

Our Ref : T 0618 / SHD6550Z /JW(st)
Your ref : _____
Date : 12-Jun-18

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

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. 199000000

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 758158

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
401 Yishun Industrial Park A
Singapore 768732

Attn : **Motor Claims Department**

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHD6550Z YOUR INSURED SKC5956M
AND OTHER _____ ON 03.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHD6550Z 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 SKC5956M we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,016.50
2	<u>3</u> days Loss of Rental @ \$ 119.28 per day	\$ 357.84
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 :		\$ 1,381.83

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ 80.00 per day	\$ 240.00
Total Claims:		\$ 1,621.83

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 : SKC5956M
c) GIA / Police report/s of : SHD6550Z
d) Letter of authority from owner / hirer / operator
() Witness statement/s () 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

Jim Wong

Deputy Manager

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

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

Hsiao Tong (LKKAuto)

From: Hsiao Tong (LKKAuto)
Sent: Saturday, 26 October 2019 9:10 AM
To: KHAIRUL.KARIM@HOTMAIL.COM
Subject: ACCIDENT INVOLVING SKC 5956M(EQ) AND SHD 6550Z ALONG/ AT TOA PAYOH LORONG 6 TOWARDS PIE ON 03/06/2018

26 Oct 2019

MR KHAIRUL ANWAR BIN ABD KARIM

Dear Sir/ Mdm

OUR REF : CC3/EQI18010287/K1pa3

YOUR REF : SKC5956M

ACCIDENT INVOLVING SKC 5956M(EQ) AND SHD 6550Z ALONG/ AT TOA PAYOH LORONG 6 TOWARDS PIE ON 03/06/2018

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

We have received a claim from SHD 6550Z against your insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as it is a head-to rear collision. 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 note that your No-Claim Discount (NCD) (if any) will be affected upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGI 40 SHD6550Z , SKC5956M
TOA PAYOH LOR 6 TWDS PIE(CHANGI)

ON 03-Jun-18 14:00

I / We

LIM HOCK HEE

(Hirer) NRIC No.: S1450321H

and/or

(Relief) NRIC No.:

Taxi Number

SHD6550Z

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

04-Jun-2018

Name of Hirer

LIM HOCK HEE

Hirer NRIC

S1450321H

Signature :



Address

115C YISHUN RING ROAD #13-801
763115

Contact No.

90394898

TAX INVOICE

8010325

RQ INSURANCE COMPANY LIMITED

#17-00 5 MAXWELL ROAD TOWER BLOCK
SINGAPORE 069110

CONTACT NO: 62239433

VEHICLE NO
SHD6550Z

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
04.11.2014

CHASSIS CODE
KMHLEB41UMRU061393

INV. NO/DATE
91376978 08.06.2018

JOB NO.
305169396

DIAGNOSTIC READING

JOB TYPE

Description : 3P 03.06.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	950.00
Add GST @ 7.000 %	66.50
Total Invoice amount	1,016.50

Issued by : KATHKINETAN 08.06.2018 15:14:53
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARDS OR OTHER PROPERTY BELONGING TO CUSTOMERS. ALL VEHICLES ARE SERVICE AND TESTED AT OWNERS' RISK.

CUSTOMERS SHALL REPORT 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 ARREAR DUES AND CHARGES TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT. A.C. AFTER 30 DAYS FROM THE EXPIRATION FOR THE PERIOD OF DEFAULT.

PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 15 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: CT18060095

Date: 08 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	03/06/2018 @ 14:00 hrs
ALONG	TOA PAYOH LOR 6 TWDS PIE(CHANGI)
INVOLVING	SKC5956M

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 **SHD6550Z** (the "Taxi"). The Taxi was hired to **LIM HOCK HEE IC NO S1450321H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$119.28** 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.

SHD65507

READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING				MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO								FROM	TO
		3.8	214.9	1/6/2018	223.90	40	138	9	57.85	20.8	16.00	01.00
		2.4	359.8	2/6/2018	328.30	40	174	9	08.90	22.0	09.00	01.00
		141-6	139.2	3/6/2018	130.00	40	188	8		10.0	12.00	22.30
		32.0	4/6/2018	5/6	140.00	40	192	1	16.5		10.30	11.00
							11.20 am					
				4/6/18	Accident				IN		11.20	—
				6/6/18	Repair				OUT		—	1615
				8/6								
				9/6								
				10/6 2018								
				11/6 2018								

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SKC3956M	03 Jun 2018 / 14:00:00	Successful	E04	EQ INSURANCE COMPANY LTD

Previous

OK

SHD 6550Z