

Date/Time	STAGE	DATE / PIC
17/06/18 Asher	Non-Reporting Iir (1st):	12.6.18
	Non-Reporting Iir (2nd):	
	Non-Reporting Iir (Final):	
	Notification Iir (if non-pickup):	
	Call Of:	Ena 12.9.18
	After call Iir to Of:	
	Documentation Check List:	Handler Typist
	Notification Iir (if non-pickup):	<input type="checkbox"/> <input type="checkbox"/>
	After call Iir to Of:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Authorization To Act:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Towing Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>

<b>PRELIMINARY ADVICE</b>		Date/Time: 12/11/18	Sent By: [Signature]	Post-Repair Photos: <input type="checkbox"/> <input type="checkbox"/>	Others: <input type="checkbox"/> <input type="checkbox"/>
<b>FINALIZATION</b>		Date/Time: 12-11-18	Confirm with: [Signature]	Confirm by: [Signature]	
Repair Cost:	\$5,400.00	( 2 days) Reduction:	85 %	Email: <input checked="" type="checkbox"/>	Call: <input type="checkbox"/>
<b>FINAL SETTLEMENT</b>		Date/Time: 12-10-18	Confirm with: [Signature]	Email: <input checked="" type="checkbox"/>	Call: <input type="checkbox"/>
Final Liability:	\$0.00	(Agreed / Assessed) BOLA S/N No.:	Nil	If NO or B 28, Ass. Lia:	
Repair Cost:	\$5,400.00	CA BORDERS INTO TP		[Signature]	
Loss of Rental (LOR):	\$5,250.00	( 2 days) =	\$10,500		
Loss of Use (LOU):	\$5 -	(5 x days)			
Loss of Income (LOI):	\$5,000.00	(50 x days)			
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOU <input checked="" type="checkbox"/>	[Tick only one]		
GIA/TA Search:	\$52.00				
Medical:	\$5 -	1) Claim status: Normal/Reject/Private Settle			
Disbursement:	\$5 -	2) Report Format: TP			
Legal Cost:	\$5 -	3) Survey fee: +350			
<b>Total:</b>	\$5,400.00	<b>Global Sum \$5:</b>			
<b>FINAL PAYMENT</b>		Date/Time: 12-10-18	Confirm with: [Signature]	Email: <input checked="" type="checkbox"/>	Call: <input type="checkbox"/>
Payee 1:	\$5,400.00	Name 1:	CONFIDENTIAL - ENHANCED, PE CO		
Payee 2: (Strike if N.A.)	\$5 -	Name 2:			
Payee 3: (Strike if N.A.)	\$5 -	Name 3:			

Assignment

Kalvin

REF:

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To inspect 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 No  
 Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No: **SHA 72852** Yr Regn: **214 214**  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / T~~o~~ / Prime Mover /  
 Truck / Trailer or  
 Make: **Hyundai IX** C.C. **1685**  
 Colour: **Blue** A/C: Ins~~ured~~ / Std / NI / NA  
 Sp. Reading: **642410** T/Radio: Ins~~ured~~ / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: **KMHLDX14ME4056032**  
 Gen. Cond: **G** / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Modl: Nil / S/Rim / ST~~A~~ / Rim or  
 Tyre Size: F: **205/60R16**  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or **Kontrol**  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. **7** mm R/Bal. **7** mm  
 L/Bal. **7** mm L/Bal. **7** mm  
 D.O.A. **3/6/8** D.O.I. **11/6/8**  
 Survey held at **CDHE (Loyang)**  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
**ops Res**  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time: **12/6/8** Action / Instruction: **Call 1st 4s \$600/2hy.**  
**(380-133316 85%)**

**AXA**  
**4s**

Date/Time. File Pass to?

☐ : Preli. Report  
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Date/Time. File Return to?

Add Fee: ☐ : Site Insp (\$)  
☐ : Interview (\$)  
☐ : Tech. Invs (\$)

☐ : S + RS \$  
☐ : Photos  
☐ : Others

Report Format :

## COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHA 7285Z

DATE 11/6/2018 10:00

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Fender (RH) <i>X Repair</i>			\$ 2,020.10	
	Rear Fender Inner Lining (RH) <i>X one</i>			\$ 164.40	
	Rear Windscreen Moulding <i>X "</i>			\$ 60.00	
	Rear Wheel Hub Cap, RH <i>- 1 piece</i>			\$ 150.70	
	<i>Rear Bumper X Repair</i>				
	<b>SUB TOTAL</b>			<b>\$ 2,395.20</b>	
	<b>LESS 20%</b>			<b>\$ 479.04</b>	
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,916.16</b>	
	Rear Bumper Rubber Mat <i>X "</i>			\$ 50.00	Nett
	Rear Windscreen Sealant <i>X "</i>			\$ 46.00	Nett
				<b>\$ 96.00</b>	
	<b>Labour Charge</b>			<i>200</i>	
	Panel Beating			\$ <del>850.00</del>	
	Spray Painting Charge			\$ <del>500.00</del>	<i>X "</i>
	Wiring Charge			\$ <del>50.00</del>	<i>X "</i>
	Tuff Kote			\$ <del>50.00</del>	<i>X "</i>
	Remove/Refix Cushion & Upholstery Rear			\$ <del>150.00</del>	<i>X "</i>
	Remove/Refix Rear Windscreen Glass			\$ <del>120.00</del>	<i>X "</i>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del>	<i>X "</i>
	Rear Wheel Alignment			\$ <del>80.00</del>	<i>X "</i>
	<b>TOTAL LABOUR</b>			<b>\$ 1,920.00</b>	
	<i>Kali 11/6/18</i>				
	<i>11/6/18 1200 hr</i>				
	<i>2017</i>				
	<i>45 After Repair</i>				
	<b>ESTIMATE TOTAL</b>			<b>\$ 3,932.16</b>	
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.					

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification is allowed
- Supplementary costs must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Our Job Ref No : 305173482

Date : 12/06/18

## COMFORTDELGRO ENGINEERING

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

### FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHA7285Z

Date of Accident : 03/05/18

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

1. The repair job shall bill to: AXA --- SLR8100E  
###
  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% **\$600.00**  
**Final Lumpsum Repair cost**
  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 : JUMANI  
Tel : 6214 8315  
Fax : 65468156
- Signature :   
Name : K.oh  
Date : 12/6/18

### 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		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Final Amount Subject to Insurance Approval

ARC Repair TP(CLSO)1

**JOB CARD** Sales Order:

JC NO305173482

COMFORT TRANSPORTATION PTE LTD  
7010045  
103 SIN MING DRIVE  
Singapore SINGAPORE 575717  
55508755 (O)

REGN NO: SHA7285Z	MILEAGE
MAKE: HYUNDAI	FUEL E 1/2 F
MODEL I-40	DATE/TIME IN 11.06.2018 08:00
YR OF MANU 02.07.2014	TARGET DATE
CHASSIS CODE KMHLE41UMEU056037	COMPLETION DATE/TIME

ARD NO.

JOB DESCRIPTION

ent Date: 03.06.2018  
3: 3P 03.06.18

LABOR CODE

DESCRIPTION

PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nt Slip

Exit Pass

SHA7285Z

JU AXA

Vehicle No.:

SHA7285Z

Advisor

Signature/Date

Name of Service Advisor

Date

> Service Reception upon collection

To be kept by Security Guard

HAH  
JM

DATE 11/6/2018 10:00

**MODEL : HYUNDAI i40**

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Fender (RH) <del>X Repair</del>			\$ 2,020.10
	Rear Fender Inner Lining (RH) X			\$ 164.40
	Rear Windscreen Moulding X			\$ 60.00
	Rear Wheel Hub Cap, RH -			\$ 150.70
	<del>Rear Bumper X Repair</del>			
	<b>SUB TOTAL</b>			<b>\$ 2,395.20</b>
	<b>LESS 20%</b>			<b>\$ 479.04</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,916.16</b>
	Rear Bumper Rubber Mat X			\$ 50.00
	Rear Windscreen Sealant X			\$ 46.00
				<b>\$ 96.00</b>
	<b>Labour Charge</b>			<b>200</b>
	Panel Beating			\$ <del>850.00</del>
	Spray Painting Charge			\$ <del>500.00</del>
	Wiring Charge			\$ <del>50.00</del>
	Tuff Kote			\$ <del>50.00</del>
	Remove/Refix Cushion & Upholstery Rear			\$ <del>150.00</del>
	Remove/Refix Rear Windscreen Glass			\$ <del>120.00</del>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del>
	Rear Wheel Alignment			\$ <del>80.00</del>
	<b>TOTAL LABOUR</b>			<b>\$ 1,920.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 3,932.16</b>

Kali 10/11/21

11/6/21 1200 hrs

20-11

4's After Repair

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification is allowed

Elementary items 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.

## Asher Sng (LKKAuto)

---

**From:** Asher Sng (LKKAuto)  
**Sent:** Wednesday, 29 August 2018 4:46 PM  
**To:** 'Catherine Koh Mui Gek'; 'William Tan Thoo Seng'  
**Subject:** ACCIDENT INVOLVING SHA 7285Z AND SLR 8100E ON 03/06/2018  
**Attachments:** OI SKETCH PLAN.pdf

Your Ref: T0618/SHA7285Z/WT(st)  
Our Ref: CC4/ASM18010583/K1eb3

Without Prejudice

Hi Sir,

We refer to the above matter.

### **ACCIDENT INVOLVING SHA 7285Z AND SLR 8100E ON 03/06/2018**

Enclosed herewith in this email is a copy of our insured's accident report for your perusal.

Our principle would like to request a copy of your client video footage.

Thank You.

Best Regards,

**Asher Sng** | Case Handler

LKK Auto Consultants Pte Ltd

phone: 6841-6051 | email: [asher.sng@lkkauto.com](mailto:asher.sng@lkkauto.com) | fax: 6741-4108

81k 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Our Ref : T 0618/ SHA7285Z /WT(st)

Your Ref :

Date : 14-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. 198002500

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  
Yishun Industrial Park A  
Singapore 768732

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

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA7285Z YOUR INSURED SLR8100E  
AND OTHER \_\_\_\_\_ ON 03.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SHA7285Z 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 SLR8100E we are submitting these claim for your consideration on behalf of the claimants.

## TAXI OWNER'S CLAIM

1	Cost of Repair	\$	642.00
2	<u>2</u> days Loss of Rental @ \$ <u>119.28</u> per day	\$	238.56
3	Survey Report Fees (Surveyed by M/s LKK)	\$	-
4	GIA / LTA Search Fee	\$	2.00
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transportation Fees	\$	-
Sub Total :		\$	882.56

## HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ <u>80.00</u> per days	\$	160.00
Total Claims:		\$	1,042.56

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

- Original repair bill and photocopies of photographs 7 pcs
- LTA search slip/s of : SLR8100E
- GIA / Police report/s of : SHA7285Z
- Letter of authority from owner / hirer / operator
  - ( ) 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**



## Asher Sng (LKKAUTO)

---

**From:** Asher Sng (LKKAUTO)  
**Sent:** Wednesday, 12 September 2018 3:02 PM  
**To:** KANGJIAJOY@GMAIL.COM  
**Subject:** ACCIDENT INVOLVING SLR 8100E AND SHA 7285Z ALONG KPE TUNNEL > ECP EXIT ON 03/06/2018

12 SEPT 2018

KANG JIA

Dear Sir/ Mdm

**OUR REF : CC4/ASM18010583/K1eb3**  
**YOUR REF : SLR 8100E**  
**ACCIDENT INVOLVING SLR 8100E AND SHA 7285Z ALONG KPE TUNNEL > ECP EXIT 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, 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 SHA 7285Z against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had hit Third Party vehicle SHA 7285Z. As such, 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 intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com) within 7 days from the date of this letter **if not provided at our 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 us at 6256 3561 or email us at [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com).

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

Yours sincerely,

Asher  
Case Handler  
DID: 6841 6051  
FAX: 6741 4108  
Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

c.c. AXA Insurance Pte Ltd (AXA)  
(Motor Claims Dept)

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING i 40 SHA7285Z , SLR8100E  
ALONG KPE TUNNEL TO ECP****ON 03-Jun-18 21:20****I / We TAY LIN KEE (Hirer) NRIC No.: S1076188C****and/or YEO LIAN HUA (Relief) NRIC No.: S0125030B****Taxi Number SHA7285Z**

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 TAY LIN KEE  
Hirer NRIC S1076188C**

Signature :

**Address 842 SIMS AVENUE #11-760  
400842****Contact No. 93807234****Name of Relief YEO LIAN HUA  
Relief NRIC S0125030B**

Signature :

**Address 56 LORONG 40 GEYLANG 07--35  
398074****Contact No.**



redefining / insurance

CLAIM REF : S8M00K8M  
INSURED : KANG JIA

**DISCHARGE VOUCHER**

We, COMFORTDELGRO ENGINEERING PTE LTD confirm that by letter of authorisation dated 04/06/2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of COMFORT TRANSPORTATION PTE LTD and the Hirer, TAY LIN KEE of vehicle no. SHA 7285Z.

Now we COMFORTDELGRO ENGINEERING PTE LTD for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars NINE HUNDRED EIGHTY TWO AND CENTS FIFTY SIX ONLY. (\$\$982.56) 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. SLR 8100E arising out of an accident with SHA 7285Z on 03/06/2018.
- 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. SLR 8100E arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- 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. SLR 8100E.

Dated this 10th day of October 2018

Signed by \_\_\_\_\_

(AUTHORISED SIGNATORY)

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
50 LLOYD DRIVE  
SINGAPORE 508988

Company Stamp \_\_\_\_\_

Witness : \_\_\_\_\_

Name : \_\_\_\_\_

I/C No : \_\_\_\_\_

Address : \_\_\_\_\_

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
50 LLOYD DRIVE  
SINGAPORE 508988

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 088811  
Customer Centre #B1-01  
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

"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"

## TAX INVOICE

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE 068811

CONTACT NO: 63387288

Description : 3P 03.06.18

VEHICLE NO  
SHA7285X

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
02.07.2014

CHASSIS CODE  
KMHL841UMBU056037

INV. NO/DATE  
91377794 13.06.2018

JOB NO.  
305173482

ODOMETER READING

JOB TYPE

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		600.00
Add GST @ 7.000 %		42.00
<b>Total Invoice amount</b>		<b>642.00</b>

Issued by : KATHERINETAN 13.06.2018 11:24:00  
Repair Type : CISO/57/57  
Payment Type/Term : /Credit 30 days

WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST THE THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR DAMAGE TO PROPERTY BELONGING TO CUSTOMERS AND VEHICLES ARE DELIVERED AND RETURNED AT OWNERS' RISK.  
CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL IMMEDIATELY REPORT ANY DAMAGE OR DEFECT TO THE COMPANY 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 SHALL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE NOT PAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE DATE) FOR 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 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: CT18060104

Date: 13 June 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      03/06/2018    @   21:20 hrs  
ALONG                               KPE TUNNEL TO ECP  
INVOLVING                        SLR8100E

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 **SHA7285Z** (the "Taxi"). The Taxi was hired to **TAY LIN KEE IC NO S1076188C** 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 **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.





RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**Third Party Insurer Enquiry**

Our Ref No: GR-18-084737

Date of Request: 04/06/2018

Your Ref No:

Online Purchase

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road  
Singapore 579701

Dear Sir/Madam,

Enquiry Date 04/06/2018  
Enquiry By Janet Lim Siang Gek  
TP Vehicle No. SLR8100E  
Accident Date 03/06/2018

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLR8100E	AXA Insurance Pte Ltd	02/06/2018-01/06/2019	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

SHA 7285 Z

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SLR 8100E (Insd veh)	Model:	HYUNDAI I40
	SHA 7285Z (TP veh)		
Date of Accident:	03/06/2018		

Global Sum Settlement	:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Repair Estimate	:	\$	4,207.41
Final Repair Cost	:	\$	642.00
Loss of Token Sum	:	\$	100.00
Rental (if any)	:	\$	238.56
LTA / GIA Search Fee	:	\$	2.00

Others:	:	\$	0.00
---------	---	----	------

	:	\$	
Final Settlement Sum	:	\$	982.56

Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)	
A) For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B) For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____
	__NIL__
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	\$ 982.56

JOANNE LEE KHANG MIN  
LKK Auto Consultants Pte Ltd

25/10/2018  
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

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				
AXA INSURANCE PTE LTD			Ref : CC4/ASM18010583/K1eb3q2	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:KIAN CHUAN			Date : 25-10-2018	
			Code : ASM	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLR 8100E	Veh. Inspected	SHA 7285Z	
Policy No.	VA1GA360824	Coverage (\$)	0.00	
Claim No.	S8M00K8M	Excess (\$)	0.00	
Assign From		Assign Date	11/06/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	KMHLB41UMEU056037	Colour	BLUE	
Odometer	642420	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	205/60 R16	Kontrol	7 mm	
L/H Front Tyre	205/60 R16	Kontrol	7 mm	
R/H Rear Tyre	205/60 R16	Kontrol	7 mm	
L/H Rear Tyre	205/60 R16	Kontrol	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	03/06/2018	Inspection Date	11/06/2018	
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**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199807198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 7285Z**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR FENDER (RH) (CONSISTENT)	TO REPAIR SEE LABOUR	2,020.10	-
1	REAR FENDER INNER LINING (RH) (CONSISTENT)	SERVICEABLE	164.40	-
1	REAR WINDSCREEN MOULDING (CONSISTENT)	NOT NECESSARY	60.00	-
1	REAR WHEEL HUB CAP, RH (CONSISTENT)	GRAZED	150.70	150.70
1	REAR BUMPER (NPA) (CONSISTENT)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-479.04	-30.14
			1,916.16	120.56
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	REAR BUMPER RUBBER MAT (SN) (CONSISTENT)	NOT NECESSARY	50.00	-
1	REAR WINDSCREEN SEALANT (SN) (CONSISTENT)	NOT NECESSARY	46.00	-
			96.00	-
	<b><u>LABOUR</u></b>			
	PANEL BEATING INCLUSIVE OF THE REPAIR OF REAR FENDER (RH) AND REAR BUMPER.		850.00	200.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE /REFIX CUSHION & UPHOLSTERY REAR .	NOT NECESSARY	150.00	-
	REMOVE/REFIX REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	-
	REMOVE/REFIX REVERSE SENSOR .	NOT NECESSARY	120.00	-
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	80.00	-
			1,920.00	600.00
<b>GRAND TOTAL</b>			<b>3,932.16</b>	<b>720.56</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>600.00</b>

Report Ref No. CC4/ASM18010583/K1eb3q2

**KALVIN ANG WEI KUN**

Automotive Assessor / Investigator

**HO LEONG CHUAN**

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.