

INS. CASE OWNER:

CC 4, Asm 180

LKK: 52580  
IDAC: 20/6/18

## ASSIGNMENT

DOI: 20/6/18

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

Excess Sec II :SS

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(VA: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

## STAGE

DATE / PIC

Non-Reporting ltr (1st)

Non-Reporting ltr (2nd)

Non-Reporting ltr (Final)

Notification ltr (if non-pickup)

Call Ct:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup) X

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice X

LTA / GIA:

Medical Bill X

PIR: X

Mandate/Reject Instruction X

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

## PRELIMINARY ADVICE Date/Time:

Sent By:

## FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: S\$

(days) Reduction:

%

Email

Call

## FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

(2 days)

117

Loss of Use (LOU):

S\$

(\$ x days)

Loss of Income (LOI):

S\$

(\$ 50 x 2 days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

1,728.40

Global Sum SS:

1,725

## FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

1,725.00

Name 1:

COMFORTDELGRU ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

S\$

X

Name 2:

X

Payee 3: (Strike if N.A.)

S\$

X

Name 3:

X

RECEIVED 05 OCT 2018

H2R

20/6/18

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Garage

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: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No: **SHA 4412T** Yr Regn: **13 Oct 2016**  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / T~~o~~ / Prime Mover /  
 Truck / Trailer or  
 Make: **Hyundai** C.C. **1.6L**  
 Colour: **Blue** A/C: **Ins** / Std / NI / NA  
 Sp. Reading: **327156** Ti/Radio: **Ins** / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: **KMHLD414MH4095346**  
 Gen. Cond: Good / **Fair** / Poor / Burnt  
 Steering: **Ins** / Jammed / Leaked / Burnt or  
 Brake: **Ins** / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD / **Rim** or  
 Tyre Size: F: **205/60R16**  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or **Carson**  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. **3** mm R/Bal. **3** mm  
 L/Bal. **3** mm L/Bal. **3** mm  
 D.O.A. **19/6/18** D.O.I. **20/6/18**  
 Survey held at **CDHE (Loyang)**  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
**Rear**  
 The U/C / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction  
**21/6/18** **Let PIP \$1296.18/21/6/18**

**AXA PIP**

**R ( \$2,020.04/619 )**

Date/Time, File Pass to?

☐ : Preli. Report  
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Date/Time, File Return to?

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

Transportation: \_\_\_\_\_ \$ + RS \_\_\_\_\_ \$

Photos: \_\_\_\_\_

Others: \_\_\_\_\_

Report Format :



## 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/ASM18011192/K1ja3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date : 20-06-2018	
		Code : ASM	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SDD 818P	Veh. Inspected	SHA 4412T
Policy No.		Coverage (\$)	0.00
Claim No.	S8M00LCJ	Excess (\$)	0.00
Assign From		Assign Date	20/06/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	19/06/2018	Inspection Date	20/06/2018
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.			

# COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHA4412T

MAKE : HYUNDAI

MODEL : i40

AXIA

DOA : 19.06.2018

Date: 20.06.2018

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	Rear Bumper <i>Refurb</i>			\$ 603.60
1	Rear Bumper Reinforcement <i>X</i>			\$ 504.35
1	Rear Bumper Sponge <i>X</i>			\$ 143.40
10	Rear Bumper clips @ \$2.20 <i>new</i>			\$ 22.00
1	Rear Bumper Under Cover <i>ed</i>			\$ 225.00
1	Rear Bumper Stay - RH <i>X</i>			\$ 180.00
1	Rear Bumper Stay - LH <i>X</i>			\$ 180.00
1	Rear Panel <i>X</i>			\$ 592.30
SUB TOTAL				\$ 2,450.65
LESS 20%				490.13
DISCOUNTED TOTAL				\$ 1,960.52
1	Rear Bumper Reverse Sensor <i>shld</i>			\$ 135.70 <b>Nett</b>
1	Rear Bumper Rubber Mat <i>new</i>			\$ 50.00 <b>Nett</b>
				\$ 185.70
<b>Labour Charge</b>				
1	Panel Beating			\$ <del>500.00</del> <sup>200</sup>
1	Spray Painting Charge			\$ <del>500.00</del> <sup>200</sup>
1	Wiring Charge			\$ <del>50.00</del> <sup>X 17</sup>
1	R/Refix Reverse Sensor			\$ <del>120.00</del> <sup>30</sup>
1	Tuff Kote			\$ <del>80.00</del> <sup>X 17</sup>
TOTAL LABOUR <i>Before Part ph</i>				\$ 1170.00
ESTIMATE TOTAL				\$ 3,316.22

Larry Ng

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.

A member of COMFORTDELGRO

Date/Time: 19.06.2018 18:11 Page : 1

Team: ARC Repair TP(CLSO)1		JOB CARD Sales Order:		JC NO305177411	
CUSTOMER: COMFORT TRANSPORTATION PTE LTD		REGN NO: SHA4412T		MILEAGE	
VMS NO: 7010045		MAKE: HYUNDAI		FUEL	
ADDRESS: 383 SIN MING DRIVE		MODEL: I-40		DATE/TIME IN: 19.06.2018 10:40	
Singapore SINGAPORE 575717		YR OF MANU: 13.10.2016		TARGET DATE	
65508755 (R) (P)		CHASSIS CODE: KMHLB41UMHU095346		COMPLETION DATE/TIME	
COUNT CARD NO.					

Accident Date: 19.06.2018  
NATURE: 3P 19.06.2018

JOB DESCRIPTION

S/NO	LABOR CODE	DESCRIPTION
	AXA	taxi Rear damage

CHECKED & PASSED OUT BY:			
SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
Acknowledgement Slip		Exit Pass	
I: LARRY NG		Vehicle No.: SHA4412T	
Signature/Date		Name of Service Advisor	
Signature/Date		Date	
Returned to Service Reception upon collection		To be kept by Security Guard	

# COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHA4412T

MAKE : HYUNDAI

MODEL : i40

AXIA

DOA : 19.06.2018

Date: 20.06.2018

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	Rear Bumper ✓			\$ 603.60
1	Rear Bumper Reinforcement ?			\$ 504.35
1	Rear Bumper Sponge ?			\$ 143.40
10	Rear Bumper clips @ \$2.20 ✓			\$ 22.00
1	Rear Bumper Under Cover ✓			\$ 225.00
1	Rear Bumper Stay - RH X			\$ 180.00
1	Rear Bumper Stay - LH X			\$ 180.00
1	Rear Panel X			\$ 592.30
SUB TOTAL				\$ 2,450.65
LESS 20%				490.13
DISCOUNTED TOTAL				\$ 1,960.52
1	Rear Bumper Reverse Sensor ✓			\$ 135.70 <b>Nett</b>
1	Rear Bumper Rubber Mat ✓			\$ 50.00 <b>Nett</b>
				\$ 185.70
<b>Labour Charge</b>				
1	Panel Beating			\$ 500.00 <b>200</b>
1	Spray Painting Charge			\$ 500.00 <b>200</b>
1	Wiring Charge			\$ 50.00 X
1	R/Refix Reverse Sensor			\$ 120.00 <b>30</b>
1	Tuff Kote			\$ 80.00 X
TOTAL LABOUR				\$ 1170.00
ESTIMATE TOTAL				\$ 3,316.22

LKK Auto Consultants hence notify the Repairer of the following:

- To reserve before/after survey painting
- To display damaged parts during reserve
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification is allowed
- Supplementary repairs must be returned and is subject to final approval from insurance company

Acknowledged by Repairer

Signature:

Date:

16/6/18

20/6/18 1110 hrs

2 days

PIP

Before PIP photo

Larry Ng

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.



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

## Immediate Advice

To : AXA Insurance Pte Ltd

Date: 21/6/2018

### Survey Details:

Date of loss	19-Jun-18
Date of appointment	20-Jun-18
Date of survey	20-Jun-18
Location of survey	CDGE Loyang

### Vehicle Details:

Claim Type:	THIRD PARTY CLAIM
Vehicle number	SHA 4412T
Make and Model	HYUNDAI I40 - 1685cc
Date of registration	13-Oct-16
Excess	
Market Value	\$ -
Part Rebate	\$ -
Nett Loss	\$ -

### Repair details:

Initial Estimate	\$ 3,316.22
------------------	-------------

### Proposed/Revised repair cost:

Parts	\$ 866.18
Check items (estimate)	\$ -
Labour	\$ 430.00
Total	\$ 1,296.18
Lump Sum(if applicable)	\$ -

Number of days for repair	2 days
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# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305177411

Date : 21. Jun. 2018

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6548 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA4412T

Date of Accident: 19.06.2018

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

1. The repair job shall bill to: AXA SDD818P
2. The finalized amount shall be:
 

(a) Spare Parts after List discount	\$866.18
(b) Labour Charges	\$430.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$1,296.18</b>
(c) Lumpsum Repair (If applicable)	
Total for Lumpsum repair cost after Less:	
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 : Larry Ng

Tel : 6214 8316

Fax : 6548 8156

Signature : 

Name : Kavin

Date : 21/6/18

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

Remarks:

Final Amount Subject to Insurance Approval



COMFORTDELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE

Date: 21.06.2018  
Time: 08:29:15  
Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS: COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305177411  
REGN NO : SHA4412T  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 13.10.2016  
DATE/TIME IN : 19.06.2018 10:40  
ACCIDENT DATE : 19.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0579-G	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0002 04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10 L	22.00	20.00	17.60
0003 04-01-0103-0738-G	I40VC COVER-RR BUMPER LWR	1	225.00	20.00	180.00
0004 09-01-9999-0068-A	HYUNDAI REVERSE SENSOR AS	1	135.70		135.70
0005 04-01-0103-1150-A	I40VC PROTECTOR MAT	1	50.00		50.00

SUB-TOTAL : 866.18

JOB NATURE

0000 L	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	200.00
0002 L	REMOVE/REFIX REVERSE SENSOR	30.00

SUB-TOTAL : 430.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 21.06.2018

Time: 08:29:15

Page: 2

COMPANY: THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS: COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305177411  
REGN NO : SHA4412T  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 13.10.2016  
DATE/TIME IN : 19.06.2018 10:40  
ACCIDENT DATE : 19.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,296.18

MVA NAME & SIGNATURE  
DATE:

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE:



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

## Immediate Advice

To : AXA Insurance Pte Ltd

Date: 21/6/2018

### Survey Details:

Date of loss	19-Jun-18
Date of appointment	20-Jun-18
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Location of survey	CDGE Loyang

### Vehicle Details:

Claim Type:	THIRD PARTY CLAIM
Vehicle number	SHA 4412T
Make and Model	HYUNDAI I40 - 1685cc
Date of registration	13-Oct-16
Excess	
Market Value	\$ -
Part Rebate	\$ -
Nett Loss	\$ -

### Repair details:

Initial Estimate	\$ 3,316.22
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### Proposed/Revised repair cost:

Parts	\$ 866.18
Check items (estimate)	\$ -
Labour	\$ 430.00
Total	\$ 1,296.18
Lump Sum(if applicable)	\$ -

Number of days for repair	<u>2 days</u>
---------------------------	---------------



OXFORD  
UNIVERSITY PRESS

## Joy Irene (LKKAUTO)

---

**From:** Joy Irene (LKKAUTO)  
**Sent:** Wednesday, 1 August 2018 4:08 PM  
**To:** 'lnsh70@gmail.com'  
**Cc:** Admin A  
**Subject:** ACCIDENT INVOLVING SDD 818P AND SHA 4412T ALONG CECIL ST. ON 19.06.2018

### NG SIEW HOONG

Policy Holder

Dear Sir/Madam,

**OUR REF : CC4/ASM18011192/K1ja3**  
**YOUR REF : SDD 818P**

### ACCIDENT INVOLVING SDD 818P AND SHA 4412T ALONG CECIL ST. ON 19.06.2018

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 4412T against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that you have hit SHA 4412T from the rear. 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](mailto: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](mailto: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****I 40 SHA4412T , SDD818P  
CECIL ST TWDS COLLYER QUAY****ON 19-Jun-18 10:00****I / We****TAN KHANG MENG****(Hirer) NRIC No.: S7040831G****and/or****FOO KUN KEE****(Relief) NRIC No.: S8232341D****Taxi Number****SHA4412T****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****TAN KHANG MENG****Hirer NRIC****S7040831G****Signature :****Address****186 BOON LAY AVENUE #07-108  
640186****Contact No.****96895577****Name of Relief****FOO KUN KEE****Relief NRIC****S8232341D****Signature :****Address****547 JURONG WEST STREET 42 04-157  
640547****Contact No.****98349592**



redefining / insurance

CLAIM REF : S8M00LCJ  
INSURED : NG SIEW HOONG

**DISCHARGE VOUCHER**

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated **19 JUNE 2018** we are authorised to and do hereby give this discharge for ourselves and on behalf of **Comfort Transportation Pte Ltd** and the Hirer **TAN KHANG MENG** of vehicle no. **SHA 4412T**

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 **ONE THOUSAND SEVEN HUNDRED TWENTY FIVE ONLY (\$\$1,725.00)** 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 **(SDD 818P)** arising out of an accident with **(SHA 4412T)** on **19.06.2018**
- 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. **(SDD 818P)** 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. **(SDD 818P)**

Dated this 01 day of October 2018

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

(AUTHORISED SIGNATORY)

33 LOYANG DRIVE  
SINGAPORE 508693

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

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

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

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

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

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

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 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

COMPANY REG. NO.: 199506048W  
Page: 1

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE SG 068811

CONTACT NO: 63367288

VEHICLE NO  
SHA4412T

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
13.10.2016

CHASSIS CODE  
KMHLB41UMHU095346

INV. NO/DATE  
91379536 22.06.2018

JOB NO.  
305177411

ODOMETER READING

DATE/TIME IN  
19.06.2018 10:40

Description : 3P 19.06.2018

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0579	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
0003	04-01-0103-0738	I40VC COVER-RR BUMPER LWR	1	225.00	20.00	180.00
0004	09-01-9999-0068	HYUNDAI REVERSE SENSOR AS	1	135.70	0.00	135.70
0005	04-01-0103-1150	I40VC PROTECTOR MAT	1	50.00	0.00	50.00
SUB-TOTAL						866.18

### JOB NATURE

0001	L	PANEL BEATING	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	200.00	200.00
0003	L	REMOVE/REFIX REVERSE SENSOR	30.00	30.00

1. VEHICLE THEFT AND ALL RESPONSIBLE OPERATIONS: COMPANY SHALL BE RESPONSIBLE FOR ACCIDENTAL DAMAGE TO THE VEHICLE AND ITS CONTENTS. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR DAMAGE TO THE VEHICLE OR ITS CONTENTS BELONGING TO CUSTOMERS AND DRIVERS AND PASSENGERS AND TRAVELLERS AND PASSENGERS.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY ADVISE THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

3. DEFECTS UP TO 1% SHALL BE REMOVED BY A FREE OF CHARGE BASIS. DEFECTS UP TO 1% SHALL BE REMOVED BY THE COMPANY BY THE CUSTOMER AND NOT REMOVED ON THE ONE DAY OF PAYMENT. IF AFTER 30 DAYS FROM THE DELIVERY FOR THE PERIOD OF DEFECT.

4. PLEASE THROUGH THE SERVICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DEFECTS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT RESPOND FROM THE CUSTOMER, THE CUSTOMER WILL BE RESPONSIBLE FOR THE DEFECT AND DAMAGE.

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.
8010010	91379536	1,386.91	

## TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 2

8010010

AXA INSURANCE PTE LTD

#24-01 8 SHENTON WAY AXA TOWER  
SINGAPORE SG 068811

CONTACT NO: 63367288

VEHICLE NO  
SHA4412T

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
13.10.2016

CHASSIS CODE  
KMHLB41UMHU095346

INV. NO/DATE  
91379536 22.06.2018

JOB NO.  
305177411

ODMETER READING

DATE/TIME IN  
19.06.2018 10:40

S/No	Part No.	Qty	Unit Price	%Disc	Net
SUB-TOTAL					430.00

Items total	1,296.18
Add GST @ 7.000 %	90.73
Invoice amount	1,386.91

Issued by : CHEWBEELING 22.06.2018 14:21:55  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

I HEREBY TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER DETERIORATION BELONGING TO CUSTOMERS AND VEHICLES ARE OWNED AND TO THE A CHARGED RISK.  
CUSTOMERS WILL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGNIFY WITHIN FIFTEEN (15) DAYS DELIVERY OR NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE, THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
INTEREST ON OUTSTANDING BALANCE WILL BE CHARGED AT A RATE OF 10% PER ANNUM IN RESPECT OF ANY AMOUNT DUE AND Owing TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DATE OF PAYMENT OR WITHIN 30 DAYS FROM THE DATE OF PAYMENT PERIOD OF DEFAULT.  
PLEASE EXAMINE THE VEHICLE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DEFECTS OR DISCREPANCIES WITHIN 30 DAYS OF RECEIPT IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THE VEHICLE AS CORRECT AND COMPLETE.

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.
8010010	91379536	1,386.91	

Our Ref: CT18060558

Date: 21 June 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON	19/06/2018 @ 10:00 hrs
ALONG	CECIL ST TWDS COLLYER QUAY
INVOLVING	SDD818P

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 **SHA4412T** (the "Taxi"). The Taxi was hired to **TAN KHANG MENG IC NO S7040831G** 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.



**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SDD818P	19 Jun 2018 / 10:00:00	Successful	A12	AXA INSURANCE PTE LTD

[Previous](#)[OK](#)

SHAC412 T

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SDD 818P (Insd veh)	Model:	HYUNDAI I40
	SHA 4412T (TP veh)		
Date of Accident:	19/06/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	3,633.96
Final Repair Cost	:	\$	1,386.91
Loss of Token Sum	:	\$	100.00
Rental (if any)	:	\$	234.00
LTA / GIA Search Fee	:	\$	7.49

Others:	:	\$	0.00
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	:	\$	
Final Settlement Sum (Global Sum)	:	\$	1,725.00

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: _____
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	:	\$ 1,725.00

JOANNE LEE KHANG MIN  
LKK Auto Consultants Pte Ltd

08/10/2018  
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/ASM18011192/K1ja3q2

8 SHENTON WAY #24-01  
AXA TOWERSINGAPORE 068811  
ATTN:STACEY NG

Date : 08-10-2018



Code : ASM

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SDD 818P	Veh. Inspected	SHA 4412T
Policy No.	GA338154	Coverage (\$)	0.00
Claim No.	S8M00LCJ	Excess (\$)	0.00
Assign From		Assign Date	20/06/2018

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMHU095346	Colour	BLUE
Odometer	327156	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	CAMPEON	7 mm
L/H Front Tyre	205/60 R16	CAMPEON	7 mm
R/H Rear Tyre	205/60 R16	CAMPEON	7 mm
L/H Rear Tyre	205/60 R16	CAMPEON	7 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.  
DAMAGES SEE DETAILS.

## 5. General Information

Accident Date	19/06/2018	Inspection Date	20/06/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.  
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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**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

Page No.:1 of 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 4412T**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER (CONSISTENT)	DEFORMED	603.60	603.60
1	REAR BUMPER REINFORCEMENT (CONSISTENT)	SERVICEABLE	504.35	-
1	REAR BUMPER SPONGE (CONSISTENT)	SERVICEABLE	143.40	-
10	REAR BUMPER CLIPS @\$2.20 (CONSISTENT)	NECESSARY	22.00	22.00
1	REAR BUMPER UNDER COVER (CONSISTENT)	CUT	225.00	225.00
1	REAR BUMPER STAY -RH (CONSISTENT)	SERVICEABLE	180.00	-
1	REAR BUMPER STAY-LH (CONSISTENT)	SERVICEABLE	180.00	-
1	REAR PANEL (CONSISTENT)	SERVICEABLE	592.30	-
	LESS 20% DISCOUNT		-490.13	-170.12
			1,960.52	680.48
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR BUMPER REVERSE SENSOR (SN) (CONSISTENT)	SHORTED	135.70	135.70
1	REAR BUMPER RUBBER MAT (SN) (CONSISTENT)	NECESSARY	50.00	50.00
			185.70	185.70
<b><u>LABOUR</u></b>				
	PANEL BEATING.		500.00	200.00
	SPRAY PAINTING CHARGE.		500.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	R/REFIX REVERSE SENSOR.		120.00	30.00
	TUFF KOTE.	NOT NECESSARY	80.00	-
			1,250.00	430.00
<b>GRAND TOTAL</b>			<b>3,396.22</b>	<b>1,296.18</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>1,296.18</b>

Report Ref No. CC4/ASM18011192/K1ja3q2

**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.