

COMFORTDELGRO ENGINEERING

Our Ref : T 0618 / SHC3998R /WT(st)

Your Ref :

Date : 22-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: 199506048W

CHINA INSURANCE CO LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC3998R YOUR INSURED GBA8256Y
AND OTHER ON 18.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC3998R 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 GBA8256Y we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 856.00
2	2 days Loss of Rental @ \$ 115.00 per day	\$ 230.00
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 :		\$ 1,093.49

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 1,253.49

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 : GBA8256Y
- c) GIA / Police report/s of : SHC3998R
- d) Letter of authority from owner / hirer / operator
 - () Traffic Compound () 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
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





Auto
Consultants
Pte Ltd

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

Our Ref: CC3/CTI18011184/K1wa3

26 September 2018

8G Mobile Accessories

Blk 412 Woodlands Street 41

#05-53

Singapore 730412

Dear Sir/Madam,

ACCIDENT INVOLVING GBA 8256Y AND SHC 3998R ON 18/06/2018

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. 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,

Vivian Lau
Case Handler

DID: 6841 8625

FAX: 6741 4108

EMAIL: Vivianlau@lkkauto.com

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING **SONATA SHC3998R , GBA8256Y** **ON 18-Jun-18 20:40**
ALONG **WOODLANDS AVE 12 X WOODLANDS AVE 5**

I / We **SEE YIN KONG** (Hirer) NRIC No.: **S0057431G**

and/or **SIM BENG KWANG** (Relief) NRIC No.: **S0141748G**

Taxi Number **SHC3998R**

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 **19-Jun-2018**

Name of Hirer **SEE YIN KONG**
Hirer NRIC **S0057431G**

Signature :



Address **934 TAMPINES STREET 91 #16-357**
520934

Contact No. **81001906**

Name of Relief **SIM BENG KWANG**
Relief NRIC **S0141748G**

Signature :



Address **880 TAMPINES AVE 8 #07-292**
520880

Contact No. **91733889**

W

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3008101800

Claim No : SNM18D03108C02

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$ 1,100.00

Singapore Dollar One Thousand One Hundred 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 / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHC 3998R

Insured Vehicle No. : GBA 8256Y

Date of Loss : 18/06/2018

Place of Accident : WOODLANDS AVE 12 & WOODLANDS AVE 5

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 : 8G MOBILE ACCESSORIES

Driver Name : TAN HAN MENG

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.

Global Sum	S\$ 1,100.00
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TOTAL	=====
	S\$ 1,100.00
	=====

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE

Claimant Name : SINGAPORE 508969 NRIC No : _____

Signature :  Date : 03-10-18

"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

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
SHC3998R

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
02.04.2015

CHASSIS CODE
KMHLB41UMFU067891

INV. NO/DATE
91379531 22.06.2018

JOB NO.
305177342

ODOMETER READING

JOB TYPE

Description : 3P 18.06.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	800.00
Add GST @ 7.000 %	56.00
Total Invoice amount	856.00

Issued by : KATHERINETAN 22.06.2018 14:15:00
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

- 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 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 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: CT18060555

Date: 21 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 18/06/2018 @ 20:40 hrs
ALONG WOODLANDS AVE 12 X WOODLANDS AVE 5
INVOLVING GBA8256Y

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 **SHC3998R** (the "Taxi"). The Taxi was hired to **SEE YIN KONG IC NO S0057431G** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** 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.

	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING					MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO									FROM	TO
3	218	600am	800pm	17/6/18	Chow	566	12				267	1615	0257
1	188	409p	2200	18/06/18	Sze Yin Kong	566	37				246	600am	400pm
	260	600am	520pm	18/06/18	Gu-BK	566	52				157	400pm	9.57p
6	305	1755	0441	19/6									
0	244	600am	530pm	19/6	Accident								
3	283	1759	0515	20/6	repair							1125	1300
7	184	930am	450pm										
5	278	1757	0553										
9	149	930am	900pm										
0	191	900p	1100p										
7	199	930am	410pm										

SIC 398R

[Signature]

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
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GBA8256Y	18 Jun 2018 / 20:40:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
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[Previous](#)[OK](#)

Suc 3998R