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)

 Sent:
 Friday, 27 April 2018 1:34 PM

 To:
 'Eileen, May Hwee Yap'

Cc: Admin A; Vivian Lau (LKKAuto); Hsiao Tong (LKKAuto)

Subject: ACCIDENT INVOLVING SLN 836P (LCR) & SHB 3609U ON 21/04/2018 (13:30)

ALONG ORANGE GROVE ROAD

27 April 2018

LION CITY RENTALS PTE LTD

Policy Holder

Your Ref: SLN 836P

Our Ref: CC3/LCR18007531/K1jb3

Dear Sir/Madam,

ACCIDENT INVOLVING SLN 836P (LCR) & SHB 3609U ON 21/04/2018 (13:30) ALONG ORANGE GROVE ROAD

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 SHB 3609U 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| 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

i 40 SHB3609U , SLN836P

ON 21-Apr-18 13:25

ALONG

ORANGE GROVE RD TWDS STEVEN RD

1 / We

TAN HENG JOO

(Hirer) NRIC No.: \$7325167B

and/or

(Relief) NRIC No.:

Taxi Number

SHB3609U

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

22-Apr-2018

Name of Hirer

TAN HENG JOO

Hirer NRIC

S7325167B

Signature :

Address

301B ANCHORVALE DRIVE #04-53

542301

Contact No.

96581435

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 \$\frac{\text{S\$3,560.00}}{\text{clobal Sum}}\$ (Global Sum) for vehicle no. \$\frac{\text{SHB 3609U}}{\text{Clobal SHB 3609U}}\$ that was damaged pursuant to the accident which occurred on \$\frac{\text{21/04/2018}}{\text{clobal Sum}}\$ (date) along \$\frac{\text{ORANGE GROVE ROAD}}{\text{Clocation}}\$ (location) involving vehicle no/s \$\frac{\text{SLN 836P}}{\text{Clocation}}\$. This is pursuant to the inspection conducted on \$\frac{\text{23/04/2018}}{\text{(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 SHB 3609U 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 SHB 3609U (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 BRADBELL ROAD
SINGAPORE 579701

Signed by "the workshop" (with chop)

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."

COMFORTDELGRO ENGINEERING PTE LTD

COMFORTDELGRO ENGINEERING

A member of COMFORDELGRO

GST REG. NO. M2-8921817-3

ComfortDelGro Engineering Pte Ltd

205 Brackel Fload Singapons 579701 Marriers + 85 6383 6380 Facalette + 65 6280 9735

Workshaps

59 Luyeng Drive Simpagore S08881 383 Sin Marg Drive Simpagore 575717 45 Pendan Rhaud Simpagore 600586 300 List Wood 3 Envisione 400560

24 Semilio Livop Singapore 755155 7 Songel Kadal Way Singapore 756791 501 Yahan Industrial Flori A Singapore 75673.

TAX INVOICE

COMPANY REG. No.: 199506048W Page: 1

80100 AIG A	G ASIA PACIFIC INSURANCE PTE LTD			VEHCLE NO SHB3609U		DATE 25,04,2018
#08-1 SINGA	08-16 78 SHENTON WAY CHARTIS BUILD		MAKE HYUNDAI		JOB NO. 305144790	
CONTACT NO: 64193000 3225094		MODEL I-40		ODOMETER	READING	
			DATE 0	DATE OF REG 30.05.2015		E IN 18 14:55
Descr	iption : 3P 21.0	4.2018	CHASSI KMHLB41	S CODE UMGU074922		
S/No	Part No.		gty	Unit Price	%Disc	Net
PART	REQUISITION					
0001	04-01-0103-0596	140VC PANEL ASSY-RR DR LH	1	1,351.10	20.00	1,080.88
0002	04-01-0103-0813	140VC MOULDING ASSY-SIDE	1	483.60	20.00	386.88
0003	28-01-0103-2014	140V3 APP LOGO REAR DOOR	1	80.00	0.00	80.00
0004	04-01-0103-0658	140VC CAP ASSY-WHEEL HUB	1	150.70	20.00	120.56
			SUB-TOTAL	3	1,6	68.32
JOB N	ATURE					
0001	L	PANEL BEATING	40	0.00	400.0	0
0002	23-502	SPRAYPAINT ON AFFECTED AREA	60	0.00	600.0	0
0003	20-00	TUFF COAT ON AFFECTED PARTS.	2	0.00	20.0	0
0004	20-204	REMOVE/REFIX UPHOLSTERY ASST	REPAIR	50.00	50.0	Our recent

ComfortDelGro Engineering Pte Ltd A member of COMFORDELGRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91369426	2,983.50	

Kindly note that no receipt shall be issued unless requested.



A member of COMFORDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Bredtell Road Singapore 579701 Maintine + 65 6380 6280 Facernile + 65 6280 9755

Workshoos

50 Layang Drive Singapore 508669 363 Son Merg Drive Singapore 579717 45 Pandan Road Singapore 608206 320 Life Road 3 Singapore 408849

84 Senoku Leop Singapore 758156 7 Sunge Kadul Way Singapore 728781 571 Yester Hubatha Park A Singapore 708732

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 VEHCLE NO SHB3609U

INV. NO/DATE 91369426 25.04.2018

JOB NO. 305144790

MODEL 1-40

ODOMETER READING

DATE OF REG 30.05.2015

DATE/TIME IN 21.04.2018 14:55

CHASSIS CODE KMHLB41UMGU074922

S/No Part No.

Qty Unit Price &Disc

Net

TRANSFER OF DOOR

50.00

50.00

SUB-TOTAL

1,120.00

Items total

Add GST @

7,000 €

2,788,32 195.18

Invoice amount

2,983.50

CHEWBEELENG 25.04.2018 14:32:08

Repair type : CFSO/57/57 Payment Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd

A member of COMFORIDISCRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. **AMOUNT** BANK/CHQ No. 8010004 91369426

Kindly note that no receipt shall be issued unless requested.

Our Ref: CC18040592

Date: 25 April 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

21/04/2018 @ 13:25 hrs

ALONG

ORANGE GROVE RD TWDS STEVEN RD

INVOLVING

SLN836P

We refer to the above-mentioned accident and wish to inform that CityCab Pte Ltd is the registered owner of the taxi bearing vehicle registration number SHB3609U (the "Taxi"). The Taxi was hired to TAN HENG JOO IC NO S7325167B a registered hirer-operator of CityCab 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.

Insurance Particulars Enquiry By Agents Detail

https://vrl.lta.gov.sg/lta/vrl/action/insPartDetailByAA?FUNCTION_...

Enquire Vehicle Insurer

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

SLN836P 21 Apr 2018 / 13:25:00 Successful A04 AIG ASIA PACIFIC INSURANCE PTE. LTD.

Previous OK

...CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Notified	Est Submitted	Ad) Assigned	Adv Day	Tana a second	Factor and the con-		
Main	24 Apr 2018 Edit Reg		23 Apr 2018 00:00 Edit Adj Rpt	S\$2,788.32 Edit Estimates	Adj Submitted 5\$2,788.32 View Rpt	Ins Auth'ed	Pending for Report Cancel Case	
- 0	Main	T A	eference	Claim De	talls	Documents		Show All
The second second	BFOLDER DE				[Created	by adjuster]		
Insured: Main Claimant:		PTE LTD, Co. Reg. 1	leg. No.: 199502839	9G	11.000000000000000000000000000000000000			
Vehicle Reg. No.:	SHB360			Date of		8 13:00 - :59 s and 22 Days Fro	m ITA Ban Bata i	
Claim Type:	TP / 183	9042277SG		Policy/G Note N	over oppopper		m Ern key Date (man Tr))
Vehicle Reg. No. (Insured):	SLN836P			Policy N (Claima	lo. D. 1909993	7MPSH		
Repairer:	Comforth	elGro Engineeris	ng Pte Ltd (Loyanç	Excess:				
Handling Insurer:			e Pte. Ltd. (Expres				Sam Kannfflain c	num.
Claimant's Insurer:	December 1999		e Ltd (HQ) - Tel: 62			,	John Hangwarg.	2111
Adjuster:	LKK Auto 04/05/20	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [Handle	by KALVIN ANG	WEI KUN] [F	inal Rpt due	
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Due Date	Priority	Type Task	Group Subjec	t Handler /	Assigned By	Completed On	Created On	Done

Claim Documents

*SHB3609U (1839042277SG)

[SLN836P]

TP

CITYCAB PTE LTD

Apr 21 2018 1:00PM

[LCRF PTE LTD]

ComfortDelGro Engineering Pte Ltd

Let	ters/Corresponde	nces		View in Brow	The same
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Documents Checklist

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Note: Remarks are private unless you show it to other parties.			

NOTE: TO BE COMPL	ETED BY	SURVEYOR
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TEAM		
IEAM	TELES	
	IEAM	

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

	SLN836P (Insd veh		Mod	el:	HYUNDAI 140 1.7 D (A)
	SHB3609U (TP veh)			
Date of Accident:	21/04/2018				
Global Sum Settler	ment : [X] Yes		[] [No	
Repair Estimate	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	: 5		,141.71	
Final Repair Cost		: \$		3,560.00	
Loss of Use		: 5		0,000.00	3.50 days at \$50.00 per day
Rental (if any)		s			3.50 days
LTA / GIA Search F	ee	: \$			0.00
Others:		: \$			
		: \$			
Final Settlement Su	ım (Global Sum)	: 8		3,560.00	
Is Third Party Wor pelow)	kshop GIA Registered	17	[X]	YES [] NO (Kindly indicate
A) For Non GIA R	egistered Workshop:		Agree	d Liability	(%)
			15	-	
* Assessed Lia	100(%) bility to be filled only for	r chain	Assess	sed Liabilit	ses where BOLA does not apply.
* Assessed Lia Remarks	bility to be filled only for		Assess	sed Liabilit	
* Assessed Lia Remarks Payment Instruction			Assess	sed Liabilit and for ca	ses where BOLA does not apply.
* Assessed Lia Remarks Payment Instruction ComfortDelGro	bility to be filled only for		Assess	sed Liabilit	
* Assessed Lia Remarks Payment Instruction (1) ComfortDelGro	bility to be filled only for		Assess	sed Liabilit and for ca	ses where BOLA does not apply.
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* Assessed Lia Remarks Payment Instruction	bility to be filled only for		Assess	sed Liabilit and for ca.	ses where BOLA does not apply.

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. 199607 198R)

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/LCR18007531/K1JB3Q2

Date:

15/05/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd.

Claimant Vehicle

SHB3609U

Date of Loss: 21/04/2018 Policy No:

Nature of Claim:

0999994786

Engine No:

Chassis No:

Odometer

Insured Vehicle No:

SLN836P TP

Claim No: 1839042277SG

D4FDEU479921

505183 km

KMHLB41UMGU074922

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg. Date:

No:

SHB3609U

Make & Model:

HYUNDAI 140, 1.7 D (A)

30/05/2015 (Man. Year: 2015)

Colour Engine Capacity:

Yellow

Market Value/New Car Price: N/A

1685 cc

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side: Front Right Side:

West Lake 7 mm West Lake 7 mm Rear Left Side: Rear Right Side: West Lake 7 mm West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,509.92	1,668.32	1.841.60	52.47
Miscellaneous Items	0.00	0.00	0.00	O4. 11
Labour	2,230.00	1,120.00	1,110.00	49.78
Paintwork Labour	0.00	0.00	0.00	40.70
Towing	0.00	0.00	0.00	
Gross Total	(S\$) 5,739.92	2,788.32	2,951.60	51.42
+ GST 7.00/7.00% (S\$) 401.79	195.18	206.61	51.42
Nett Amount (S\$) 6,141.71	2,983.50	3,158.21	51.42
+ Loss of the	12 E - CEED DOLL) (CE)	485.00		

+ Loss of Use (3.5 x S\$50.00/day) (S\$) 175.00 + Car Rental (3.5 x S\$115.00/day) (S\$) 402.50 + Doc/Search Fee (S\$) 7.49

Nett Liability (S\$) 3,568.49 Global Sum Settlement (S\$) 3,560.00

INSPECTION

Date of Assignment:

23/04/2018

Date Inspected:

23/04/2018 Inspected At:

ComfortDelGro Engineering Pte Ltd.

(Loyang)

Adjuster Report

Page 2 of 4

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

3.0 days

Adjuster: KALVIN ANG WEI KUN 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	*REAR FENDER (LH)	Repair	2,020.10 FL	*-FL
2	1	*REAR FENDER INNER LINING (LH)	Serviceable	164.40 FL	
3	1	*REAR WINDSCREEN MOULDING	Not Necessary	and the state of t	*-FL
4	1	*REAR DOOR (LH)	Dented		*1,351.10FL
5	1	*ROCKER PANEL OUTER GARNISH (LH)	Cracked	483.60 FL	*483.60 FL
6	1	*REAR WHEEL HUP-CAP(LH)	Grazed	150.70 FL	*150.70 FL
7	1	*REAR WINDSCREEN SEALANT	Not Necessary	46.00 FS	*-FS
8	1	*REAR DOOR COMFORTDELGRO & APPS STICKER (LH)		80.00FS	
F=Fran	nchise	part. S=SpcNett. L=ListItemDisc.			
			Sub Total (S\$)		2,065.40
		- List Item Discount on L Items 20.	00/20.00% (S\$)	845.98	397.08

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	750.00	400.00
2	SPRAY PAINTING CHARGE-FENDER /DOOR/ROCKER PANEL	New	750.00	600.00
3	WIRING CHARGE	New	50.00	0.00
4	TUFF KOTE	New	50.00	20.00
5	REMOVE/REFIX CUSHION & UPHOLSTERY REAR	New	150.00	50.00
6	REMOVE /REFIX REAR WINDSCREEN GLASS	New	120.00	0.00
7	REMOVE/REFIX REVERSE SENSOR	New	120.00	0.00
8	TRANSFER OF DOOR	New	120.00	50.00
9	REAR WHEEL ALIGNMENT	New	120.00	0.00
	Gross Labou	r Cost (S\$)	2,230.00	1,120.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >