

Our Ref : T 0618 / SHC8664X /WT(st)

Your Ref :

Date : 29-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: 10950648W

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

Attn : Motor Claims Department

WITHOUT PREJUDICE

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 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
Shun Industrial Park A
Singapore 768732

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC8664X YOUR INSURED SJS9506E
AND OTHER _____ ON 19.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC8664X 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 SJS9506E we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	1,837.62
2	<u>3</u> days Loss of Rental @ \$ <u>115.00</u> per day	\$	345.00
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 :		\$	2,190.11

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ <u>80.00</u> per days	\$	240.00
Total Claims :		\$	2,430.11

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

- a) Original repair bill and photocopies of photographs : 6 pcs.
- b) LTA search slip/s of : SJS9506E
- c) GIA / Police report/s of : SHC8664X
- 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.



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/CTI18011272/K1ha3

25 JULY 2018

JJM CAR SERVICES
15 WOODLANDS DRIVE 72
#08-41 WOODSVALE
SINGAPORE 738096

By Post and By Email

Dear Sir/Madam,

ACCIDENT INVOLVING SJS 9506E AND SHC 8664X ON 19/06/2018

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,


Vic Alpeh
DID: 6841 2096
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

*c.c. China Taiping Insurance (Singapore) Pte Ltd
(Motor Claims Dept)
Mikehan72@gmail.com
(Email)*

Vic (LKKAuto)

From: Vic (LKKAuto)
Sent: Wednesday, 25 July, 2018 3:23 PM
To: Mikehan72@gmail.com
Cc: Admin A; Vic (LKKAuto)
Subject: Your Ref: SJS 9506E_ACCIDENT INVOLVING SJS 9506E AND SHC 8664X ON 19/06/2018



Auto
Consultants
Pte Ltd

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

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Please call us if you have further queries.

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

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



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****i 40 SHC8664X , SJS9506E
WOODSVALE CONDO ENTRANCE****ON 19-Jun-18 08:00**

I / We

ABDULLAH B MOHD(Hirer) NRIC No.: **S1148722Z**

and/or

(Relief) NRIC No.:

Taxi Number

SHC8664X

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

ABDULLAH B MOHD

Hirer NRIC

S1148722Z

Signature :



Address

**775 WOODLANDS CRESCENT #06-08
730775**

Contact No.

97508713

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN1749871700 Claim No :SNM18D03134/C01/6
Claimant : COMFORT TRANSPORTATION PTE LTD
Amount : S\$2,170.00
SINGAPORE DOLLARS TWO THOUSAND ONE HUNDRED SEVENTY 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 8664X
Insured Vehicle No. : SJS 9506E

Date of Loss : 19/06/2018
Place of Accident : WOODSVALE CONDO ENTRANCE

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 : JJM CAR SERVICES
Driver Name : MICHAEL HAN JIN JUAN (MICHAEL HAN RENYUAN)

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.

Table with 2 columns: Description, Amount. Row 1: (1) Global Sum (all in) S\$ 2,170.00. Row 2: TOTAL S\$ 2,170.00

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Claimant Name : _____ NRIC No : _____

Signature : [Handwritten Signature] Date : 7/8/18

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

Workshops

59 Loyang Drive Singapore 508969 24 Senoko Loop Singapore 758156
383 Sin Ming Drive Singapore 575717 7 Sungai Kadut Way Singapore 72079
45 Pandan Road Singapore 609285 501 Yishun Industrial Park A Singapore 71
320 Uti Road 3 Singapore 408949

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
SPRINGDALE TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHC8664X

INV. NO/DATE
91380331 27.06.2018

MAKE
HYUNDAI

JOB NO.
305177402

MODEL
I-40

OILMETER READING

DATE OF REG
07.01.2016

DATE/TIME IN
19.06.2018 13:20

CHASSIS CODE
KMHCR41UMGU083092

Items total		1,717.40
Add GST @	7.000 %	120.22
Invoice amount		1,837.62

Issued by : KATHERINETAN 27.06.2018 08:47:06
Repair type : CLSO/57/57
Payment type/Term: /Credit 30 days

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 N
8010012	91380331	1,837.62	

Our Ref: CT18060563

Date: 26 June 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 19/06/2018 @ 08:00 hrs
ALONG WOODSVALE CONDO ENTRANCE
INVOLVING SJS9506E

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 **SHC8664X** (the "Taxi"). The Taxi was hired to **ABDULLAH B MOHD IC NO S1148722Z** 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 **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
SJS9506E	19 Jun 2018 / 08:00:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

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[OK](#)