

INS. CASE OWNER:

CC 3 / CTI 1800 9740 / K1003

IDAC:

Surveyor:

rmk

DOI:

28/8/18

Date / Time:

28/8/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

S3G 1145D

Name of Insured:

Tang Mee May

Insured Tel No.:

HP: 96922046

Excess Sec II :SS

D.O.A: 28/8

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

Srm18p02643e02

Policy No.:

Dmp18N3032241704

Make / Model:

H. Civic

Place of Accident:

Orchard Boulevard

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability:

%

Final ? Yes / No

S3A 1222M



INSRS:

WSP:

Tel:

Liability:

RMKS:

01681605



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

6/6

S3A 1222M - 16/10/18 07:56 / H1613, 004 28/8/18

Rm

S3G 1145D - X

07-08-18 + 12-23

(REPAIR) OI CONFIRMED ACCIDENT. OI CHARGED LANE AND TP TO PROCEED TO CLAIM REPAIRS TO SEVERE AND FURTHER REPAIR NED ISSUE

12/2 A1A // G.A. Hiron's signature is diff. Br. policy number is wrong.

RECEIVED 03 SEP 2018

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	EMAIL 07-08-18
After call ltr to OI:	
Documentation Check List:	Handler Typist
Notification ltr (if non-pickup)	<input type="checkbox"/>
After call ltr to OI:	<input checked="" type="checkbox"/>
Authorisation To Act:	<input checked="" type="checkbox"/>
Release Voucher:	<input checked="" type="checkbox"/>
Final Repair Bill:	<input checked="" type="checkbox"/>
Car Rental Invoice:	<input checked="" type="checkbox"/>
Towing Invoice:	<input type="checkbox"/>
LTA / GIA:	<input checked="" type="checkbox"/>
Medical Bill:	<input type="checkbox"/>
PIR:	<input type="checkbox"/>
Mandate/Reject Instruction:	<input type="checkbox"/>
LOD	<input checked="" type="checkbox"/>
Payment Breakdown Form:	<input type="checkbox"/>
Post-Repair Photos:	<input checked="" type="checkbox"/>
Others:	<input type="checkbox"/>

PRELIMINARY ADVICE		Date/Time: 31.5.18	Sent By: rmk
FINALIZATION		Date/Time: 31.5.18	Confirm with: -
Repair Cost:	PIP SS1,371.20	(2 days) Reduction:	26 %
FINAL SETTLEMENT		Date/Time: 9.7.18	Confirm with: OFFLINE
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.:	15
Repair Cost:	will SS1,360.10	OI CHARGED LANE AND TP	
Loss of Rental (LOR):	SS 751.14	(6 days) x 125.19	
Loss of Use (LOU):	SS -	(\$ x days)	
Loss of Income (LOI):	SS 300.00	(\$50 x 6 days)	
LOR only <input type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input checked="" type="checkbox"/> (Tick only one)
GIA/LTA Search:	SS 1.49		
Medical:	SS -		
Disbursement:	SS -	(e.g. Tow/ Independent)	
Legal Cost:	SS -		
Total:	SS 2,418.81	Global Sum SS: 2,400	
FINAL PAYMENT		Date/Time: 9.7.18	Confirm with: OFFLINE
Payee 1:	SS 2,400.00	Name 1:	CONFORTABLE ENGINEERING PTE LTD.
Payee 2: (Strike if N.A.)	SS	Name 2:	
Payee 3: (Strike if N.A.)	SS	Name 3:	

COPY SENT 12/2/18

- 1) Claim status: Normal/Reject/Private Settle
- 2) Report Format: TP
- 3) Survey fee: 400

108/11/13

Q. me: Kalvin

REF:

ASSIGNMENT

From: _____ Date: _____
Estimate Cost: _____

OD / TP / INS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHA 2222 M Yr Regn: 17 Mar 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / Truck / Prime Mover /

Truck / Trailer or

Make: Hyundai Zonix C.C. _____Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 2103.1 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHLC8581C VH4022772

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD/Rim or

Tyre Size: F: 195/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Used Veh.

Front Rear

R/Bal. 7 mm R/Bal. 2 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 25/5/8 D.O.I. 26/5/8Survey held at (DGE (Loyang))

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

O/S R

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

Date / Time	Action / Instruction
31/5/8	Advised P/P 51271-20/20p. (RED: 9451.62 20/5)

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format: _____

Lump Sum / I.B.I: (\$ _____)

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)



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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI18009740/K1ea3

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 30-05-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJG 1145D	Veh. Inspected	SHA 2222M
Policy No.	DMPCSN3037741704	Coverage (\$)	0.00
Claim No.	SNM18D02643C02	Excess (\$)	0.00
Assign From		Assign Date	30/05/2018

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	25/05/2018	Inspection Date	28/05/2018
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.

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

China Taiping-CP/P) TS

VEHICLE NO : SHA 2222M

DATE 28/5/2018

MAKE :

LKK - Kalvin

MODEL : HYUNDAI IONIQ

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper <i>Refurb</i>			459.40	
	Rear Bumper Reinforcement <i>SK</i>			294.80	
	Rear Bumper Clip <i>SK</i>			22.00	
	Rear Bumper Sponge <i>SK</i>			X	
	Rear Bumper Under Cover <i>SK</i>			270.10	
	Rear Bumper Protector (LH/RH) <i>SK</i>			X	
	<i>Rear RH Fender X Repair</i>				
	SUB TOTAL			\$1046.40	
	LESS 20%			\$209.28	
	DISCOUNTED TOTAL			\$837.12	
	Rear Bumper Reverse Sensor <i>X SK</i>			\$ 135.70	Nett
	Rear Bumper Rubber Mat <i>SK</i>			\$ 50.00	Nett
				\$ 185.70	
	Labour Charge				
	Panel Beating			\$ 280.00	
	Spray Painting Charge			\$500.00 400	
	Wiring Charge			\$ 50.00 X 47	
	Remove/Refix Reverse Sensor			\$ 120.00 20	
	TOTAL LABOUR			\$ 700.00	
	ESTIMATE TOTAL			\$1722.82	
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <p><i>Ka/ur 10004</i></p> <p><i>28/5/18 1145h</i></p> <p><i>2 Qty</i></p> <p><i>PIP</i></p> <p><i>Before Print photo</i></p> </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> 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 is allowed Supplemental claim must be resurveyed and is subject to final approval from Insurance Company <p>Acknowledged by Recipient</p> <p>Signature: _____</p> <p>Date: _____</p> </div> </div>					
<p>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.</p>					

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305164718
Date : 31/05/18

FINALIZATION FORM

To : LKK
Attn : KALVIN ANG

Fax :

Vehicle Reg No. : SHA2222M Date of Accident : 25-May-18

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

1. The repair job shall bill to: CHINA TAIPING --- SJG1145D
2. The finalized amount shall be:


(a) Spare Parts after List discount	\$651.20
(b) Labour Charges	\$620.00
Total for Part-By-Part Repair Cost	\$1,271.20
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: 20%	
Final Lumpsum Repair cost	


3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : LIM T S
Tel : 62148398
Fax : 65468156

Signature : 
Name : KALVIN
Date : 31/5/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees	*****			
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305164718
REGN NO : SHA2222M
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ
DATE OF REGN : 17.03.2017
DATE/TIME IN : 25.05.2018 16:30
ACCIDENT DATE : 25.05.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-2282-G	REAR BUMPER	1	459.40	20.00	367.52
0002 04-01-0104-2360-G	REAR BUMPER UNDER COVER	1	270.10	20.00	216.08
0003 04-01-0302-2267-G	REAR BUMPER CLIPS	10	22.00	20.00	17.60
0004 04-01-0103-1150-A	REAR BUMPER MAT	1	50.00		50.00


SUB-TOTAL : 651.20

JOB NATURE

0000 L	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002 L	R/I REVERSE SENSOR	20.00

SUB-TOTAL : 620.00

TOTAL : 1,271.20


MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE : AUTHORIZED : YES / NO

China Taiping

LKK

OMFORTDELGRO
ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

295 Braddell Road Singapore 574791

Mobile + 65 9383 8280 Facsimile + 65 9380 0755

Workshops

59 Loyang Drive Singapore 548085

24 Serangoon Loop Singapore 738156

383 Sin Ming Drive Singapore 575717

7 Syngate Road Wau Singapore 728791

41 Pandan Road Singapore 106296

6 Delta Avenue 1 Singapore 338537

300 Upper Hill Road Singapore 100033

Date/Time: 28.05.2018 08:08

Page : 1

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO305164718

DMER

S COMFORT TRANSPORTATION PTE LTD

DMER NO. 7010045

ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

IDENT CARD NO.

REGN NO.:

SHA2222M

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ

25.05.2018 16:30

DATE/TIME IN

YR OF MANU.

17.03.2017

TARGET DATE

CHASSIS CODE

KMHC851CVHU022772

COMPLETION DATE/TIME

JOB DESCRIPTION

cident Date: 25.05.2018

TURE: 3P 25.05.18

NO

LABOR CODE

DESCRIPTION

ED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

gement Slip

Exit Pass

o.: SHA2222M

LIMITS

Vehicle No.:

SHA2222M

Service Advisor

Signature/Date

Name of Service Advisor

Date

igned to Service Reception upon collection

To be kept by Security Guard

Mei Kwan (LKKAUTO)

From: Lucas Lee <lucas.lee@sg.cntaiping.com>
Sent: Friday, 1 June, 2018 1:30 PM
To: Mei Kwan (LKKAUTO)
Subject: FW: Direct Settlement - Accident Involving SJG1145D (OI : CTI - SNM18D02643C02) and SHA2222M (TP : LKK REF - CC3/CTI18009740/K1ea3) on 25/05/2018
Attachments: leeSZ_SNM18D02643C01-SJG1145D-LKKDirectSettlementAccidentLtr_CLCR95.264.pdf; MLHM18068458-SJG1145D.pdf
Follow Up Flag: Follow up
Flag Status: Completed
Categories: HMK

Dear Sirs,

Kindly refer to the above attachment.

Case Handler: Elaine Cheong

Lucas Lee
Claims Department (Motor)
China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
Direct (65) 6389 6181
Fax (65) 6222 7175
Email: lucas.lee@sg.cntaiping.com
Website: www.sg.cntaiping.com



Disclaimer :

This message is confidential; its contents do not constitute a commitment by China Taiping Insurance (Singapore) Pte. Ltd. except where provided for in a written agreement between you and China Taiping Insurance (Singapore) Pte. Ltd. Any unauthorized disclosure, use or dissemination, either in whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.

From: Mei Kwan (LKKAUTO) [<mailto:Meikwan@lkkauto.com>]
Sent: Thursday, 31 May, 2018 6:25 PM
To: Claims Dept of CTI
Cc: Elaine Cheong; Lucas Lee; Joy Irene (LKKAUTO); Hsiao Tong (LKKAUTO); Asher Sng (LKKAUTO); Admin A
Subject: Direct Settlement - Accident Involving SJG1145D (OI : CTI - TBA) and SHA2222M (TP : LKK REF - CC3/CTI18009740/K1ea3) on 25/05/2018

WITHOUT PREJUDICE

Dear Sir /Madam,

We refer to the above matter.

This is a TP direct settlement case.

We had inspected TP vehicle SHA 2222M at M/s ComfortDelGro Engineering Pte Ltd (Loyang).

Enclosed for your perusal is:

- Estimated cost of repair
- Preliminary advice
- TP GIA report
- Photographs of TP vehicle in its damaged condition

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 Asher and she can be contacted at DID: 6841 6051.

To check availability of the case handler, you may contact the undersigned.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

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中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

Tel: 6389 6111 Fax: 6222 1033

Website: www.sg.cntaiping.com

Co. Reg. No. 200208384E

Our Reference: **SNM18D02643/C01/5**

Date : **01 JUNE 2018**

via Ordinary & Registered Mail

**TANG WEE MING
BLK 625 BUKIT BATOK CENTRAL
#05-608
SINGAPORE 650625**

Dear Sir / Madam

**ACCIDENT INVOLVING SJG1145D AND SHA2222M ON 25 MAY 2018
ALONG ORCHARD BOULEVARD**

We refer to the abovementioned accident.

Please be advised that the third party vehicle, **SHA2222M** , is filing a third party property claim against your vehicle.

We have appointed **LKK Auto Consultants Pte Ltd**, to administer the said claim on our behalf and they will contact you for more information about the accident.

Kindly render your assistance and co-operation accordingly.

Yours truly,
Claims Department

(This is a computer generated letter and no signature is required.)

CC : LKK Auto Consultants Pte Ltd

Attn : ASHER

Ref : CC3/CT118009740/K1EA3

Contact No : 68416051

via Email : ASHER@LKKAUTO.COM

CC : Agent - (AN0435A) - YETTA INSURANCE AGENCY PTE LTD

F01/LKKDS-2013

COMFORTDELGRO ENGINEERING

Our Ref :
Your Ref :
Date :

T 0518 / SHA2222M /WT(st)

04-Jun-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: 199000449V

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
Shun Industrial Park A
Singapore 768732

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 SHA2222M YOUR INSURED SJG1145D
ON 25.05.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA2222M 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 SJG1145D we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

- 1 Cost of Repair
- 2 6 days Loss of Rental @ \$ 125.19 per day
- 3 Survey Report Fees (Surveyed by M/s LKK)
- 4 LTA Search Fees
- 5 GIA / Police Report Fees
- 6 Towing / Medical / Transportation Fees

\$	1,360.18
\$	751.14
\$	-
\$	7.49
\$	-
\$	-
Sub Total :	\$ 2,118.81

HIRER'S CLAIM

- 7 6 days Loss of Income @ \$ 80.00 per days

\$	480.00
Total Claims :	\$ 2,598.81

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

- a) Original repair bill and photocopies of photographs : 7 pcs.
- b) LTA search slip/s of : SJG1145D
- c) GIA / Police report/s of : SHA2222M
- 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, 7 June 2018 6:01 PM
To: 'SEBASTIAN TWIM@GMAIL.COM'
Subject: ACCIDENT INVOLVING SJG 1145D AND SHA 2222M ON 25/05/2018

Our Ref: CC3/CTI18009740/K1ea3

07 JUNE 2018

TANG WEE MING

Dear Sir/Madam,

ACCIDENT INVOLVING SJG 1145D AND SHA 2222M ON 25/05/2018

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.

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 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGHyundai Ioniq SHA2222M , SJG1145D
ORCHARD BLVD OUTSIDE ION ORCHARD

ON 25-May-18 14:45

I / We

POH WAN TECK

(Hirer) NRIC No.: S1334392F

and/or

(Relief) NRIC No.:

Taxi Number

SHA2222M

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

25-May-2018

Name of Hirer
Hirer NRICPOH WAN TECK
S1334392F

Signature :



Address

119 PASIR RIS STREET 11 #10-501
510119

Contact No.

96790482

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3037741704

Claim No : SNM18D02643C02

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,400.00
DOLLARS TWO THOUSAND AND FOUR HUNDRED 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 2222M
Insured Vehicle No. : SJG 1145D

Date of Loss : 25/05/2018
Place of Accident : ORCHARD BLVD OUTSIDE ION ORCHARD

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 : TANG WEE MING
Driver Name : TANG WEE MING

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.

(1) Global Sum	S\$ 2,400.00
	=====
TOTAL	S\$ 2,400.00
	=====

Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :


CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
50 LEYANG DRIVE
SINGAPORE 508660

Date :

13.7.18

"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

TAX INVOICE

COMPANY REG. NO.: 199506046W
Page: 1

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA2222M

MAKE
HYUNDAI

MODEL
IONIQ

DATE OF REG
17.03.2017

CHASSIS CODE
KMHCB51CVHU022772

INV. NO/DATE
91375723 31.05.2018

JOB NO.
305164718

ODOMETER READING

DATE/TIME IN
25.05.2018 16:30

Description : 3P 25.05.18

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

0001	04-01-0392-2267	FRONT BUMPER PIECE	10	2.20	20.00	17.60
0002	04-01-0104-2282	REAR BUMPER	1	459.40	20.00	367.52
0003	04-01-0104-2360	IONIQ MOULDING ASSY-RR BU	1	270.10	20.00	216.08
0004	04-01-0103-1150	I40VC PROTECTOR MAT	1	50.00	0.00	50.00
SUB-TOTAL			:			651.20

JOB NATURE

0001	L	PANEL BEATING	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	400.00	400.00
0003	L	R/I REVERSE SENSOR	20.00	20.00
SUB-TOTAL			:	620.00

ComfortDelGro Engineering Pte Ltd
Member of COMFORTDELGRO

Head Office:
Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91375723	1,360.18	

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
SHA2222M

MAKE
HYUNDAI

MODEL
IONIQ

DATE OF REG
17.03.2017

CHASSIS CODE
RMHC851CVHU022772

INV. NO/DATE
91375723 31.05.2018

JOB NO.
305164718

ODOMETER READING

DATE/TIME IN
25.05.2018 16:30

Items total		1,271.20
Add GST @	7.000 %	88.98
Invoice amount		1,360.18

Issued by : CHEWSEELENG 01.06.2018 11:24:48
Repair type : CL30/57/57
Payment Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd
Member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

STOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91375723	1,360.18	

Our Ref: CT18050725

Date: 01 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	25/05/2018 @ 14:45 hrs
ALONG	ORCHARD BLVD OUTSIDE ION ORCHARD
INVOLVING	SJG1145D

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 **SHA2222M** (the "Taxi"). The Taxi was hired to **POH WAN TECK IC NO S1334392F** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.19** 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.

DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (1)		DATE	NAME OF DRIVER
				FROM	TO		
24/5	SAH 2222m	2100	331	0740	2100		
25/5	POB 210300	265	265	0750	1625		
25/5	POB 210300	265	265	1630	—		
30/5	accident repair	265	265	1230	—		



Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJG1145D	25 May 2018 / 14:45:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous OK

Asher Sng (LKKAUTO)

From: Catherine Koh Mui Gek <catherinekoh@cdge.com.sg>
Sent: Thursday, 19 July 2018 10:25 AM
To: Asher Sng (LKKAUTO)
Subject: Re: Your Ref: T0518/SHA2222M/WT(st), ACCIDENT INVOLVING SHA 2222M & SJG 1145D ON 25/05/2018

Follow Up Flag: Follow up
Flag Status: Completed

Dear Asher

We have checked with the reporting centre. The letter of authorisation was signed on an electronic signature pad whereas the GIA report was signed manually that resulted in the slight differences.

Thank you.

Best Regards
Catherine Koh
Claims Department | ComfortDelgro Engineering Pte Ltd
Off : 62148733 | Fax : 62141843

From: Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>
Sent: Wednesday, 18 July 2018 5:31:42 PM
To: Catherine Koh Mui Gek
Subject: RE: Your Ref: T0518/SHA2222M/WT(st), ACCIDENT INVOLVING SHA 2222M & SJG 1145D ON 25/05/2018

Without Prejudice

Hi Catherine,

We refer to the above matter.

Please kindly assist to let your client resign the authorisation to act (signature difference from the GIA report).

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

phone: 6841-6051 | email: asher.sng@lkkauto.com | fax: 6741-4108

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

From: Asher Sng (LKKAUTO)
Sent: Thursday, 12 July 2018 5:15 PM
To: 'Catherine Koh Mui Gek' <catherinekoh@cdge.com.sg>
Subject: RE: Your Ref: T0518/SHA2222M/WT(st), ACCIDENT INVOLVING SHA 2222M & SJG 1145D ON 25/05/2018




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				
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CC3/CTI18009740/K1ea3q2		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 07-09-2018		
		Code : CTI		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SJG 1145D	Veh. Inspected	SHA 2222M	
Policy No.	DMPCSN3037741704	Coverage (\$)	0.00	
Claim No.	SNM18D02643C02	Excess (\$)	0.00	
Assign From		Assign Date	28/05/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI IONIQ	c.c	1580	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	KMHC851CVHU022772	Colour	BLUE	
Odometer	210301	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	WEST LAKE	7 mm	
L/H Front Tyre	195/65 R15	WEST LAKE	7 mm	
R/H Rear Tyre	195/65 R15	WEST LAKE	7 mm	
L/H Rear Tyre	195/65 R15	WEST LAKE	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	25/05/2018	Inspection Date	28/05/2018	
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 2222M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER	DEFORMED	459.40	459.40
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	294.80	-
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE (NPA)	SERVICEABLE	-	-
1	REAR BUMPER UNDER COVER	CUT	270.10	270.10
2	REAR BUMPER PROTECTOR (LH/RH) (NPA)	SERVICEABLE	-	-
1	REAR RH FENDER (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-209.26	-150.30
			837.04	601.20
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			185.70	50.00
<u>LABOUR</u>				
	PANEL BEATING .INCLUSIVE OF THE REPAIR OF REAR RH FENDER .		280.00	200.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR .		120.00	20.00
			950.00	620.00
GRAND TOTAL			1,972.74	1,271.20
RECOMMENDED COST OF REPAIRS				1,271.20

Report Ref No. CC3/CT118009740/K1ea3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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