

INS. CASE OWNER:

Hardpoint CC3, UR 9879, 12/03/18

LKK:
IDAC:

Surveyor:

Fallwin

DOI:

ASSIGNMENT

21/5/18

Date / Time:

21/5/18

Registered in Merimen:

21/5/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SLG 5678H

Name of Insured : UR

Insured Tel No. : HP:

Excess Sec II : \$\$ D.O.A : 29/5/18

Is driver the owner? (YES / NO) Nature of Accident :

If NO, Driver Name / Age : ZAMIRAL BIN ABOLVAM

Driver Tel No. : (V/L: YES / NO)

Claim No. : 19280614154

Policy No. : 9999999999

Make / Model : HONDA

Place of Accident : EN TONG ST ST

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

Insured Liability : % Final ? Yes / No

SHO 4x66H

INSRS:
WSP:
Tel:
Liability:
RMKS:WSP
WINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date / Time		STAGE	DATE / PIC
5/6/18	SHO 4x66H - 7	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	JOY 16-6-18
		After call ltr to OI:	
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	<input checked="" 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 checked="" type="checkbox"/>
		LTA / GIA:	<input checked="" type="checkbox"/>
		Medical Bill:	<input checked="" type="checkbox"/>
		PIR:	<input checked="" type="checkbox"/>
		Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
		LOD	<input checked="" type="checkbox"/>
		Payment Breakdown Form:	<input checked="" type="checkbox"/>
		Post-Repair Photos:	<input checked="" type="checkbox"/>
		Others:	<input checked="" type="checkbox"/>

RECEIVED 26 JUN 2018

PRELIMINARY ADVICE	Date/Time:	Sent By:	Confirm by:
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	\$S	(days) Reduction:	%
FINAL SETTLEMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	%	(Agreed / Assessed) BOLA S/N No.:	NIL
Repair Cost:	\$S	2,033	
Loss of Rental (LOR):	\$S	196.50 (2 days)	x98.25 TP VIDEO
Loss of Use (LOU):	\$S	(\$ x 2 days)	OI BEAT
Loss of Income (LOI):	\$S	(\$ x 2 days)	RED LIGHT
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/>	<input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/>	[Tick only one]	
GIA/LTA Search:	\$S	749	
Medical:	\$S	-	
Disbursement:	\$S	(e.g. Tow/ Independent)	
Legal Cost:	\$S	2,336.99	
Total:	\$S	2,335	
GLOBAL SUM \$S:	2,335		
FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	\$S	2,335.xx	Name 1: CUMFORD DELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	\$S	X	Name 2: X
Payee 3: (Strike if N.A.)	\$S		Name 3: X

COPY SENT
26/6/18

(08/11/31)

Q Vehicle: 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. Repair: 2 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: SHD 42 664 Yr Regn: 24 May 2012
Type: M.Car / M.Cycle / Bus / Van / Lorry / T ☒ / Prime Mover /

Truck / Trailer or

Make: Hyundai Santa cc 1900Colour: Blue A/C: Insured ☒ Std / NI / NASp. Reading: 168 952 T/Radio: Insured ☒ Std / NI / NA

Eng/No: _____

C/No: KMHSTX14A CA 825205Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder ☒ / Jammed / Leaked / Burnt orBrake: Inorder ☒ / Jammed / Leaked / Burnt orModi: Nil / S/Rim / Std A/Rim orTyre Size: F: 215/60 R16

R: _____

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

TOYO / YOKO or

Wenthe.

Front

Rear

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 29/5/18 D.O.I. 30/5/18Survey held at CDE (Layang)

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

N/S Frnt.

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

Date / Time	Action / Instruction
	<u>L/S \$1,900.xx</u>
	<u>RC (\$3,530.75 / 65%)</u>
	<u>Azh</u>
	<u>42</u>

Data/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Data/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + 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

AIG ASIA PACIFIC INSURANCE PTE LTD

Ref : CC3/LCR18009879/K1jb3

78 SHENTON WAY #08-16
CHARTIS BUILDINGS SINGAPORE 079120

Date : 31-05-2018



Code : LCR

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLG 5678H	Veh. Inspected	SHD 4266H
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	31/05/2018

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

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5. General Information

Accident Date	29/05/2018	Inspection Date	30/05/2018
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.
--

member of COMFORTDELGRO

Date/Time: 30.05.2018 11:09 Page : 1

Sam: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 3827895 JC NO 305166033

TOMER VS. COMFORT TRANSPORTATION PTE LTD TOMER NO. 7010045 RESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (P)		REGN NO. SHD4266H	MILEAGE
		MAKE HYUNDAI	FUEL E.....1/2.....F
		MODEL SONATA	DATE/TIME IN 29.05.2018 23:05
		YR OF MANU. 24.05.2012	TARGET DATE
		CHASSIS CODE KMHET41VMCA825205	COMPLETION DATE/TIME

AIG

OUNT CARD NO.

JOB DESCRIPTION

ccident Date: 29.05.2018
 ATURE: 3P 29.05.2018

/NO	LABOR CODE	DESCRIPTION
00010	23-01	TOWING FEE — <i>#60</i>

CKED & PASSED OUT BY: _____

SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
/edgement Slip No.: SHD4266H LKE		Exit Pass Vehicle No.: SHD4266H	
Signature/Date <i>Kalwan</i>		Name of Service Advisor Date	
returned to Service Reception upon collection		To be kept by Security Guard	



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition			
1. Date: <u>29/05/18</u> Time Received: <u>23 45</u>		3. Vehicle Type:	
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer: <u>Mahendran</u> Contact No.: <u>93895857</u> Vehicle No.: <u>SHD 4266 H</u> Make / Model / Colour: <u>Sauata</u> Email: _____		<input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	
		4. Type of Towing:	
		<input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up	
		5. Nature of Service:	
		<input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	
7. Location: <u>100A EU Tong Sen St</u>		6. Parts Replaced/Remarks:	
9. Preferred Workshop:			
<input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____		8. Vehicle Tow - In Workshop:	
		<input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi	
10. Odometer Reading: _____ Fuel Level: <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E		11. Radio / CD Player	
		<input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	
Job Attended			
12. Tow Truck / Recovery Van: <input type="checkbox"/> VRS <input checked="" type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS			
Name of Driver: _____			
Vehicle No.: <u>YN 3901K</u>			
Time Dispatch: <u>23 45</u>			
Time of Arrival: <u>00 05</u>			
Time Completed: <u>00 45</u>			
		 #: Cracked X: Dented /: Scratched O: Missing Signature of Customer: _____	
Cash Invoice Details (if applicable)			
13. Cash Invoice No.: _____			
Customer Acknowledgement			
a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.			
b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.			
c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.			
<u>29/05/18</u> Date		<u>00 05</u> Time	
		Signature of Customer: _____	
14. WORKSHOP			
Name of Attending Staff/Guard		Date & Time of Arrival	
		Signature of Attending Staff/Guard	

COMFORTDELGRO ENGINEERING

Our Job Ref No 305166033
Date : 11/06/18

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



FINALIZATION FORM

To : LKK
Attn : Mr KALVIN ANG
Vehicle Reg No. SHD4266H CTPL

Fax :

29.05.18

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

1. The repair job shall bill to: AIG --- SLG5678H
 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% \$1,900.00
Final Lumpsum Repair cost \$1,900.00
 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.

Signature :
Name : LIM KWOK ENG
Tel : 62148316
Fax : 65468156
- We confirm the estimates and finalized amount

Signature :
Name : KALVIN ANG
Date : 11/6/18

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:

REPAIR ESTIMATE*

VEHICLE NO : SHD 4266H

DATE 30/5/2018 10:33

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover — <i>Refined</i>			\$ 538.80
	Front Bumper Sponge x <i>su</i>			\$ 136.30
	Front Bumper Reinforcement <i>su</i>			\$ 504.10
	Front Bumper Bracket Top (LH/RH) x <i>su</i>	\$	22.40	\$ 44.80
	Front Bumper Protector (LH/RH) x <i>su</i>	\$	29.20	\$ 58.40
	Front Bumper Bracket (LH/RH) x <i>su</i>	\$	20.10	\$ 40.20
	Headlamp Support Panel Assy x <i>su</i>			\$ 1,023.00
	Headlamp (LH/RH) <i>U/Ca RH x su</i>	\$	797.90	\$ 1,595.80
	Headlamp Halogen Bulb (LH/RH) x <i>su</i>	\$	13.80	\$ 27.60
	Front Fender (LH) — <i>Ref</i>			\$ 593.00
	Front Fender Shield (LH) x <i>su</i>			\$ 86.00
	Front Fender Retainer x <i>su</i>			\$ 9.20
	SUB TOTAL			\$ 4,657.20
	LESS 20%			\$ 931.44
	DISCOUNTED TOTAL			\$ 3,725.76
	Front Fender Advertisement Logo (LH) — <i>su</i>			\$ 100.00
	Front Number Plate x <i>su</i>			\$ 25.00
	Front No Plate Trim Cover x <i>su</i>			\$ 30.00
				\$ 155.00
	Labour Charge			
	Panel Beating			\$ 850.00 <i>300</i>
	Spray Painting Charge			\$ 400.00 <i>360</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00 <i>20</i>
	Towing Charge			\$ 80.00 <i>60</i>
	Remove/Refix Aircon & Refill Gas			\$ 150.00 <i>40</i>
	TOTAL LABOUR			\$ 1,550.00
	ESTIMATE TOTAL			\$ 5,430.76
<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>				

TOTAL LABOUR

ESTIMATE TOTAL

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
- Item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Our Ref : T 0518 / SHD4266H /CL(st)
Your Ref: _____
Date : 18-Jun-18

AIG ASIA PACIFIC INSURANCE PTE LTD
CHARTIS Building
78 Shenton Way
#07-16
Singapore 079120

Attn : Motor Claims Department WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHD4266H YOUR INSURED SLG5678H
AND OTHER ON 29.05.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHD4266H** 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 **SLG5678H** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,033.00
2	2 days Loss of Rental @ \$ 98.25 per day	\$ 196.50
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	GIA / LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation	\$ -
Sub Total :		\$ 2,236.99

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 2,396.99

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

- a) Original repair bill and photocopies of photographs : 8 pcs.
b) LTA search slip/s of : SLG5678H
c) GIA / Police report/s of : SHD4266H
d) Letter of authority from owner / hirer / operator
(X) Photograph/s of Accident Scene () Certificate of Insurance
() Witness statement/s (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.

CDGE Taxi Claims Dept

59 Loyang Drive 4th Floor

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. 199600488W

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 408849

Senoko

24 Senoko Loop
Singapore 758156

Sungei Kadut

7 Sungei Kadut Way
Singapore 725791

Yishun

501 Yishun Industrial Park A
Singapore 768732

Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Saturday, 16 June 2018 3:13 PM
To: 'Eileen, May Hwee Yap'
Cc: Admin A; 'Insurance LCR SG'
Subject: ACCIDENT INVOLVING SLG 5678H (LCR) & SHD 4266H ON 29/05/2018 (23:05) EU TONG SEN ST.

16 June 2018

LION CITY RENTALS PTE LTD

Policy Holder

Your Ref: SLG 5678H
Our Ref: CC3/LCR18009879/K1jb3

Dear Sir/Madam,

ACCIDENT INVOLVING SLG 5678H (LCR) & SHD 4266H ON 29/05/2018 (23:05) EU TONG SEN ST.

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 **SHD 4266H** 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
ALONG****SONATA SHD4266H , SLG5678H****ON 29-May-18 23:05****TEO HONG ROAD X JUNCTION OF EU TONG SEN STREET.**

I / We

MOHAN S/O RANGARAJU (Hirer) NRIC No.: **S1843026F**

and/or

MAHEDRAN S/O ERASAP... (Relief) NRIC No.: **S2179369H**

Taxi Number

SHD4266H

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

30-May-2018

Name of Hirer

MOHAN S/O RANGARAJU

Hirer NRIC

S1843026F

Signature :



Address

**255 KIM KEAT AVENUE #04-138
310255**

Contact No.

90702640

Name of Relief

MAHEDRAN S/O ERASAPPAN

Relief NRIC

S2179369H

Signature :



Address

**255 KIM KEAT AVENUE 08-134
310255**

Contact No.

93895857

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 S\$2,335.00 (Global Sum) for vehicle no. SHD 4266H that was damaged pursuant to the accident which occurred on 29/05/2018 (date) along EU TONG SEN STREET (location) involving vehicle no/s SLG 5678H. This is pursuant to the inspection conducted on 30/05/2018 (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 SHD 4266H 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 SHD 4266H (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 25 (day) of 06 (month) 2018 (year)



KWK

Signed by appointed surveyor

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
205 BRADDELL ROAD
SINGAPORE 578701

Signed by "the workshop" (with chop)

"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

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#06-16 78 SHENTON WAY, CHARTIS BUILD
SINGAPORE 079120

CONTACT NO: 64193000 3225094

VEHICLE NO
SHD4266H

MAKE
HYUNDAI

MODEL
SONATA

DATE OF REG
24.05.2012

CHASSIS CODE
KMHT41VMCA825205

INV. NO/DATE
91377779 13.06.2018

JOB NO.
305166033

ODOMETER READING

JOB TYPE

Description : 3P 29.05.2018

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,900.00
Add GST @ 7.000 %	133.00
Total Invoice amount	2,033.00

Issued by : CHEWBEELING 13.06.2018 10:33:02
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

WE WILL BE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR GEAR OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.

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

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

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

Our Ref: CT18050843

Date: 12 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 29/05/2018 @ 23:05 hrs
ALONG TEO HONG ROAD X JUNCTION OF EU TONG SEN
STREET.
INVOLVING SLG5678H

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 **SHD4266H** (the "Taxi"). The Taxi was hired to **MOHAN S/O RANGARAJU IC NO S1843026F** 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.

DING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING				MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO			1	2	3	4		FROM	TO
87	430.8	10.15	01.45	23/05/18	Moham	1	6	7	0	7	05.50	22.00
18	331.1	14.00	23.45	24/05/18	Moham	1	6	7	4	4	05.50	23.00
32	413.5	05.50	23.50	26/05/18	Moham	1	6	7	8	3	10.30	12.50
78	345.7	05.50	23.00	27/05/18	Moham	1	6	8	2	6	11.50	02.45
16	338.3	05.50	23.45	28/05/18	Moham	1	6	8	3	5	08.10	17.15
69	253.2	05.50	23.00	28/05/18	Muhamd an	1	6	8	6	4	05.17.45	03.40
66	396.5	05.50	01.05	29/05/18	Moham	1	6	8	8	2	08.40	17.55
84	218.0	10.00	00.30	29/05/18	Muhamd an	1	6	8	9	5	18.00	23.40
49	270.1	12.30	23.00	29/5/18	Accident	Mileage stop for 2 days				1	23.7	—
90	240.7	05.50	18.30	31/5/18	Repair					1	23.05	—
88	297.8	05.50	23.45			Mileage stop for 2 days				—	—	14.30

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLG5678H	29 May 2018 / 23:05:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

Previous OK

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

Express

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Jun 2018 Edit Reg		30 May 2018 00:00 Edit Adj Rpt	S\$1,900.00 Edit Estimates	S\$1,900.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	LION CITY RENTALS PTE LTD , Co. Reg. No.: 201624597K								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHD4266H	Date of Loss:	29/05/2018 23:00 - :59 [72 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 1922806141SG	Policy/Cover Note No.:	0999994811						
Vehicle Reg. No. (Insured):	SLG5678H	Policy No. (Claimant):	D-18088936MFSH						
		Excess:							
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Ng, Hai-Chuan] Hai-Chuan.Ng@aig.com								
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 11/06/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SHD4266H (1922806141SG)
[SLG5678H]
TP
COMFORT TRANSPORTATION PTE LTD
May 29 2018 11:00PM
[LION CITY RENTALS PTE LTD]
ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter Upload Video Upload Audio			View View in Browser	
Video			1 per page <input type="checkbox"/> <input checked="" type="checkbox"/>	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	25/06/18 13:41	Video - Accident	Load AVI	
Letters/Correspondences			1 per page <input type="checkbox"/> <input checked="" type="checkbox"/>	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	(Draft)	Third Party Express Settlement - Payment Breakdown	Edit	
Photos/Images			3 per page <input type="checkbox"/> <input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
2	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
3	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
4	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
5	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
6	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
7	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
8	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
9	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
10	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
11	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
12	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
13	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
14	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
15	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
16	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
17	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
18	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
19	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
20	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
21	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
22	01/06/18 08:03	General View	Load JPG	<input checked="" type="checkbox"/>
23	01/06/18 08:31	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
24	01/06/18 08:31	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
25	01/06/18 08:31	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
26	01/06/18 08:31	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page <input type="checkbox"/> <input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	31/05/18 19:17	TP GIA REPORT	Load PDF	
2	27/06/18 08:51	WORKSHOP INVOICE	Load PDF	

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)		Thumbnail Print
3	27/06/18 08:51	AUTHORISATION TO ACT FORM		Load PDF
4	27/06/18 08:51	Release Voucher		Load PDF
5	27/06/18 08:51	RENTAL RECEIPT		Load PDF
6	27/06/18 08:51	LTA SEARCH		Load PDF
7	27/06/18 08:51	LETTER TO OI		Load PDF
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)		Thumbnail Print
1	04/06/18 14:53	OI GIA REPORT		Load PDF

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SLG5678H (Insd veh)	Model:	HYUNDAI SONATA 2.0 (A)
	SHD4266H (TP veh)		
Date of Accident:	29/05/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> [X] Yes	<input type="checkbox"/> [] No
Repair Estimate	:	\$	5,821.61
Final Repair Cost	:	\$	2,335.00
Loss of Use	:	\$	2.00 days at \$50.00 per day
Rental (if any)	:	\$	2 days
LTA / GIA Search Fee	:	\$	
Others:	:	\$	
	:	\$	
Final Settlement Sum (Global Sum)	:	\$	2,335.00

Is Third Party Workshop GIA Registered? ☒ [X] YES ☐ [] NO (Kindly indicate below)

A) For **Non GIA Registered Workshop**: Agreed Liability _____ (%)

B) For **GIA Registered Workshop**: BOLA Applicable: Yes/ No BOLA Scenario No: _____

BOLA Liability: _____ 100 _____ (%) Assessed Liability (*): _____ (%)

* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

Remarks _____

Payment Instruction: Payee's Breakdown			
1)	ComfortDelGro Engineering Pte Ltd	:	\$ 2,335.00
2)		:	\$
3)		:	\$
4)		:	\$
5)		:	\$

JOANNE LEE KHANG MIN

27 Jun
2018

LKK Auto Consultants Pte Ltd

Date

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:199807198R)

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/LCR18009879/K1JB3Q2

Date: 27/06/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 0999994811
Claimant Vehicle No : SHD4266H **Insured Vehicle No :** SLG5678H
 Date of Loss: 29/05/2018 Nature of Claim: TP Claim No: 1922806141SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SHD4266H**
 Make & Model: HYUNDAI SONATA, 2.0 (A) Engine No: D4EAC092111
 Reg. Date: 24/05/2012 (Man. Year: 2012) Chassis No: KMHET41VMCA825205
 Colour: Blue Odometer: 168952 km
 Engine Capacity: 1991 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): **Market Value/New Car Price**

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 215/60 R16 Rear Tyre Size: 215/60 R16
 Front Left Side: West Lake 7 mm Rear Left Side: West Lake 7 mm
 Front Right Side: West Lake 7 mm Rear Right Side: West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,880.76	1,643.76	2,237.00	57.64
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,560.00	760.00	800.00	51.28
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,440.76	2,403.76	3,037.00	55.82
Approved Total (Overridden) (S\$)		1,900.00		
(S\$)	5,440.76	1,900.00	3,540.76	65.08
+ GST 7.00/7.00% (S\$)	380.85	133.00	247.85	65.08
Nett Amount (S\$)	5,821.61	2,033.00	3,788.61	65.08
+ Loss of Use (2.0 x S\$50.00/day) (S\$)		100.00		
+ Car Rental (2.0 x S\$98.25/day) (S\$)		196.50		
+ Doc/Search Fee (S\$)		7.49		
Nett Liability (S\$)		2,336.99		
Global Sum Settlement (S\$)		2,335.00		

INSPECTION

Date of Assignment: 30/05/2018

Date Inspected: 30/05/2018 Inspected At: ComfortDelGro Engineering Pte Ltd
(Loyang)
59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 2.0 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		*FRONT BUMPER COVER	Deformed	538.80 FL	*538.80 FL
2	1		*FRONT BUMPER SPONGE	Serviceable	136.30 FL	*- FL
3	1		*FRONT BUMPER REINFORCEMENT	Serviceable	504.10 FL	*- FL
4	2		*FRONT BUMPER BRACKET TOP (LH/RH)	Serviceable	44.80 FL	*- FL
5	2		*FRONT BUMPER PROTECTOR (LH/RH)	Repair	58.40 FL	*- FL
6	2		*FRONT BUMPER BRACKET (LH/RH)	Serviceable	40.20 FL	*- FL
7	1		*HEADLAMP SUPPORT PANEL ASSY	Serviceable	1,023.00 FL	*- FL
8	1		*HEADLAMP (LH/RH)	N/S Cracked / O/S Serviceable	1,595.80 FL	*797.90 FL
9	2		*HEADLAMP HALOGEN BULB (LH/RH)	Serviceable	27.60 FL	*- FL
10	1		*FRONT FENDER (LH)	Dented	593.00 FL	*593.00 FL
11	1		*FRONT FENDER SHIELD (LH)	Serviceable	86.00 FL	*- FL
12	1		*FRONT FENDER RETAINER	Serviceable	9.20 FL	*- FL
13	1		*FRONT FENDER ADVERTISEMENT LOGO (LH)	Necessary	100.00 FS	*100.00 FS
14	1		*FRONT NUMBER PLATE	Serviceable	25.00 FS	*- FS
15	1		*FRONT NO PLATE TRIM COVER	Serviceable	30.00 FS	*- FS

F=Franchise part, S=SpcNett, L=ListItemDisc.

Sub Total (\$\$)	4,812.20	2,029.70
- List Item Discount on L Items 20.00/20.00% (\$\$)	931.44	385.94
Total Parts (\$\$)	3,880.76	1,643.76

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	850.00	300.00
2	SPRAY PAINTING CHARGE	New	400.00	360.00
3	WIRING CHARGE	New	50.00	20.00
4	TUFF KOTE	New	50.00	20.00
5	TOWING CHARGE	New	60.00	60.00
6	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	0.00
Gross Labour Cost (S\$)			1,560.00	760.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >