

INS. CASE OWNER:

CC 3 / CTI1800

9742, 12266

LKR:  
IDAC:

Surveyor:

Kalvin

DOI:

ASSIGNMENT

26/8/18

Date / Time:

Registered in Metimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GW 3812A

Claim No.:

SNM18007200

Name of Insured:

CHINA CONSTRUCTION (SOUTH PACIFIC)

Policy No.:

DMLVSN 176767700

Insured Tel No.:

HP:

DEVELOPMENT

Make / Model:

HUSAN

Excess Sec II :SS

D.O.A.:

26/8/18

Place of Accident:

CHANNI AIRPORT TV

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

SHUA TOAH YUN

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability:

% Final ? Yes / No

SHC 1970H



INSRS:

WSP:

Tel:

Liability:

RMKS:

LDKE  
W



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

19/6/18  
TTH

SHC 1970H-7

GW 3812A-7

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OE:

After call ltr to OE: 15/8

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OE:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA :

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

OID rear-ended to TR

RECEIVED 21 AUG 2018

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

16/8/18

Confirm with

William

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost:

SS

909.50

Loss of Rental (LOR):

SS

245.63

(

2.5 days)

Loss of Use (LOU):

SS

125.00

(S

50

x

2.5 days)

Loss of Income (LOI):

SS

(S

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

(Tick only one)

GIA/LTA Search

SS

7.49

Medical:

SS

Disbursement:

SS

(e.g. Tow/ Independent )

Legal Cost

SS

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

SS

1287.62

Global Sum SS:

1280.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

1280.00

Name 1:

COMFORT DELGRO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:

COPY SENT  
26/8/18

108 / 1113

Q. name: Kalvin

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimate Cost: \_\_\_\_\_

OD / 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: 2 days Res.: Yes or NoLump Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHC1970H Yr Regn: 20 Apr 2011Type: M.Car / M.Cycle / Bus / Van / Lorry / Truck / Prime Mover /

Truck / Trailer or

Make: Hyundai Santa Fe c.c. 1991Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 151405 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHET81VMB810298Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16

R: \_\_\_\_\_

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

TOYO / YOKO or Welded

Front

Rear

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 28/5/11 D.O.I. 28/5/11Survey held at (DGE (Loyang))

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

Rear

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

Date / Time	Action / Instruction
31/5/11	Enter US\$850/20% <span style="float: right;">(TI 4/)</span>
	LIS - \$850 + Cred: \$1222.02 / 59%.

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: \_\_\_\_\_

\$ + RS. \$

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/CTI18009742/K1ub3		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 30-05-2018		
		Code : CTI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GW 3812A	Veh. Inspected	SHC 1970H	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	30/05/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	28/05/2018	Inspection Date	28/05/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

ver of COMFORTDELGRO

Date/Time: 28.05.2018 15:17 Page : 1

N ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO305165595

COMFORT TRANSPORTATION PTE LTD 7010045 83 SIN MING DRIVE Singapore SINGAPORE 575717 5508755 (O)	REGN NO: SHC1970H	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL: SONATA	DATE/TIME IN 28.05.2018 11:30
	YR OF MANU: 30.04.2011	TARGET DATE
	CHASSIS CODE: KMHE141VMB810298	COMPLETION DATE/TIME

RD NO.

JOB DESCRIPTION

ent Date: 28.05.2018  
t: 3P 28.05.18

LABOR CODE DESCRIPTION

ASSESSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

nt Slip

Exit Pass

SHC1970H LIMTS

Vehicle No.: SHC1970H

Advisor Signature/Date Name of Service Advisor Date

Service Reception upon collection To be kept by Security Guard



65

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305165595

Date : 31/05/18

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHC1970H

Date of Accident : 28-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 --- GW3812A

2. The finalized amount shall be:

(a) Spare Parts after List discount

(b) Labour Charges

**Total for Part-By-Part Repair Cost**

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20% \$850.00

**Final Lumpsum Repair cost \$850.00**

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

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

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

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:

\_\_\_\_\_

\_\_\_\_\_

## COMFORTDELGRO ENGINEERING PTE LTD

CTE

## REPAIR ESTIMATE\*

VEHICLE NO : SHC 1970H

DATE 28/5/2018 16:07

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper <i>Reform</i>			\$ 578.40	
	Rear Bumper Reinforcement <i>Xue</i>			\$ 483.30	
	Rear Bumper Clip <i>see</i>			\$ 22.00	
	Rear Bumper Sponge <i>Xue</i>			\$ 137.40	
	Rear Bumper Under Cover <i>Xue</i>			\$ 185.80	
	Rear Bumper Protector (LH/RH) <i>X 1/2</i>		\$ 38.00	\$ 76.00	
	<b>SUB TOTAL</b>			\$ 1,482.90	
	<b>LESS 20%</b>			\$ 296.58	
	<b>DISCOUNTED TOTAL</b>			\$ 1,186.32	
	Rear Bumper Reverse Sensor <i>short</i>			\$ 135.70	Nett
	Rear Bumper Advertisement Logo <i>X 11</i>			\$ 50.00	Nett
				\$ 185.70	
	<b>Labour Charge</b>				
	Panel Beating			\$ <del>280.00</del> <sup>200</sup>	
	Spray Painting Charge			\$ <del>250.00</del> <sup>200</sup>	
	Wiring Charge			\$ <del>50.00</del> <sup>X 11</sup>	
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> <sup>X 30</sup>	
	<b>TOTAL LABOUR</b>			\$ 700.00	
	<b>ESTIMATE TOTAL</b>			\$ 2,072.02	
<i>Kelvin (KCK)</i> <i>28/5/8 1635h.</i> <i>2 Pys</i> <i>4/3</i> <i>Athe Reps pth.</i>					
LKK Auto Consultants hence notify the Repairer of the following: • To resurvey before/after spray painting • To display damaged part(s) during resurvey • Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis • No illegal modification(s) is allowed • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company  Acknowledged by Repairer Signature: Date:					
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.					

## Shu Pei (LKKAUTO)

---

**From:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>  
**Sent:** Monday, 18 June 2018 10:44 AM  
**To:** Shu Pei (LKKAUTO); Admin A; Thin Thin (LKKAUTO)  
**Cc:** Sharon Han; Alfred Toh; Chee So Chow; Hsiao Tong (LKKAUTO); KKLau; Olivia Lau (LKKAUTO)  
**Subject:** ACCIDENT INVOLVING GW3812A & SHC1970H (SNM18D02730C02/2)  
**Attachments:** MJAS18074936-GW3812A.pdf

LKK REF: CC3/CTI18009742/K1ub3  
CTI REF: SNM18D02730C02/2 (GW3812A)

Dear Shu Pei/Thin Thin

We refer to the above matter.

Attach herewith Insured's SAS report for your attention and necessary action.

Meanwhile, **please let us have your Preliminary advice and estimated cost of repairs.**

Aside to Sharon, please assist to keep track on the matter.

Best Regards

Alfred Toh  
Senior Executive  
Claims Department  
China Taiping Insurance (Singapore) Pte. Ltd.  
3 Anson Road #16-00 Springleaf Tower Singapore 079909  
DID: +65 6389 6183  
FAX: +65 6224 7478/6224 7175  
Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)  
[alfred.toh@sg.cntaiping.com](mailto:alfred.toh@sg.cntaiping.com)  
[www.sg.cntaiping.com](http://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.*



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 #16-00 Springleaf Tower Singapore 079909  
Tel: 6389 6111 Fax: 6222 1033  
Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)  
Co. Reg. No: 200208384E

Our Reference: **SNM18D02730/C01/2**

Date: **01 JUNE 2018**

via Ordinary & Registered Mail

**CHINA CONSTRUCTION (SOUTH PACIFIC) DEVELOPMENT  
10 HOE CHIANG ROAD  
#27-02 KEPPEL TOWERS  
SINGAPORE 089315**

Dear Sir / Madam

**ACCIDENT INVOLVING GW3812A AND SHC1970H ON 28 MAY 2018  
ALONG AIRPORT BLVD TOWARDS TERMINAL 2**

We refer to the abovementioned accident.

Please be advised that the third party vehicle, **SHC1970H**, 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 soon contact you for more information about the accident. Kindly render your assistance and co-operation accordingly.

We understand that you or your driver has not filed an accident report within 24 hours as per Motor Claims Framework. We would urge you to comply with the condition to file your accident report with your vehicle (whether damaged or not) to us IMMEDIATELY through **LKK Auto Consultants Pte Ltd** or any of our **authorized workshops**. You may log onto our website [www.sg.cntaiping.com](http://www.sg.cntaiping.com) for location of the respective workshops.

We regret to advice that we and/or **LKK Auto Consultants Pte Ltd** will not be handling the third party claim and your NO CLAIM DISCOUNT will be penalized upon renewal of your policy if you fail to comply with the condition of reporting.

Yours truly,  
Claims Department

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

CC : LKK Auto Consultants Pte Ltd

Attn : THIN THIN  
Ref : CC3/CT118009742/K1UB3  
Contact No : 68412360  
via Email : THINTHIN@LKKAUTO.COM

CC : Agent - (BR0072A) - OCW INSURANCE BROKERS PTE LTD

F02/LKKDSANR-2013



Our Ref : T 0518 / SHC1970H /WT(st)  
Your Ref :  
Date : 05-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 8755

www.cdge.com.sg

Company Registration No: 101506048W

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 SHC1970H YOUR INSURED GW 3812A  
AND OTHER ON 28.05.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC1970H 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 GW 3812A we are submitting these claims for your consideration on behalf of the claimants.

## TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 909.50
2	4 days Loss of Rental @ \$ 98.25 per day	\$ 393.00
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 :		\$ 1,309.99

## HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$ 320.00
Total Claims :		\$ 1,629.99

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

- a) Original repair bill and photocopies of photographs : 4 pcs.
- b) LTA search slip/s of : GW 3812A
- c) GIA / Police report/s of : SHC1970H
- 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.

## 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

Defu  
6 Defu Avenue 1  
Singapore 539537

Yishun  
684 Yishun Industrial Park A  
Singapore 768732

## Thin Thin (LKKAUTO)

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**From:** Thin Thin (LKKAUTO)  
**Sent:** Wednesday, 15 August 2018 5:50 PM  
**To:** 'angie@chinaconstruction.com.sg'  
**Subject:** ACCIDENT INVOLVING GW 3812A & SHC 1970H ON 28/05/2018



Auto  
Consultants  
Pte Ltd

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

Our Ref: CC3/CTI18009742/K1ub3

15 AUGUST 2018

**CHINA CONSTRUCTION (SOUTH PACIFIC) DEVELOPMENT CO**  
ATTN: MS ANGIE

Dear Sir/Madam,

**ACCIDENT INVOLVING GW 3812A & SHC 1970H ON 28/05/2018**

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,

THIN THIN HLAING  
Case Handler  
DID: 6841 2360  
Fax: 6741 4108  
Email: [thinthin@lkkauto.com](mailto:thinthin@lkkauto.com)

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

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****SONATA SHC1970H , GW3812A  
AIR PORT BLVD TWDS TERMINAL 2****ON 28-May-18 06:25**

I / We

**PHUI ENG HOE**(Hirer) NRIC No.: **S1378749B**

and/or

(Relief) NRIC No.:

Taxi Number

**SHC1970H**

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

**01-Jun-2018**

Name of Hirer

**PHUI ENG HOE**

Hirer NRIC

**S1378749B**

Signature :



Address

**105 HENDERSON CRESCENT #21-17  
150105**

Contact No.

**97317292**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1767621700

Claim No : SNM18D02730C02/2

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$ 1,280.00

Singapore Dollars One Thousand Two Hundred and Eighty 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. : SHC 1970H  
Insured Vehicle No. : GW 3812A

Date of Loss : 28/05/2018

Place of Accident : AIR PORT BLVD TOWARDS TERMINAL 2

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 : CHINA CONSTRUCTION (SOUTH PACIFIC) DEVELOPMENT CO  
Driver Name : SHUAI TONG YUN

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.

---

Global Sum	:	S\$ 1,280.00
Total	:	S\$ 1,280.00

---

Claimant Name: COMFORT TRANSPORTATION PTE LTD NRIC No : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

16.8.18

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LLOYD DRIVE  
SINGAPORE 304958

"The contents of this document apply to vehicle damages only  
All personal injuries and damages arising therefrom are excluded  
from the ambit and application of this document"

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

**Workshops**

49 Luyang Drive Singapore 508260 24 Serangoon Loop Singapore 758156  
383 Geylang Road Singapore 376717 7 Sungai Kidul Way Singapore 72817  
45 Pandan Road Singapore 608286 501 Yishun Industrial Park A Singapore  
320 Ubi Road 3 Singapore 408649

## TAX INVOICE

COMPANY REG. NO.: 199506048  
Page: 1

3010012

CHINA TAIPING INSURANCE CO(S) PTE L  
SPRINGLEAF TOWER

3 ANSON ROAD #14-05  
SINGAPORE 079909

CONTACT NO: 62002366

VEHICLE NO  
SHC1970H

MAKE  
HYUNDAI

MODEL  
SONATA

DATE OF REG  
30.04.2011

CHASSIS CODE  
KMHET41VMEAS10298

INV. NO/DATE  
91376038 04.06.2011

JOB NO.  
305185593

ODOMETER READING

JOB TYPE

Description : GP 28.05.18

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	850.00
Add GST @ 7.000 %	59.50
<b>Total Invoice amount</b>	<b>909.50</b>

Issued by : CHEWBEELING 04.06.2018 09:29:35  
Repair Type : OLSO/57/57  
Payment Type/Term : Credit 30 days

ComfortDelGro Engineering Pte Ltd  
Member of COMFORTDELGRO

Office:  
3 Braddell Road  
Singapore 579701

Note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

Our Ref: CT18050799

Date: 01 June 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      28/05/2018    @   06:25 hrs  
ALONG                              AIRPORT BLVD TWDS TERMINAL 2  
INVOLVING                      GW3812A

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 **SHC1970H** (the "Taxi"). The Taxi was hired to **PHUI ENG HOE IC NO S1378749B** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$98.25** 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.



## Enquire Vehicle Insurer

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

GW3812A 28 May 2018 / 06:25:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SHC 1970H



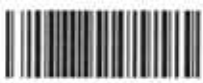


# LKK Auto Consultants Pte Ltd

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/CTI18009742/K1ub3q2		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 23-08-2018		
		Code : CTI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GW 3812A	Veh. Inspected	SHC 1970H	
Policy No.	DMCVSN176721700	Coverage (\$)	0.00	
Claim No.	SNM18D02730C02/2	Excess (\$)	0.00	
Assign From		Assign Date	28/05/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI SONATA	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2011	
Chassis No.	KMHET41VMBA810298	Colour	BLUE	
Odometer	381405	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm	
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm	
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm	
L/H Rear Tyre	215/60 R16	WEST LAKE	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	28/05/2018	Inspection Date	28/05/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		

**LKK Auto Consultants Pte Ltd**

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**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1970H**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	483.30	-
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	TO REPAIR SEE LABOUR	76.00	-
	LESS 20% DISCOUNT		-296.58	-120.08
			1,186.32	480.32
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NOT NECESSARY	50.00	-
			185.70	135.70
	<b><u>LABOUR</u></b>			
	PANEL BEATING INCLUSIVE OF THE REPAIR OF REAR BUMPER PROTECTOR (LH/RH)		280.00	200.00
	SPRAY PAINTING CHARGE		250.00	200.00
	WIRING CHARGE	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR		120.00	30.00
			700.00	430.00
	<b>GRAND TOTAL</b>		<b>2,072.02</b>	<b>1,046.02</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>850.00</b>

Report Ref No. CC3/CTI18009742/K1ub3q2

**KALVIN ANG WEI KUN**

Automotive Assessor / Investigator

**HO LEONG CHUAN**

Automotive Assessor

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