COMFORTDELGRO ENGINEERING

Our Ref :	1 0618 / SHD/143J	/VV I (St)			
Your Ref:				S	E Bt. Lt.
Date :	14-Jun-18	CDGE Taxi Claims Dep			Engineering Pte Ltd ad Singapore 579701
		59 Loyang Drive 4th Flr		Ma	inline +65 6383 6280
CHINA INSURA	ANCE CO LTD	Singapore 508969			similie +65 6280 9755
3 ANSON ROA	D				www.cdge.com.sg
#16-00 SPRING	GLEAF TOWER				Registration No: 199506048W
SINGAPORE 0	79909				Workshops
Attn : Motor (Claims Department	WITHOUT PREJUDICE			Braddell 205 Braddell Road Singapore 579701
Dear Sir		OUDTAKE VOUD INCUDE	D 01/	18/4F70V	Loyang 59 Loyang Drive
ACCIDENT IN	IVOLVING OUR TAXI	SHD7143J YOUR INSUREI		06.06.18	Singapore 508969 Sin Ming 383 Sin Ming Drive
\\\\-\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		or Comfort Transportation Pte Ltd	the o	wner of moto	
	norised repair workshop i	nvolved in the captioned accident	with vo	wher or moto	Pandan 45 Pandan Road
Vehicle No :		river concerned have requested a			Singapore 609286
		ainst the party responsible for all			Ubi
	e damage to the vehicle.	allist the party responsible for all t	аррпоа	bic matters	320 Ubi Road 3 Singapore 408649
· ·	N770		Z\AIAE	70V	Senoko
		gent act of your insured driving S			24 Senoko Loop Singapore 758156
we are submitti	ng these claims for your o	consideration on behalf of the clai	mants.		Sungei Kadut
TAXI OWNER	'S CLAIM				7 Sungei Kadut Way Singapore 728791
1 Cost of F			\$	1,194.31	- VC-1
22	_days Loss of Rental @		\$	234.00	shun Industrial Park A
	Report Fees (Surveyed b	y M/s LKK)	\$	7.49	Singapore 768732
	rch Fees		\$	7.49	-
	lice Report Fees Medical / Transporation I	Enos	\$		-
6 Towing /	Medical / Transporation	Sub Total		1,435.80	=
HIRER'S CLAI	IM	045 104	u	1,100.00	-
7 2	days Loss of Income @	\$ 80.00 per days	\$	160.00	_
		Total Claim	ıs: \$	1,595.80	
					•
was believe on the me		ments to support the claims: -		4	pcs.
	repair bill and photocopie		-	4	_ pcs.
	rch slip/s of :	SKW4578Y SHD7143J			
/	lice report/s of :				
	authority from owner / him				
		edical bill/receipts () Certificate of			lattar
1.40 15070 040 50		n (x) Downtime/Mileage record	,) Rental Rate	ietter
Kindly look into soon as possib		ar from you on the settlement of th	ne said	claims as	
Please note that to any persona	at it is a condition of any s I injury claim (if any) of th	settlement reached that it shall be e taxi driver.	withou	t prejudice	
Yours faithfully 'William 'Lan					
vviiillii Luil					

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

Deputy Manager

CDGE Claims Department

A member of COMFORTDELGRO

Tel: 6214 8737 Fax: 6214 1843 Email: williamtan@cdge.com.sg









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

Our Ref: CC3/CTI18010469/K1pb3

17 DEC 2018

19 CARS RENTAL PTE LTD 372D LORONG CHUAN GOLDEN CHUAN VILLE SINGAPORE 556816

Dear Sir/Madam,

ACCIDENT INVOLVING SKW 4578Y AND SHD 7143J ON 06/06/2018

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

We have received a claim from SHD 7143J against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your driver's favour. 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,

CHEW HSIAO TONG

Case Handler DID: 6742 3197 FAX: 6741 4108

EMAIL: chewht@lkkauto.com

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING

i 40 SHD7143J , SKW4578Y

ON 06-Jun-18 17:25

ALONG

UPPER SERANGOON RD TWDS KOVAN NEAR POTONG PASIR MRT

I / We

LIM HAI HENG

(Hirer) NRIC No.:

S1208494C

and/or

(Relief) NRIC No.:

Taxi Number

SHD7143J

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

07-Jun-2018

Name of Hirer

LIM HAI HENG

Hirer NRIC

S1208494C

Signature:

Address

660 JALAN TENAGA #13-128

410660

Contact No.

98737556

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN1688931701 Claim No : SNM18D02906C02/8

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : \$\$1,450.00

Singapore Dollars ONE THOUSAND FOUR HUNDRED FIFTY 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 / $^{\circ}$ damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHD7143J Insured Vehicle No. : SKW4578Y

Date of Loss

: 06/06/2018

Place of Accident : UPPER SERANGOON RD TWDS KOVAN NEAR POTONG PASIR MRT

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

: 19 CARS RENTAL PTE LTD

Driver Name

: CHIA CHUAN, JOEL (XIE CHUAN)

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\$ 1,450.00

S\$ 1,450.00

==========

CLAIMS DEPARTMENT

COMFORTDELGRO ENGINEERING PTE LTD

59 LOYANG DRIVE

Claimant Name: SINGAPORE 5080F

NRIC No :

Signature

Date

28.1.19

"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 LTC

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

COMPANY REG. NO.: 199506048W Page:

8010012

CHINA TAIPING INSURANCE CO(S) PTE I. SPRINGLEAF TOWER

3 ANSON ROAD #16-00 SINGAPORE SG 079909

CONTACT NO: 62222366

VEHCLE NO SHD7143.J

INV. NO/DATK 91377590 12.06.2018

MAKK HYUNDAI

JOB NO. 305170818

M()1)K1. T - 40

OTXIMETER READING

DATE OF REG 10.11.2016

DATE/TIME IN 07.06.2018 10:00

30.00

430.00

CHASSIS CODE

200.00

30.00

SUB-TOTAL

Desci	ription: 3P 06.06	.18	KMHT,R41	UMHU096307		
S/No	Part No.		Qt.y	Unit Price	%Disc	Net.
PART	REQUISITION		ь		310001100000000000000000000000000000000	
0001	04-01-0103-0579	140VC COVER ASSY-RR BUMPE	A	603,60	20.00	482.88
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
0003	04-01-0103-1150	140VC PROTECTOR MAT	1	50.00	0.00	50.00
0004	09-01-9999-0068	HYUNDAI REVERSE SENSOR AS	Tan.	1.35.70	0.00	1.35.70
			SUR-TOTAL	2	68	36.18
JOB N	IATURE					
0001	T	TARTET THE REST TO THE	0.0	00		
0001	Ī.,	PANEL BEATING REAR	/1.	0,00	200.00	1

SPRAYPAINT ON AFFECTED AREA

REMOVE/REFIX REVERSE SENSOR

ComfortDelGro Engineering Pte Ltd

23-502

A member of COMFORTDELGRO

0003

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91377590	1,194.31	
		4	
	,	\(

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY



A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

Workshops 59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

24 Senoko Loop Singapore 758156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 76

COMPANY REG. NO.: 199506048W

Page:

8010012

CHINA TAIPING INSURANCE CO(S) PTE I, SPRINGLEAF TOWER

3 ANSON ROAD #16-00 SINGAPORE SG 079909

CONTACT NO: 62222366

VEHCLE NO SHD7143J

INV. NO/DATE 91377590 12.06.2018

MAKE HYUNDAI JOB NO. 305170818

MODEL. T - 40

ODOMETER READING

DATE OF REG 10.11.2016

DATE/TIME IN 07.06.2018 10:00

CHASSIS CODE KMHLB41UMHU096307

Items total

1,116,18

Add GST @

7,000 %

Invoice amount

1,194.31

Issued by

KATHERINETAN 12.06.2018 13:41:24

Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. **AMOUNT** BANK/CHQ No. 1,194.31 91377590 8010012

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT18

CT18060203

Date: 12 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

06/06/2018 @ 17:25 hrs

ALONG

UPPER SERANGOON RD TWDS KOVAN NEAR

POTONG PASIR MRT

INVOLVING

SKW4578Y

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 SHD7143J (the "Taxi"). The Taxi was hired to LIM HAI HENG IC NO S1208494C a registered hirer-operator of Comfort Transportation Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$117.00 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.

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	HOURS OPERATED (TIME)	OT.	(\						of control and the state of the control and th		
	HOURS OPE	FROM	(000)	W15,								
	MILEAGE TRAVELLED (KM)		3	CWT					V.			
4429	MILEAGE READING		7		>							
		NAME OF DRIVER	Accident	Jacan								
		DATE	0706 W	080648								
	ATED (TIME)	10				0 3						
	HOURS OPERATED (TIME)	FROM										
	MILEAGE	TRAVELLED	(Last)								3	
	.2	EADING										

Ů.

Enquire Vehicle Insurer

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

SKW4578Y 06 Jun 2018 / 17:25:00 Successful

C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

Sun 71437 :