

Our Ref : T 0618 / SHC8656U /CL(st)  
Your Ref:  
Date : 3-Jul-18

**AIG ASIA PACIFIC INSURANCE PTE LTD**  
**CHARTIS Buliding**  
**78 Shenton Way**  
**#07-16**  
**Singapore 079120**

**Attn : Motor Claims Department WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC8656U YOUR INSURED SKX2719R**  
**AND OTHER ON 23.06.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHC8656U** 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 **SKX2719R** we are submitting these claim for your consideration on behalf of the claimants.

#### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,388.35
2	4 days Loss of Rental @ \$ 125.40 per day	\$ 501.60
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	GIA / LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transporation	\$ -
<b>Sub Total :</b>		<b>\$ 2,897.44</b>

#### HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$ 320.00
<b>Total Claims :</b>		<b>\$ 3,217.44</b>

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 : SKX2719R
- c) GIA / Police report/s of : SHC8656U
- d) Letter of authority from owner / hirer / operator
  - ( X ) Photograph/s of Accident Scene ( ) Certificate of Insurance
  - ( ) Witness statement/s ( 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

Cecilia Lee

Executive

CDGE Claims Department

Tel : 6214 8354 Fax: 6214 1843 Email : cecilialee@sparkcarcare.com

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

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Floor  
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

#### 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**  
501 Yishun Industrial Park A  
Singapore 768732

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****SONATA SHC8656U , SK22719R  
CAIRNHILL RD TWDS ORCHARD, JUNCTION OF BIDEFORD RD****ON 23-Jun-18 15:15**

I / We

**KWA CHOON ENG**(Hirer) NRIC No.: **S2538738D**

and/or

(Relief) NRIC No.:

Taxi Number

**SHC8656U**

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

**24-Jun-2018**

Name of Hirer

**KWA CHOON ENG**

Hirer NRIC

**S2538738D**

Signature :



Address

**339 BUKIT BATOK STREET 34 #07-...  
650339**

Contact No.

**91152413**



GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARTIS BUILD  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHC8656U

MAKE  
TOYOTA

MODEL  
PRIUS HYBRID(G4)

DATE OF REG  
05.07.2017

CHASSIS CODE  
JTDKB3FU103561417

INV. NO/DATE  
91380666 28.06.2018

JOB NO.  
305179253

ODOMETER READING

DATE/TIME IN  
24.06.2018 08:25

Description : 3P 23.06.18

S/No	Part No.	Qty	Unit Price	%Disc	Net.
PART REQUISITION					
0001	04-01-0302-0596 PRIG4 PANKI, SUB-ASSY RR D	1	1,227.00	25.00	920.25
0002	03-01-0302-2057 PRIG4 CAP WHEEL	1	175.80	25.00	131.85
0003	28-01-0103-2013 I40V3 APP LOGO REAR DOOR	1	80.00	0.00	80.00
SUB-TOTAL:		:			1,132.10

### JOB NATURE

0001	L	PANKI, BEATING	400.00	400.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	600.00	600.00
0003	20-204	REMOVE/REFIX UPHOLSTERY ASST REPAIR	50.00	50.00
0004	20-02	REMOVE/REFIX DOOR PARTS TO ASSIST RKP	50.00	50.00
SUB-TOTAL:		:		1,100.00

- 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.
8010004	91380666	2,388.35	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 2

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARTIS BUILD  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHC8656U

INV. NO/DATE  
91380666 28.06.2018

MAKE  
TOYOTA

JOB NO.  
305179253

MODEL  
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG  
05.07.2017

DATE/TIME IN  
24.06.2018 08:25

CHASSIS CODE  
JTTDKB3FU103561417

Items total	2,232.10
Add GST @ 7.000 %	156.25
Invoice amount	2,388.35

Issued by : KATHERINETAN 28.06.2018 11:22:28  
Repair type : CJSO/57/57  
Payment Type/Term: /Credit 30 days

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205 Braddell Road  
Singapore 579701

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CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91380666	2,388.35	

Our Ref: CT18060707

Date: 28 June 2018



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	23/06/2018 @ 15:15 hrs
ALONG	CAIRNHILL RD TWDS ORCHARD, JUNCTION OF
	BIDEFORD RD
INVOLVING	SKX2719R

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 **SHC8656U** (the "Taxi"). The Taxi was hired to **KWA CHOON ENG IC NO S2538738D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.40** 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.

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SKX2719R	23 Jun 2018 / 15:15:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

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

SKX2719R











