

Our Ref : T 0618 / SHC8656U /CL(st)  
Your Ref:  
Date : 16-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 SLZ3527Z**  
**AND OTHER ON 28.06.18**

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 **SLZ3527Z** we are submitting these claim for your consideration on behalf of the claimants.

#### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 5,103.11
2	6 days Loss of Rental @ \$ 125.40 per day	\$ 752.40
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>\$ 5,863.00</b>

#### HIRER'S CLAIM

7	6 days Loss of Income @ \$ 80.00 per days	\$ 480.00
<b>Total Claims :</b>		<b>\$ 6,343.00</b>

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 : SLZ3527Z  
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****TOYOTA PRIUS SHC8656U , SLZ3527Z  
CENTRAL BOULEVARD TWDS UPP. CROSS ST.****ON 28-Jun-18 14:25**

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

**28-Jun-2018**

Name of Hirer

**KWA CHOON ENG**

Hirer NRIC

**S2538738D**

Signature :



Address

**339 BUKIT BATOK STREET 34 #07-306  
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  
91383902 13.07.2018

JOB NO.  
305181184

ODOMETER READING

DATE/TIME IN  
28.06.2018 16:20

Description : 3P 28.06.18

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0302-2292	PRIG4 COVER FRONT BUMPER	1	499.90	25.00	374.92
0002	04-01-0302-0574	PRIG4 FENDER SUB-ASSY FRO	1	933.10	25.00	699.82
0003	04-01-0302-2815	PRIG4 UNIT ASSY HEADLAMP	1	3,413.40	25.00	2,560.05
0004	04-01-0302-2871	PRIG4 SUPPORT FRONT BUMPE	1	77.00	25.00	57.75
0005	04-01-0302-2297	PRIG4 EMBLEM SIDE PANEL (	1	86.50	25.00	64.87
0006	03-01-0302-2057	PRIG4 CAP WHEEL	1	175.80	25.00	131.85
SUB-TOTAL			:			3,889.26

### JOB NATURE

0001	L	PANEL BEATING	400.00	400.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	400.00	400.00

- 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	91383902	5,103.11	

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

MAKE  
TOYOTA

MODEL  
PRIUS HYBRID(G4)

DATE OF REG  
05.07.2017

CHASSIS CODE  
JTDKKB3FU103561417

INV. NO/DATE  
91383902 13.07.2018

JOB NO.  
305181184

ODOMETER READING

DATE/TIME IN  
28.06.2018 16:20

S/No	Part No.		Qty	Unit Price	%Disc	Net
0003	17-01	CHECK ALL LIGHTING	20.00		20.00	
0004	L	WHEEL ALIGNMENT	60.00		60.00	
SUB-TOTAL				:		880.00

Items total	4,769.26
Add GST @ 7.000 %	333.85
Invoice amount	5,103.11

Issued by : CHEWBEELENG 13.07.2018 16:50:05  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

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A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Singapore 579701

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CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91383902	5,103.11	

Our Ref: CT18060865



Date: 13 July 2018

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 28/06/2018 @ 14:25 hrs  
ALONG CENTRAL BOULEVARD TWDS UPP. CROSS ST  
INVOLVING SLZ3527Z

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

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SHC 86564

DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
				FROM	TO
24/06/18	<del>Kwaka</del>	139650	63	0645	0830
24/6/18	Loyang / Kwaka		<del>63</del>		
27/6/18	Assistant	Repair	SHC 86564	0825	-
27/06/18	Kwaka	139879	<del>63</del> 229	1125	1957
28/06/18	Kwaka	140160	281	0700	1628
28/6	Accident		in	1620	-
3/7	repair	in	cut	-	1800

ING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO
2	272	0645	1735
27	129	1700	0830
56	207	0645	1800
47	191	1800	0630
53	206	0645	1800
70	477	1800	0645
38	268	0645	1825
23	185	1830	0630
90		0645	1800
88	198	1800	0625

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLZ3527Z	28 Jun 2018 / 14:25:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

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

SLZ3527Z



