

Our Ref : T 0518/ SHC1991Y /WT(st)

Your Ref :

Date : 11-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: 189506048W

AXA Insurance Pte Ltd
8 Shenton Way
#24-01, AXA Tower
Singapore 068811

Attn : Motor Claims Department

WITHOUT PREJUDICE

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
Yishun Industrial Park A
Singapore 768732

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC1991Y YOUR INSURED GBG8947E
AND OTHER _____ ON 28.05.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SHC1991Y** 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 **GBG8947E** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair		\$	3,745.00
2	<u>8</u> days Loss of Rental @	\$	98.25	per day
			\$	786.00
3	Survey Report Fees	(Surveyed by M/s LKK)	\$	-
4	GIA / LTA Search Fee		\$	7.49
5	GIA / Police Report Fees		\$	-
6	Towing / Medical / Transportation Fees		\$	-
	Sub Total :		\$	4,538.49

HIRER'S CLAIM

7	<u>8</u> days Loss of Income @	\$	80.00	per days
			\$	640.00
	Total Claims:		\$	5,178.49

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 : GBG8947E
- c) GIA / Police report/s of : SHC1991Y
- d) Letter of authority from owner / hirer / operator
 - (X) Photocopy/s of Accident Scene Photo/s () Traffic Compound () PIR
 - () Witness statement/s (x) Rental Rate letter (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

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



Joy Irene (LKKAuto)

From: Joy Irene (LKKAuto)
Sent: Tuesday, 26 June 2018 2:47 PM
To: 'carey7273@yahoo.com.sg'
Cc: Admin A
Subject: ACCIDENT INVOLVING GBG 8947E AND SHC 1991Y ALONG SINARAN DRIVE ON 28.05.2018

SONG LUCK OTAH MANUFACTURE

Policy Holder

Dear Sir/Madam,

OUR REF : CC4/ASM18009903/K1ja3
YOUR REF : GBG 8947E

ACCIDENT INVOLVING GBG 8947E AND SHC 1991Y ALONG SINARAN DRIVE ON 28.05.2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s COMFORTDELGRO ENGINEERING PTE LTD, acting on behalf of the owner of SHC 1991Y against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your driver was unable to stop causing the collision. As such, we are of the opinion that liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to joyirene@lkkauto.com within 7 days from the date of this letter if not provided at AXA's reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)

- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should not be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact the undersigned.

Please quote the claim reference when you contact us that we can assist you more effectively.

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 SHC1991Y , GBG8947E

ON 28-May-18 10:00

SINARAN DRIVE TWDS IRRAWADDY RD @ PEDESTRIAN X - ING.

I / We

LOW GEOK TECK

(Hirer) NRIC No.: S0715967F

and/or

PHANG LOY KEOW

(Relief) NRIC No.: S7863325E

Taxi Number

SHC1991Y

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

28-May-2018

Name of Hirer

LOW GEOK TECK

Hirer NRIC

S0715967F

Signature :



Address

112 HO CHING ROAD #01-40
610112

Contact No.

88184456

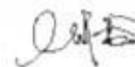
Name of Relief

PHANG LOY KEOW

Relief NRIC

S7863325E

Signature :



Address

166A YUNG KUANG ROAD 15-10
611166

Contact No.



redefining / insurance



CLAIM REF : S8M00ISZ
INSURED : SONG LUCK OTAH MANUFACTURE

DISCHARGE VOUCHER

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated **28 May 2018**, we are authorised to and do hereby give this discharge for ourselves and on behalf of **Comfort Transportation Pte Ltd** and the Hirer **LOW GEOK TECK** of vehicle no. **SHC 1991Y**

Now we **ComfortDelgro Engineering Pte Ltd** for ourselves and the said Hirer and the driver jointly and severally:-

- a) agree to accept the sum of Singapore Dollars **FOUR THOUSAND SEVEN HUNDRED NINETY ONLY (S\$4,790.00)** in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(GBG 8947E)** arising out of an accident with **(SHC 1991Y)** on **28.05.2018**.
- b) declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(GBG 8947E)** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- c) We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of **ComfortDelgro Engineering Pte Ltd** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(GBG 8947E)**.

Dated this 28 day of June 2018

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp _____
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Witness : _____

Name : _____

I/C No : _____

Address : _____
CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

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

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
8 Shenton Way, #24-01 AXA Tower, Singapore 068811
Customer Centre #B1-01
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

The warranty 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"

TAX INVOICE

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO
SHC1991Y

MAKE
HYUNDAI

MODEL
SONATA

DATE OF REG
23.05.2011

CHASSIS CODE
KMHFT41VMBR810274

INV. NO/DATE
91376575 06.06.2018

JOB NO.
305165386

ODOMETER READING

JOB TYPE

Description : 3P 28.05.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		3,500.00
Add GST @	7.000 %	245.00
Total Invoice amount		3,745.00

Issued by : KATHERINETAN 06.06.2018 14:39:12
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED BY OWNERS' RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM EARLY DELIVERY OR NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 3) 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.
- 4) 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 BINDING.

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: CT18050791

Date: 06 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 28/05/2018 @ 10:00 hrs
ALONG SINARAN DR TWDS IRRAWADDY RD @ PEDESTRIAN
X-ING
INVOLVING GBG8947E

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 **SHC1991Y** (the "Taxi"). The Taxi was hired to **LOW GEOK TECK IC NO S0715967F** 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 **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.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GBG8947E	28 May 2018 / 10:00:00	Successful	A12	AXA INSURANCE PTE LTD

Previous

OK

SHC1991Y