

INS CASE OWNER:

CC 31 AG 180

1278, TLWA3 4

LKK:

IDAC:

Sur:

WTH

DOI:

ASSIGNMENT

29.6.18

Date / Time:

29.6.18

Registered in Merimen:

4.7.18

Pre-assign / CCU / FTE



Insured Vehicle No:

SLK 1056 H

Name of Insured:

Michael Joseph

Insured Tel No:

HP 97440508

Excess Sec II :SS

D.O.A: 29.6.18

Is driver the owner?

( YES / NO )

Nature of Accident:

Claim No.:

343991381986

Policy No.:

200491680

Make / Model:

12 Walmer Rd

Place of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability:

%

Final ? Yes / No

SHB 4824 H



INSRS:

WSP:

Tel:

Liability:

RMKS:

CDMS (9900)



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SHB 4824 H. X; SER 1056 H. X

6/8 BUMP. sent out let letter.

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

31/7/18

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

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:

%

100

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

24

Repair Cost:

S\$

941.60

Loss of Rental (LOR):

S\$

409.50

(

3.5 days) X 117.00

Loss of Use (LOU):

S\$

175.00

(\$

50

x 3.5 days)

Loss of Income (LOI):

S\$

(\$

x

days)

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

[Tick only one]

GIA/LTA Search

S\$

7.90

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

1533.59

Global Sum S\$: 1500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

1500.00

Name 1:

Comfortdelgro engineering pte ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

(08/11/13) - wef

AS2 REC. BY: *Taym*REF: *A/C*

## ASSIGNMENT

From: Date: *29/6/18*

Estimated Cost:

ON ☒ TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: *4*at Workshop m/s: *1:5*of *1:5*

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 Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: *3* days Res.: Yes or NoLum Sum: *18.2* % 3 Val: Yes or NoCA / REV / REP. / 24 HRS *1up*

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: *SMB4824H* Yr Regn: *2017 Dec*

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: *Hyundai I40* c.c. *1685*Colour: *Yellow* A/C: Insured / Std / NI / NASp. Reading: *55581* T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: *KMHLB414MH4 100034*Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ Inorder / Jammed / Leaked / Burnt orBrake: ☒ Inorder / Jammed / Leaked / Burnt orModi: ☒ Nil / S/Rim / STD A/Rim orTyre Size F: *205/60R16*R: *205/60R16*

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. *6* mmL/Bal. *6* mm

D.O.A.

Survey held at

Des. of Damages: Frt / Rear / ☒ O/S / NIS / UIC / ☒ Rook or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

*19/8/19 Confirm >B-2 \$880.00 with 3 working days**(Red = \$382.08 81.1)*

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I. (\$) )

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

ComfortDaiGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

### FINALIZATION FORM

**Fax :**

Vehicle Reg No. : SHB4824H

29/06/2018

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

2. The finalized amount shall be:

**\$580.00**

**\$880.00**

---

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

- We confirm the estimates and finalized amount

Signature: \_\_\_\_\_

Name :

Date : \_\_\_\_\_

**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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Team: ARC Repair TP(CFSO)1

### JOB CARD

Sales Order:

JC NO: 305181367

CUSTOMER MS CITYCAB PTE LTD 7010070 CUSTOMER NO. 383 SIN MING DRIVE SINGAPORE SINGAPORE 575717 PRESS 65551188 (R) (P)	REGN NO	SHB4824H	MILEAGE
	MAKE:	HYUNDAI	FUEL E 1/2 F
	MODEL	I-40	DATE/TIME IN 29.06.2018 11:00
	YR OF MANU.	15.12.2017	TARGET DATE
	CHASSIS CODE	KMHLB41UMHU100034	COMPLETION DATE/TIME:

### JOB DESCRIPTION

Accident Date: 29.06.2018  
NATURE: 3P 29.06.2018

S/NO	LABOR CODE	DESCRIPTION
------	------------	-------------

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

acknowledgement Slip

Exit Pass

Vehicle No.: SHB4824H CHIANG

Vehicle No.: SHB4824H

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 03.07.2018

Time: 11:33:09

Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010070  
ADDRESS: CITYCAB PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65551188

JOB NO : 305181367  
REGN NO : SHB4824H  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 15.12.2017  
DATE/TIME IN : 29.06.2018 11:00  
ACCIDENT DATE : 29.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0000 L	PANEL BEATING	400.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002 17-01	CHECK ALL LIGHTING	20.00
0003 20-00	TUFF COAT ON AFFECTED PARTS.	30.00
0004 20-05	REMOVE/REFIX REVERSE SENSOR	30.00

SUB-TOTAL : 880.00

TOTAL : 880.00

AUTHORISED : YES / NO

MVA NAME & SIGNATURE

DATE :

SURVEYOR NAME & SIGNATURE

DATE :



CITY CAB PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHB 4824H

MAKE :

MODEL : HYUNDAI i40

DATE 29/6/2018 16:49

Lick

Allt

Chuang

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 603.60 <i>Ry</i>
	Rear Bumper Clips			\$ 22.00 <i>xm</i>
	Rear Fender (RH)			\$ 2,020.10 <i>Ry</i>
	Rear Fender Inner Lining (RH)			\$ 164.40 <i>xm</i>
	Rear Windscreen Moulding			\$ 60.00 <i>xm</i>
	<b>SUB TOTAL</b>			<b>\$ 2,870.10</b>
	<b>LESS 20%</b>			<b>\$ 574.02</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,296.08</b>
	Rear Windscreen Sealant			\$ 46.00 <i>Nett</i>
	<b>Labour Charge</b>			<b>\$ 400</b>
	Panel Beating			\$ 850.00
	Spray Painting Charge			\$ 500.00 <i>400</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00 <i>30</i>
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 <i>x</i>
	Remove/Refix Rear Windscreen Glass			\$ 120.00 <i>x</i>
	Remove/Refix Reverse Sensor			\$ 120.00 <i>30</i>
	<b>TOTAL LABOUR</b>			<b>\$ 1,840.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 4,182.08</b>
<p><i>Tanpin 97495744</i>  <i>- wp</i>  <i>29/6/18 @ 1705</i>  <i>3 days</i>  <i>coming after repair</i>  <i>sur @ Kuantan</i></p> <p><i>3/07</i></p>				
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.				

Our Job Ref No : 305181367  
Date : 02/07/18

## COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

### FINALIZATION FORM

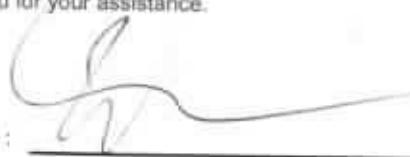
To : LKK  
Attn : TAUFLIK  
Vehicle Reg No : SHB4824H


Fax :

29/06/2018

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

1. The repair job shall bill to: AIG SLK1056H
2. The finalized amount shall be:
  - (a) Spare Parts after List discount
  - (b) Labour Charges \$880.00
  - Total for Part-By-Part Repair Cost** \$880.00
  - (c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less:  
**Final Lumpsum Repair cost**
3. Estimated normal period for repairs: 3 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.  

Signature :   
Name : CHIANG  
Tel : 62148314  
Fax : 65468156

We confirm the estimates and finalized amount  
  
Name : Kakin  
Date : 21/8/18

### 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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overtime				

Remarks:

CITY CAB PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHB 4824H

MAKE :

MODEL : HYUNDAI i40

DATE 29/6/2018 16:49

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 603.60 <i>Ry</i>
	Rear Bumper Clips			\$ 22.00 <i>X</i>
	Rear Fender (RH)			\$ 2,020.10 <i>Ry</i>
	Rear Fender Inner Lining (RH)			\$ 164.40 <i>X</i>
	Rear Windscreen Moulding			\$ 60.00 <i>X</i>
	<b>SUB TOTAL</b>			<b>\$ 2,870.10</b>
	<b>LESS 20%</b>			<b>\$ 574.02</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,296.08</b>
	Rear Windscreen Sealant			\$ 46.00 <i>17X</i> <b>Nett</b>
				<b>\$ 46.00</b>
	<b>Labour Charge</b>			<i>400</i>
	Panel Beating			\$ 850.00
	Spray Painting Charge			\$ 500.00 <i>400</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00 <i>30</i>
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 <i>X</i>
	Remove/Refix Rear Windscreen Glass			\$ 120.00 <i>X</i>
	Remove/Refix Reverse Sensor			\$ 120.00 <i>30</i>
	<b>TOTAL LABOUR</b>			<b>\$ 1,840.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 4,182.08</b>
<p><i>Tanpin 97495744</i>  <i>- wp'</i>  <i>29/6/18 @ 1705</i>  <i>3 days</i>  <i>coming after repair</i>  <i>sur @ Mt Pleasant</i></p> <p><i>3/07</i></p>				
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.				

Lkt

Allt

Chang



## CITY CAB PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHB 4824H

DATE 29/6/2018 16:49

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 603.60 <i>Ry</i>
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	<b>LESS 20%</b>			<b>\$ 574.02</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,296.08</b>
	Rear Windscreen Sealant			\$ 46.00 <i>Nett</i>
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	<b>TOTAL LABOUR</b>			<b>\$ 1,840.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 4,182.08</b>
<i>Tanjin 97495744</i> <i>-wp</i> <i>29/6/18 @ 1705</i> <i>3 days</i> <i>Assess after repair</i> <i>sur @ 11km town</i>				<b>LKK Auto Consultants</b> hence notify the Repairer of the following: • To resurvey before/after spray painting • To display damaged parts during resurvey • Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis • No illegal modifications allowed • Supplementary items, must be resurveyed and is subject to final approval from Insurance Company  Acknowledged by Repairer Signature: Date:
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

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

Our Ref: CC3/AIG18012178/T1wa3

01 August 2018

**Michael Joseph**  
12 Walmer Drive  
Singapore 555038

Dear Sir/Madam,

**ACCIDENT INVOLVING SLK 1056H AND SHB 4824H ON 29/06/2018**

We refer to the above accident where we are acting for AIG Asia Pacific Insurance 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 note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Vivian Lau  
Case Handler  
DID: 6841 8625  
FAX: 6741 4108  
EMAIL: Vivianlau@lkkauto.com

c.c AIG Asia Pacific Insurance Pte Ltd  
(Motor Claims Dept)

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****I 40 SHB4824H , SLK1056H  
12 WALMER RD****ON 29-Jun-18 06:45**

I / We

**QUAH GEOFREY**

(Hirer) NRIC No.:

**S1637224B**

and/or

(Relief) NRIC No.:

Taxi Number

**SHB4824H**

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

**29-Jun-2018**

Name of Hirer

**QUAH GEOFREY**

Hirer NRIC

**S1637224B**

Signature :



Address

**429 CLEMENTI AVENUE 3 #07-424  
120429**

Contact No.

**96485805**

**RELEASE VOUCHER**  
**(AIG Asia Pacific - Express Third Party Claim)**

"We/I, COMFORTDELGRO ENGINEERING PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of surveyor) with respect to the amount claimed for \$ 1,500.00 (Global Sum) for vehicle no. SHB 4824H that was damaged pursuant to the accident which occurred on 29/06/2018 (date) along 12 WALMER RD (location) involving vehicle no/s SLK 1056H.

This is pursuant to the inspection conducted on 29/06/2018 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CITYCAB PTE LTD ("the third party claimant") of vehicle no. SHB 4824H make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SHB 4824H (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this \_\_\_\_\_ (day) of 21 SEP 2018 (month) 20\_\_\_\_ (year)

MTH  
Signed by appointed surveyor



CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
205 BRADDELL ROAD  
SINGAPORE 579701

Signed by "the workshop" (with chop)

Please forward your cheque made payable to: COMFORTDELGRO ENGINEERING PTE LTD.  
"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 REG. NO.: 199506048W  
Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY, CHARFIS BUILDING #08  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHB4824H

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
15.12.2017

CHASSIS CODE  
KMHTB411MHJ100034

INV. NO/DATE  
91386999 31.07.2018

JOB NO.  
305181367

OILMETER READING

DATE/TIME IN  
29.06.2018 11:00

Description : 3P 29.06.2018

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

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0001	L	PANEL HEATING	400.00		400.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	400.00		400.00
0003	17-01	CHECK ALL LIGHTING	20.00		20.00
0004	20-00	TUFF COAT ON AFFECTED PARTS.	30.00		30.00
0005	20-05	REMOVE/REPAIR REVERSE SENSOR	30.00		30.00

SUB-TOTAL : 880.00

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 SUPPLIED AND DELIVERED AT OWNERS' RISK.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 10 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 RESPECT OF ANY AMOUNT DUE AND UNPAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OR PAYMENT DATE AFTER 30 DAYS FROM THE DUE DATE FOR THE PERIOD OF DEFAULT.

4. PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DISCREPANCY OR DISCONTINUITY 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	91386999	941.60	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 2

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHEFFTON WAY, CHARTIS BUILDING #08  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHR4824H

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
15.12.2017

CHASSIS CODE  
KMHL8411MHU100034

INV. NO/DATE  
91386999 31.07.2018

JOB NO.  
305181367

ODOMETER READING

DATE/TIME IN  
29.06.2018 11:00

Items total	880.00
Add GST @ 7.000 %	61.60
Invoice amount	941.60

Issued by : KATHERINETAN 31.07.2018 12:02:45  
Repair type : CPSO/57/57  
Payment Type/Term: /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OF EITHER APPURTENANCES, BELONGINGS TO CUSTOMERS AND VEHICLES AND DRIVER AND REPAIRS OR OWNERS RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 14 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 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 OR 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	91386999	941.60	

Our Ref: CC18060872



Date: 31 July 2018

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON                      29/06/2018    @   06:45 hrs  
ALONG                                12 WALMER RD  
INVOLVING                         SLK1056H

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHB4824H** (the "Taxi"). The Taxi was hired to **QUAH GEOFREY IC NO S1637224B** a registered hirer-operator of **CityCab 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.



MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO			0	5	3		FROM	TO
0404	165	1815	2331	21/6	Geoffrey	0	5	3	320	6:15am	7:15pm
0546	192	1850	0041	22/6	Geoffrey	0	5	3	385	6:00am	5:50pm
0810	214	1705	0115	23/6	Geoffrey	0	5	3	146	6:30am	3:00pm
1113	303	1730	0650	24/6	Geoffrey	0	5	3	38	10:20am	2:30pm
1615	502	1650	0705	25/6	Geoffrey	0	5	4	420	5:30am	7:10pm
1876	261	1630	0522	26/6	Geoffrey	0	5	4	336	6:00am	6:30pm
2263	387	1715	0533	27/6	Geoffrey	0	5	5	403	6:15am	5:50pm
2471	208	1745	0035	28/6	Geoffrey	0	5	5	337	6:15am	6:45pm
2511	40	12:55am	1:40am	29/6	Geoffrey	0	5	5	190	5:45am	10:50am
2753	242	5:30am	11:30am	30/6/18	3 Dubaut Repair				SHR48244	1100	-
2976	223	6:30am	5:45pm	02/7/18					✓	-	1545

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLK1056H	29 Jun 2018 / 06:45:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

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

SUB4824H

## ...CLAIM SUBFOLDER...(Pending for Survey Report)

Express

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	05 Jul 2018 <a href="#">Edit Reg</a>		29 Jun 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$880.00</b> <a href="#">Edit Estimates</a>	<b>S\$880.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured: <b>Michael Joseph</b> , ID: 57215578E									
Main Claimant: <b>CITYCAB PTE LTD</b> , Co. Reg. No.: 199502839G									
Vehicle Reg. No.:	<b>SHB4824H</b>	Date of Loss:	29/06/2018 06:00 - :59 [6 Months and 14 Days From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP / 7439913819SG</b>	Policy/Cover Note No.:	2100496680-01 (Comprehensive)						
Vehicle Reg. No. (Insured):	<b>SLK1056H</b>	Policy No. (Claimant):	D-18088937MFSH						
		Excess:							
Repairer:	<b>ComfortDelGro Engineering Pte Ltd (Loyang)</b> 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	<b>AIG Asia Pacific Insurance Pte. Ltd. (Express)</b> - Tel: 65-6419-3000 ... [Handled by <b>MdNoor, Norsiah</b> ] Norsiah.MdNoor@aig.com								
Claimant's Insurer:	<b>MS First Capital Insurance Ltd (HQ)</b> - Tel: 62222311								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>MOHD TAUFIKH BIN HAMID</b> ] ... [Final Rpt due 13/07/2018]								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
• AIG_SG (05/07/2018): No OI GIA Report									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*SHB4824H (7439913819SG)**  
**[SLK1056H]**  
**TP**  
**CITYCAB PTE LTD**  
**Jun 29 2018 6:50AM**  
**[Michael Joseph]**  
**ComfortDelGro Engineering Pte Ltd**

Upload Documents		Upload Photos		Compose New Letter		Upload Video		Upload Audio		View <span style="border: 1px solid black; padding: 2px;">View in Browser</span>	
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<b>Letters/Correspondences</b>										1 per page <span style="border: 1px solid black; padding: 2px;">v</span>		<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)								Thumbnail	Print	
1	(Draft)	Third Party Express Settlement - Payment Breakdown						1		Edit		

<b>Assessment Reports</b>										1 per page <span style="border: 1px solid black; padding: 2px;">v</span>		<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)								Thumbnail	Print	
1	24/07/18 12:04	<b>Accident Statement</b> <small>From: SC - Reg. No: SLK1056H, Claimant: MICHAEL JOSEPH</small>						1		Load HTM		

<b>Photos/Images</b>										3 per page <span style="border: 1px solid black; padding: 2px;">v</span>		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)								Thumbnail	Print	
1	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
2	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
3	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
4	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
5	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
6	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
7	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
8	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
9	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
10	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
11	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
12	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
13	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
14	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
15	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
16	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
17	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	
18	21/09/18 16:01	General View						1		Load JPG	<input checked="" type="checkbox"/>	

<b>Documentation</b>										1 per page <span style="border: 1px solid black; padding: 2px;">v</span>		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)								Thumbnail	Print	
1	04/07/18 18:01	TP ESTIMATE - MARKED						1		Load PDF		
2	04/07/18 18:01	TP GIA REPORT						1		Load PDF		
3	06/07/18 10:20	Non reporting letter						1		Load PDF		
4	28/09/18 09:11	WORKSHOP INVOICE						1		Load PDF		
5	28/09/18 09:11	AUTHORISATION TO ACT FORM						1		Load PDF		
6	28/09/18 09:11	Release Voucher						1		Load PDF		
7	28/09/18 09:11	RENTAL RECEIPT						1		Load PDF		
8	28/09/18 09:11	LTA SEARCH						1		Load PDF		
9	28/09/18 09:11	LETTER TO OI						1		Load PDF		

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	<a href="#">Reset</a>	<a href="#">Save</a>	<a href="#">Print</a>
There are no document checklists configured.			

<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>
<div></div>
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM \_\_\_\_\_

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SLK1056H (Insd veh)	Model:	HYUNDAI I40 1.7 D CRDI (A)
	SHB4824H (TP veh)		
Date of Accident:	29/06/2018		

Global Sum Settlement	: [ X ] Yes	: [ ] No	
Repair Estimate	: \$		4,474.83
Final Repair Cost	: \$		1,500.00
Loss of Use	: \$		3.50 days at \$50.00 per day
Rental (if any)	: \$		3.50 days
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$		1,500.00

**Is Third Party Workshop GIA Registered?** [ X ] YES [ ] NO (Kindly indicate below)

**A) For Non GIA Registered Workshop:** Agreed Liability \_\_\_\_\_ (%)

**B) For GIA Registered Workshop:** BOLA Applicable: Yes/ ~~No~~ BOLA Scenario No: 24

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	: \$	1,500.00
2)		: \$	
3)		: \$	
4)		: \$	
5)		: \$	

JOANNE LEE KHANG MIN

28 Sep  
2018

LKK Auto Consultants Pte Ltd

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 (Co. Reg. No: 199607196R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park  
Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC3/AIG18012178/T1WA3Q2

Date: 28/09/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100496680-01

Claimant Vehicle No: SHB4824H

Insured Vehicle No: SLK1056H

Date of Loss: 29/06/2018

Nature of Claim: TP

Claim No: 7439913819SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHB4824H

Make &amp; Model: HYUNDAI I40, 1.7 D CRDi (A)

Engine No: D4FDHU730967

Reg. Date: 15/12/2017 (Man. Year: 2017)

Chassis No: KMHLB41UMHU100034

Colour: Yellow

Odometer: 55581 km

Engine Capacity: 1685 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 205/60 R16

Rear Tyre Size: 205/60 R16

Front Left Side: Hankook 6 mm

Rear Left Side: Hankook 6 mm

Front Right Side: Hankook 6 mm

Rear Right Side: Hankook 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,342.08	0.00	2,342.08	100.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,840.00	880.00	960.00	52.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>4,182.08</b>	<b>880.00</b>	<b>3,302.08</b>	<b>78.96</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>292.75</b>	<b>61.60</b>	<b>231.15</b>	<b>78.96</b>
<b>Nett Amount (S\$)</b>	<b>4,474.83</b>	<b>941.60</b>	<b>3,533.23</b>	<b>78.96</b>
<b>+ Loss of Use (3.5 x S\$50.00/day) (S\$)</b>		<b>175.00</b>		
<b>+ Car Rental (3.5 x S\$117.00/day) (S\$)</b>		<b>409.50</b>		
<b>+ Doc/Search Fee (S\$)</b>		<b>7.49</b>		
<b>Nett Liability (S\$)</b>		<b>1,533.59</b>		
<b>Global Sum Settlement (S\$)</b>		<b>1,500.00</b>		

INSPECTION

Date of Assignment: 29/06/2018

Date Inspected: 29/06/2018 Inspected At:

ComfortDelGro Engineering Pte Ltd  
(Loyang)

59 Loyang Drive  
Singapore 508969

Estimated Period of Repair: 3.0 days

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**Adjuster:** MOHD TAUFIKH BIN HAMID

**Manager:** VIVIAN LAU PEI FENG

*NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.*



REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Repair	603.60 FL	*- FL
2	1		*REAR BUMPER CLIPS	Not Necessary	22.00 FL	*- FL
3	1		*REAR FENDER (RH)	Repair	2,020.10 FL	*- FL
4	1		*REAR FENDER INNER LINING (RH)	Not Necessary	164.40 FL	*- FL
5	1		*REAR WINDSCREEN MOULDING	Not Necessary	60.00 FL	*- FL
6	1		*REAR WINDSCREEN SEALANT	Not Necessary	46.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$)	2,916.10	0.00
- List Item Discount on L Items 20.00/20.00% (\$\$)	574.02	0.00
Total Parts (\$\$)	2,342.08	0.00

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	850.00	400.00
2	SPRAY PAINTING CHARGE	New	500.00	400.00
3	WIRING CHARGE	New	50.00	20.00
4	TUFF KOTE	New	50.00	30.00
5	REMOVE/REFIX CUSHION & UPHOLSTERY REAR	New	150.00	0.00
6	REMOVE/REFIX REAR WINDSCREEN GLASS	New	120.00	0.00
7	REMOVE/REFIX REVERSE SENSOR	New	120.00	30.00
Gross Labour Cost (\$\$)			1,840.00	880.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >