



CC18070785/ SHC364P /WT(ck) ComfortDelGro Engineering Pte Ltd Your Ref: CDGE Taxi Claims Dept 25-Jul-18 Date 59 Loyang Drive 4th Flr Singapore 508969 **AXA Insurance Pte Ltd** www.cdge.com.sg 8 Shenton Way #24-01, AXA Tower Singapore 068811 WITHOUT PREJUDICE Attn: Motor Claims Department Dear Sir ACCIDENT INVOLVING OUR TAXI SHC364P YOUR INSURED SDE6908T 26.07.18 ON AND OTHER We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No : which was involved in the captioned accident with your insured vehicle. SHC364P 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 SDE6908T we are submitting these claim for your consideration on behalf of the claimants. TAXI OWNER'S CLAIM 883.26 Cost of Repair 1 \$ 125.40 per day \$ 627.00 Singapore 768732 days Loss of Rental @ 2 \$ (Surveyed by M/s LKK) Survey Report Fees 3 7.49 LTA Search Fees 4 GIA / Police Report Fees 5 \$ **Towing Fees** 6 Sub Total: \$ 1,517.75 HIRER'S CLAIM 400.00 80.00 per days 5 days Loss of Income @ 1.917.75 **Total Claims:** We enclose herewith the following documents to support the claims: pcs. Original repair bill and photocopies of photographs **SDE6908T** LTA search slip/s of: b) SHC364P GIA / Police report/s of : c)

Letter of authority from owner / hirer / operator d) ) Photocopie/s of Accident Scene Photo/s

( ) Certificate of Insurance

( ) Witness statement/s (x) Rental Rate letter (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 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.









Facsimilie +65 6280 9755

Workshops

Loyang

383 Sin Ming Drive Singapore 575717

Singapore 609286

Senoko

Sungei Kadut

Yishun 501 Yishun Industrial Park A

#### LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING ALONG

TOYOTA PRIUS SHC364P , SDE6908T WHITLEY ROAD TWDS STEVEN ROAD.

ON 26-Jul-18 13:30

ONG KIM BOON

(Hirer) NRIC No.:

S1318729J

and/or

I / We

(Relief) NRIC No.:

Taxi Number

SHC364P

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

- 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

27-Jul-2018

Name of Hirer

ONG KIM BOON

Hirer NRIC

S1318729J

Signature :



Address

101 HOUGANG AVENUE 1 #05-1161

530101

Contact No.

91705517



A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

vorksnops
59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Ubi Road 3 Singapore 408649

24 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

SHENTON WAY AXA TOWER INGAPORE SG 068811

CONTACT NO: 63387288

VEHCLE NO

INV. NO/DATE 91387273 31.07.2018

MAKE

MODEL PRIUS HYBRID(G4)

ODOMETER READING

**DATE OF REG** 17.08.2017

DATE/TIME IN 27.07.2018 11:10

CHASSIS CODE JTDKB3FU603562692

Qty Unit Price

25.00

14.70

# ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

INVOICE No. **AMOUNT** BANK/CHQ No. ACCOUNT No. 8010010

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY



A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

8 SHENTON WAY AXA TOWER SINGAPORE SG 068811

CONTACT NO: 63387288

### ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

24 Senoko Loop Singapore 758156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 768732

COMPANY REG. NO.: 199506048W

VEHCLE NO SHC 364P

INV. NO/DATE 91387273 31.07.2018

MAKE TOYOTA

MODEL PRIUS HYBRID(G4)

DATE OF REG 17.08.2017

DATE/TIME IN 27.07.2018 11:10

CHASSIS CODE JTDKB3FU603562692

Items total

Add GST @

TAX INVOICE

883.26

Issued by : CHEWBEELENG 01.0 Repair type : CFS0/57/57 Payment Type/Term: /Credit 30 days

## ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

BANK/CHQ No. **AMOUNT** ACCOUNT No. INVOICE No. 8010010 91387273

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CC18070785

Date: 01 August 2018



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

26/07/2018 @ 13:30 hrs

ALONG

WHITLEY ROAD TWDS STEVEN ROAD.

INVOLVING

SDE6908T

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 SHC0364P (the "Taxi"). The Taxi was hired to ONG KIM BOON IC NO S1318729J a registered hirer-operator of CityCab 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.

College Colleg

HOURS OPERATED (TIME)  FROM TO  1800 2100  0700 2200  0640 1700  1730 0148  0700 1748  0700 1748  1755 0205  1755 0205	
MILEAGE READING  1 7 8 4 1 6 3 20 5  1 9 5 6 9 20 5  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6  1 9 5 6 9 20 6	
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**Enquire Vehicle Insurer** 

Vehicle No. Incident Date/Time

Search Status

Insurance Company Code

Insurance Company Name

SDE6908T

26 Jul 2018 / 13:30:00

Successful

A12

AXA INSURANCE PTE LTD

Previous

OK

SMC 364P