

## Khanchna (LKK Auto)

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**From:** GERALD POH WEE BIN <geraldpoh@lonpac.com>  
**Sent:** Friday, 20 December 2019 10:54 AM  
**To:** Khanchna (LKK Auto)  
**Cc:** MT\_Claim\_SG  
**Subject:** RE: Mandate Request - ACCIDENT INVOLVING SFA3311G [LONPAC] & SHA2506U [TP] ALONG MT ELIZABETH LINK ON 21/06/2018 [External Confidential]

### Lonpac External - Confidential

Dear Khanchna,

Kindly proceed as proposed.

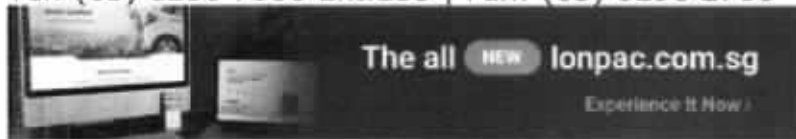
Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706



*Lonpac External - Confidential data is for use by authorised external parties only.*

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**From:** Khanchna (LKK Auto) [mailto:khanchna@lkkauto.com]  
**Sent:** Monday, 16 December 2019 3:23 pm  
**To:** MT\_Claim\_SG  
**Cc:** Admin A  
**Subject:** Mandate Request - ACCIDENT INVOLVING SFA3311G [LONPAC] & SHA2506U [TP] ALONG MT ELIZABETH LINK ON 21/06/2018

LPC ref: 17/18/18/VP05/020695

LKK REF: CC4/LPC18011384/K1ka3q2

Dear Sir/Madam,

We refer to the above matter.

We have highlighted to your good office on 25/06/2018 of Third-Party's request to do Direct Settlement with our Principal, Lonpac Insurance Bhd.

Insured had encroached and collided with Third party vehicle whom was moving in his own lane. We opine that BOLA 16 is applicable and liability is down against Insured.

Please take note that Insured had disputed on the damages and had sent e-mail to your good office (as attached).

Summary to offer to third party repairer "COMFORTDELGRO ENGINEERING PTE LTD" as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	\$ 1,320.81	\$ 107.00
2. Loss of Rental (2 days x \$ 117)	\$ 234.00	\$ 117.00 (1 day x \$ 117)
3. Loss of Income (2 days x \$ 80)	\$ 160.00	\$ 50.00 (1 day x \$ 50)
4. LTA Search Fee	\$ 7.49	\$ 7.49
<b>Total</b>	<b>\$ 1,722.30</b>	<b><u>\$ 281.49</u></b>

\*\*1 day recommendation for repair

**The above is for your approval.**

Thank you.

*"Best Wishes for Merry Christmas & Happy New Year 2020"*

Best Regards,

**Khanchna** | Case Handler

**LKK Auto Consultants Pte Ltd**

DID: 6841 2360 | email: [Khanchna@lkkauto.com](mailto:Khanchna@lkkauto.com) | Fax: 6741-4108

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

Our Ref : T 0618/ SHA2506U /KS(st)

Your Ref :

Date : 03-Jul-18

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Flr  
Singapore 508969

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Marline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 196049400

Workshops

Braddell  
205 Braddell Road  
Singapore 579701

Loyang  
59 Loyang Drive  
Singapore 508969

Sin Ming  
385 Sin Ming Drive  
Singapore 575717

Pandan  
45 Pandan Road  
Singapore 609286

Ubi  
320 Ubi Road 3  
Singapore 408849

Senoko  
24 Senoko Loop  
Singapore 758158

Sungei Kadut  
7 Sungei Kadut Way  
Singapore 728791

Yishun  
Yishun Industrial Park A  
Singapore 768732

**Lonpac Insurance Bhd**

300 Beach Road

#17-04 / 07, The Concourse

Singapore 199555

Attn : Motor Claim Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA2506U YOUR INSURED SFA3311G  
AND OTHER \_\_\_\_\_ ON 21.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA2506U 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 : SFA3311G we are submitting these claims for your consideration on behalf of the claimants.

#### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 107.00
2	<u>2</u> days Loss of Rental @ \$ 117.00 per day	\$ 234.00
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 :		\$ 348.49

#### HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims:		\$ 508.49

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

- a) Original repair bill and photocopies of photographs : 8 pcs.
- b) LTA search slip/s of : SFA3311G
- c) GIA / Police report/s of : SHA2506U
- d) Letter of authority from owner / hirer / operator
- ( ) Witness statement/s ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance
- (X) Photograph/s of Accident Scene (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

*Kazali Hj Selahudin*

Deputy Manager

CDGE Taxi Claims Department

Tel : 6214 8736 Fax: 6214 1843 Email: kazali@cdge.com.sg

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

A member of

COMFORTDELGRO



## LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING  
ALONGI 40 SHA2506U , SFA 3311G  
MOUTH ELIZABETH LINK TWDS BIDEFORD ROAD.

ON 21-Jun-18 12:25

I / We

WANG LOCK JIONG

(Hirer) NRIC No.: S0255639A

and/or

(Relief) NRIC No.:

Taxi Number

SHA2506U

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

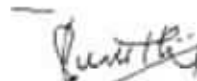
1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
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

21-Jun-2018

Name of Hirer  
Hirer NRICWANG LOCK JIONG  
S0255639A

Signature :



Address

363 HOUGANG AVENUE 5 #05-280  
530363

Contact No.

96551561



# LONPAC INSURANCE BHD

CLAIM NO : 17/18/18/VP05/020695  
DATE : 30 DECEMBER 2019

## DISCHARGE VOUCHER

I/We, **COMFORTDELGRO ENGINEERING PTE LTD** confirmed acceptance from **M/s LONPAC INSURANCE BHD** and/or owner of **SFA3311G** the sum of Singapore Dollar Two Hundred Eighty-One and Forty-Nine cents Only (\$281.49) in full and final satisfaction, liquidation and discharge of all property losses competent to me/us upon the said **M/s LONPAC INSURANCE BHD** in respect of all property losses sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident involving **SFA3311G** and **SHA 2506U** on 21 June 2018 along Mount Elizabeth Link.

I /We hereby agree to indemnify and keep indemnify (**LONPAC INSURANCE BHD/ YEW LEA TIANG ANNIE**) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to **COMFORTDELGRO ENGINEERING PTE LTD.**

I/We hereby acknowledged that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
88 LOYANG DRIVE  
SINGAPORE 639988  
02/01/2020

Signature of vehicle owner/Date

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE  
88 LOYANG DRIVE  
SINGAPORE 639988

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

Name of vehicle owner /Date

\*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\*

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY VEH. NO.: 199506048W  
Page: 1

8010042

LONPAC INSURANCE BERHAD  
#17-04 / 07 THE COMEXHSE

300 BEACH ROAD  
SINGAPORE SG 199555

CONTACT NO: 62507388

VEHICLE NO  
SHA2506U

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
29.09.2016

CHASSIS CODE  
KMHLE841UMGU093610

INV. NO/DATE  
91380902 29.06.2018

JOB NO.  
305178303

CUSTOMER READING

DATE/TIME IN  
21.06.2018 14:40

Description : 3P 21.06.18

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0001 L PANEL BEATING 50.00 50.00

0002 L SPRAY PAINTING CHARGE 50.00 50.00

SUB-TOTAL : 100.00

Items total 100.00

Add GST @ 7.000 % 7.00

Invoice amount 107.00

1. 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 only under a customer's risk.

2. 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.

3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN EXCESS OF ANY AMOUNT DUE AND PAYABLE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE DATE OF THE PERIOD OF DEFAULT).

4. PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS THE IMMEDIATELY WITHIN 30 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.
8010042	91380902	107.00	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 2

8010042

LONPAC INSURANCE BERHAD  
#17-04 / 07 THE CONCOURSE

300 BEACH ROAD  
SINGAPORE SG 199555

CONTACT NO: 62507388

VEHICLE NO  
8HA2506U

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
29.09.2016

CHASSIS CODE  
KMHLR41UMGU093610

INV. NO/DATE  
91380902 29.06.2018

JOB NO.  
305178303

ODOMETER READING

DATE/TIME IN  
21.06.2018 14:40

Issued by : KATHERINETAN 29.06.2018 13:50:44  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

I WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARE OF OTHERS' PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND KEPT 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 VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAILY BASIS IN RESPECT OF ANY AMOUNT DUE AND REMAINING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (30 DAYS FROM DATE OF INVOICE) UNTIL 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.
8010042	91380902	107.00	

Our Ref: CT18060643

Date: 27 June 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      21/06/2018    @   12:25 hrs  
ALONG                                MOUTH ELIZABETH LINK TWDS BIDEFORD ROAD  
INVOLVING                        SFA 3311G

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 **SHA2506U** (the "Taxi"). The Taxi was hired to **WANG LOCK JIONG IC NO S0255639A** 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 **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.



SHA 2506 V

DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF
						FROM	TO		
17/6/18	N H (not)	22	34	12	340	1430	2050		
18/6/18	CJ Wamp	22	3	653	235	0630	1845		
19/6/18	CJ Wamp	22	3	903	250	0705	1640		
20/6/18	CJ Wamp	22	4	078	175	0725	1534		
20/6/18	N H (H)	22	4	379	240	1600	0048		
21/6/18	CJ Wamp	22	4	464	144	0655	1440		
21/6	Accident				In	1440	—		
22/6	repair			W	Out	—	1445		

Quantity  
22/6/18

## Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SFA3311G	21 Jun 2018 / 12:25:00	Successful	L06	LONPAC INSURANCE BHD

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

SH/Asob4