

TE RICHARD

4. Accm

14185

Klea3

LPI

60845.

Surveyor:

AWK

ASSIGNMENT

31/7/2018

Date / Time:

31/7/2018

Registered in Merimen:

Pre-assign / CCU / FTE

SGH 8882T



Insured Vehicle No.:

Claim No.:

S8m00QGN

Name of Insured:

TAN TAI SHAN

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A.:

22/7/2018

Place of Accident:

Cheng's Hospital - Drop off point

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

SHD 3550 T



INSRS:

WSP:

Tel:

Liability:

RMKS:

CDH6 laying



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SHD3550T - 04/185m1820 2696/K126352: 08/18

SGH 8882T - X

STAGE

DATE / PIC

Non-Reporting ltr (1st): 7.8.18

Non-Reporting ltr (2nd): 10.9.18, 2.11.18

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

08/18 13.3.19

After call ltr to OI:

* SMART claim - TP vehicle no. is wrong.

S18 to request of GIA.

21/8/2018. Sent out 1st letter.

OI Reported.

18-08-19 to 10 (ALSD OI NO RESPONSE).

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:

18

Sent By:

AWK (with msg)

FINALIZATION

Date/Time:

Confirm with:

Confirm by: AWK

Repair Cost:

P/P \$5300

(2 days)

Reduction:

72 %

Email

Call

FINAL SETTLEMENT

Date/Time: 23.7.19

Confirm with: WUWUWU

Email

Call

Final Liability:

100%

%

50

/

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

MA

If NO or B 28, Ass. Lia:

Repair Cost: \$1640

+ 320.00

SS

160.50

/

TP MOVE OFF STATIONARY. DID OVERPARK TO TURN IN.

Loss of Rental (LOR):

299.00

SS

117.00

/

(2 days) x 117

Loss of Use (LOU):

-

SS

-

/

(3 x days)

Loss of Income (LOI):

+ 100.00

SS

50.00

/

(\$ 50 x 2 days)

LOR only

LOU only

LOR + LOU

LOR + LOI

/

[Tick only one]

GIA/LTA Search

17.49

SS

7.49

Medical:

-

SS

-

Disbursement:

-

SS

-

Legal Cost:

-

SS

-

Total:

+ 162.49

SS

334.99

/

Global Sum SS:

FINAL PAYMENT

Date/Time: 23.7.19

Confirm with: WUWUWU

Email

Call

Payee 1:

SS

334.99

Payee 2: (Strike if N.A.)

SS

Payee 3: (Strike if N.A.)

SS

Name 1:

COMPASSIONATE ENGINEERING PTE LTD

Name 2:

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: 350

Surveyor: Calvin

ASSIGNMENT

Veh No: SHD3550T Yr Reg: 11 Jan, 2014

Type: M.Car / M.Cycle / Bus / Van / Lorry / T~~o~~l / Prime Mover /

Truck / Trailer or

Make: Hyundai 240 cc 1.685

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading 213204 T/Radio: Insured / Std / NI / NA

Ena/Not

C/No: KMHLB 414A HU 098249

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: Inoperable / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD ~~S~~Rim or

| | |
|-----|-----|
| | |
| N/S | O/S |
| | |

Tyre Size: F: 205/60R16

Re:

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

TOYO / YOKO or

Front _____ Rear _____

| | | | | | |
|--------|---|----|--------|---|----|
| R/Bal. | 7 | mm | R/Bal. | 7 | mm |
|--------|---|----|--------|---|----|

U/Bal. 7 mm U/Bal. 7 mm

D.O.A. 27/2/88 D.O.I. 31/2/88

Survey held at CDHE (Loyang)

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

Prod 615

The U/C / Chassis frame / Body Structure affected due to collision.

As
14

☐ : Prelim. Report
☐ : Final Report

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: : Site Insp (\$) \$ + RS. \$☐ : Interview (\$) Photos

| | | | |
|--|----------------|---|--------|
| | Tech. Invs (\$ |) | Others |
|--|----------------|---|--------|

Weekend (\$)

TOTAL

REPAIR ESTIMATE*

VEHICLE NO : SHD 3550T

DATE 31/7/2018 11:11

MAKE :

MODEL : HYUNDAI i40

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|--|---|------|------------|---------------------------------|
| | Front Bumper Cover <i>X Repair</i> | | | \$ 562.30 |
| | Front Bumper Bracket Top (RH) <i>X SW</i> | | | \$ 22.40 |
| | Front Bumper Bracket (RH) <i>X SW</i> | | | \$ 24.60 |
| | SUB TOTAL | | | \$ 609.30 |
| | LESS 20% | | | \$ 121.86 |
| | DISCOUNTED TOTAL | | | \$ 487.44 |
| | Labour Charge | | | |
| | Panel Beating | | | \$ 350.00 <i>100</i> |
| | Spray Painting Charge | | | \$ 250.00 <i>200</i> |
| | TOTAL LABOUR | | | \$ 600.00 |
| | ESTIMATE TOTAL | | | \$ 1,087.44 |
| <p><i>Kali 10/11/18</i></p> <p><i>31/7/18 1430</i></p> <p><i>2 Days</i></p> <p><i>P/P</i></p> <p><i>After part p/Lt</i></p> | | | | |
| <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • To resurvey (if needed) after spray painting • To display items (if partial) during resurvey • Parts prices are on "Without Prejudice" basis • Third party work is on "Without Prejudice" basis • No illegal work is allowed • Supplemental work is on "Without Prejudice" basis and is subject to the insurance company's approval <p>Acknowledged by Repairer:</p> <p>Signature:</p> <p>Date:</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. | | | | |

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305194154
Date : 03/08/18

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

FINALIZATION FORM

To : LKK Fax :
Attn : KALVIN
: SHD3550T Date of Accident : 27/07/2018

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

1. The repair job shall bill to: AXA --- SGH8882T
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$0.00
 - (b) Labour Charges ### \$300.00
 - Total for Part-By-Part Repair Cost \$300.00
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
Final Lumpsum Repair cost

3. Estimated normal period for repairs: 2 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.

We confirm the estimates and
finalized amount

Signature :
Name : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature :
Name : Kahl
Date : 6/8/18

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. Overrun | | | | |

Remarks:

Final Amount Subject to Insurance Approval

REPAIR ESTIMATE*

VEHICLE NO : SHD 3550T

DATE 31/7/2018 11:11

MAKE :

MODEL : HYUNDAI i40

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|--|--|------|------------|----------------------|
| | Front Bumper Cover <i>X Repair</i> | | | \$ 562.30 |
| | Front Bumper Bracket Top (RH) <i>X</i> | | | \$ 22.40 |
| | Front Bumper Bracket (RH) <i>X</i> | | | \$ 24.60 |
| | SUB TOTAL | | | \$ 609.30 |
| | LESS 20% | | | \$ 121.86 |
| | DISCOUNTED TOTAL | | | \$ 487.44 |
| | Labour Charge | | | <i>100</i> |
| | Panel Beating | | | \$ 350.00 |
| | Spray Painting Charge | | | \$ 250.00 |
| | TOTAL LABOUR | | | \$ 600.00 |
| | ESTIMATE TOTAL | | | \$ 1,087.44 |
| <p><i>1 call 10/11/18</i></p> <p><i>31/7/18 1430 L</i></p> <p><i>2 hrs</i></p> <p><i>P/P</i></p> <p><i>After part p/L</i></p> <div data-bbox="867 1420 1387 1845" data-label="Text"> <p>UKK Auto Consultants Finance notify the Repairer of the following:</p> <ul style="list-style-type: none"> To survey damage after panel beating To display damaged parts during survey Parts price will be based on quotation Third party liability will be on "insured" basis No illegal or unsafe repairs Supplies must be surveyed and is subject to approval from insurance company <p>Accepted by Repairer</p> <p>Signature:</p> <p>Date:</p> </div> | | | | |
| 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. | | | | |

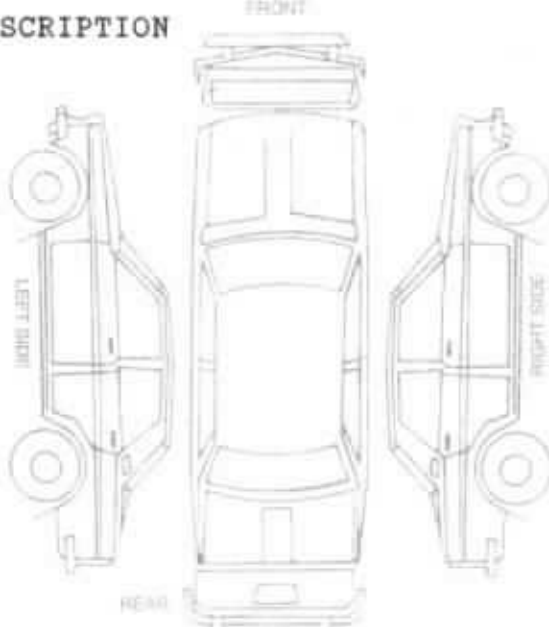
member of COMFORTDELGRO

Date/Time: 31.07.2018 10:11 Page : 1

| | | | | | |
|---------------|--------------------------------|----------|-----------------------|-------------------|-----------|
| Team: | ARC Repair TP(CLSO)1 | JOB CARD | Sales Order: | JC NO: | 305194154 |
| OWNER | COMFORT TRANSPORTATION PTE LTD | | REGN NO | SHD3550T | |
| S | 7010045 | | MAKE | HYUNDAI | |
| OWNER NO | 383 SIN MING DRIVE | | MODEL | I-40 | |
| ESS | Singapore SINGAPORE 575717 | | DATE/TIME IN | 31.07.2018 09:50 | |
| (R) | 65508755 (C) | | YR OF MANU | 11.01.2017 | |
| (P) | | | CHASSIS CODE | KMHLB41UMHU098247 | |
| JUNT CARD NO: | | | COMPLETION DATE/TIME: | | |

JOB DESCRIPTION

Accident Date: 27.07.2018
NATURE: 3P 27.07.18 /C

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

ISSUED & PASSED OUT BY: _____

SERVICE ADVISOR _____ CUSTOMER'S SIGNATURE _____

| | | | |
|---|-----------------|------------------------------|----------|
| Leakage Slip | | Exit Pass | |
| No: | SHD3550T JU AXA | Vehicle No: | SHD3550T |
| Signature/Date | | Name of Service Advisor | |
| To be kept by Service Reception upon collection | | To be kept by Security Guard | |

Our Ref : T 0818/ SHD3550T /WT(ck)

Your Ref :

Date : 10-Aug-18

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

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mailing +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198900009

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 608286

Ubi
320 Ubi Road 3
Singapore 408549

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

AXA Insurance Pte Ltd
8 Shenton Way
#24-01, AXA Tower
Singapore 068811

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHD3550T YOUR INSURED SGH8882T
AND OTHER ON 27.07.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SHD3550T 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 SGH8882T we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

| | | | |
|-------------|---|----|--------|
| 1 | Cost of Repair | \$ | 321.00 |
| 2 | <u>2</u> days Loss of Rental @ \$ <u>117.00</u> per day | \$ | 234.00 |
| 3 | Survey Report Fees (Surveyed by M/s LKK) | \$ | - |
| 4 | GIA / LTA Search Fee | \$ | 7.49 |
| 5 | GIA / Police Report Fees | \$ | - |
| 6 | Towing Fees | \$ | - |
| Sub Total : | | \$ | 562.49 |

HIRER'S CLAIM

| | | | |
|---------------|---|----|--------|
| 7 | <u>2</u> days Loss of Income @ \$ <u>80.00</u> per days | \$ | 160.00 |
| Total Claims: | | \$ | 722.49 |

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

- Original repair bill and photocopies of photographs 4 pcs
- LTA search slip/s of : SGH8882T
- GIA / Police report/s of : SHD3550T
- Letter of authority from owner / hirer / operator
 - () Photocopy/s of Accident Scene Photo/s () Traffic Compound () PIR
 - () 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.

A member of

COMFORTDELGRO



Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Wednesday, 13 March 2019 4:42 PM
To: 'TAISUAN.TAN@GMAIL.COM'
Subject: ACCIDENT INVOLVING SGH 8882T AND SHD 3550T ALONG CGH A&E DROPOFF AREA ON 27/07/2018

13 MAR 2019

TAN TAI SUAN

Dear Sir/ Mdm

OUR REF : CC4/ASM18014185/K1ea3

YOUR REF : SGH 8882T

ACCIDENT INVOLVING SGH 8882T AND SHD 3550T ALONG CGH A&E DROPOFF AREA ON 27/07/2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SHD 3550T against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that liability may be equally shared between both parties due to conflicting versions without any concrete evidences to support each version.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to ashersng@lkkauto.com within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6256 3561 or email us at ashersng@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

c.c. AXA Insurance Pte Ltd (AXA)
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****I 40 SHD3550T , SGH8882T
CHANGI HOSPITAL - DROP OFF POINT****ON 27-Jul-18 09:00**

I / We

LIM HIN KEONG(Hirer) NRIC No.: **S6800736D**

and/or

(Relief) NRIC No.:

Taxi Number

SHD3550T

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

27-Jul-2018Name of Hirer
Hirer NRIC**LIM HIN KEONG
S6800736D**

Signature :



Address

**109 SIMEI STREET 1 #06-714
520109**

Contact No.

96166868



redefining / insurance

CLAIM REF : S8M00QGN
INSURED : TAN TAI SUAN

DISCHARGE VOUCHER

We, COMFORTDELGRO ENGINEERING PTE LTD confirm that by letter of authorisation dated 27/07/2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of COMFORT TRANSPORTATION PTE LTD and the Hirer, LIM HIN KEONG of vehicle no. SHD 3550T.

Now we COMFORTDELGRO ENGINEERING PTE LTD for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars THREE HUNDRED THIRTY FOUR AND CENTS NINETY NINE ONLY. (S\$334.99) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against AXA INSURANCE PTE LTD and/or their Insured and/or the driver of vehicle no. SGH 8882T arising out of an accident with SHD 3550T on 27/07/2018.
- declare that AXA INSURANCE PTE LTD and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against AXA INSURANCE PTE LTD and/or their Insured and/or the driver of vehicle no. SGH 8882T arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify AXA INSURANCE PTE LTD against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of COMFORTDELGRO ENGINEERING PTE LTD is made without any admission of liability whatsoever on the part of AXA INSURANCE PTE LTD and/or their Insured and/or the driver of vehicle no. SGH 8882T.

Dated this 28 day of March 2019

Signed by [Signature]
(AUTHORISED SIGNATORY)

Company Stamp COMFORTDELGRO ENGINEERING PTE LTD
59 LOWANG DRIVE
SINGAPORE 536888

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

Witness : _____
Name : _____
I/C No : _____
Address : COMFORTDELGRO ENGINEERING PTE LTD
59 LOWANG DRIVE
SINGAPORE 536888

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
8 Shenton Way, #24-01 AXA Tower, Singapore 068811
Customer Centre #B1-01
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

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

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO
SHD3550T

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
11.01.2017

CHASSIS CODE
KMHLB41UMH0098247

INV. NO/DATE
91388466 07.08.2018

JOB NO.
305194154

DIAGNOSTIC READING

DATE/TIME IN
31.07.2018 09:50

Description : 3P 27.07.18

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0001 L PANRI BRATING- VRT. 100.00 100.00

0002 23-502 SPRAYPAINT ON AFFECTED AREA 200.00 200.00

SUB-TOTAL : 300.00

Items total 300.00

Add GST @ 7.000 % 21.00

Invoice amount 321.00

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 and parked at customer's risk.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM DATE OF DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. THEREAFTER THE VEHICLES WILL BE TAKEN 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 REMAINING DUE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DATE OF PAYMENT OR AFTER 30 DAYS FROM THE DATE OF DUE DATE.

4. PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DISCREPANCY OR DISAPPROVAL 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. |
|-------------|-------------|--------|--------------|
| 8010010 | 91388466 | 321.00 | |
| | | | |
| | | | |
| | | | |

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO
SHD3550T

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
11.01.2017

CHASSIS CODE
KMH1841UMHU098247

INV. NO/DATE
91388466 07.08.2018

JOB NO.
305194154

DIAGNOSTIC READING

DATE/TIME IN
31.07.2018 09:50

Issued by : KATHERINETAN 07.08.2018 12:13:29
Repair type : (ISO)/57/57
Payment Type/Term: /Credit 30 days

1. WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR DAMAGE TO OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 1 HOUR FROM DATE OF DELIVERY OR NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINT. 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 VEHICLE DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT OR 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 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. |
|-------------|-------------|--------|--------------|
| 8010010 | 91388466 | 321.00 | |
| | | | |
| | | | |
| | | | |

Our Ref: CT18070778

Date: 07 August 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 27/07/2018 @ 09:00 hrs
ALONG CHANGI HOSPITAL - DROP OFF POINT
INVOLVING SGH8882T

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 **SHD3550T** (the "Taxi"). The Taxi was hired to **LIM HIN KEONG IC NO S6800736D** 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.

Enquire Vehicle Insurer

| Vehicle No. | Incident Date/Time | Search Status | Insurance Company Code | Insurance Company Name |
|-------------|------------------------|---------------|------------------------|------------------------|
| SGH8882T | 27 Jul 2018 / 09:00:00 | Successful | A12 | AXA INSURANCE PTE LTD |

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

SIN 3520 T

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

| | | | |
|-------------------|----------------------|--------|-------------|
| Vehicle No: | SGH 8882T (Insd veh) | Model: | HYUNDAI I40 |
| | SHD 3550T (TP veh) | | |
| Date of Accident: | 27/07/2018 | | |

| | | | |
|-----------------------|------|------------------------------|--|
| Global Sum Settlement | : | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Repair Estimate | : | \$ | 1,163.58 |
| Final Repair Cost | : | \$ | 321.00 |
| Loss of Token Sum | : | \$ | 100.00 |
| Rental (if any) | : | \$ | 234.00 |
| | @50% | | 327.50 |
| LTA / GIA Search Fee | : | \$ | 7.49 |

| | | | |
|---------|---|----|------|
| Others: | : | \$ | 0.00 |
|---------|---|----|------|

| | | | |
|----------------------|---|----|--------|
| | : | \$ | |
| Final Settlement Sum | : | \$ | 334.99 |

| | |
|---|--|
| Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below) | |
| A) For Non GIA Registered Workshop: | Agreed Liability _____ (%) |
| B) For GIA Registered Workshop: | BOLA Applicable: Yes/ No BOLA Scenario No: _____ |
| BOLA Liability: _____ 50 _____ (%) | 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 | \$ 334.99 |

JOANNE LEE KHANG MIN
LKK Auto Consultants Pte Ltd

16/04/2019
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**

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

| Affiliated to Federation Internationale Des Experts En Automobile | | | |
|--|--|-------------------------------|---|
| AXA INSURANCE PTE LTD | | Ref : CC4/ASM18014185/K1ea3q2 | |
| 8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:RICHARD ANG | | Date : 16-04-2019 |  |
| | | Code : ASM | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | |
| Insured Veh. | SGH 8882T | Veh. Inspected | SHD 3550T |
| Policy No. | GA294567 | Coverage (\$) | 0.00 |
| Claim No. | SBM00QGN | Excess (\$) | 0.00 |
| Assign From | | Assign Date | 31/07/2018 |
| 2. Vehicle Particulars & Condition | | | |
| Make & Model | HYUNDAI I40 | c.c | 1685 |
| Engine No. | HIDDEN | Year of Reg. | 2017 |
| Chassis No. | KMHLB41UMHU098247 | Colour | BLUE |
| Odometer | 213204 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | STANDARD ALLOY RIM |
| General | GOOD | | |
| 3. Conditions of Tyres | | | |
| | Size | Make | Balance |
| R/H Front Tyre | 205/60 R16 | HANKOOK | 7 mm |
| L/H Front Tyre | 205/60 R16 | HANKOOK | 7 mm |
| R/H Rear Tyre | 205/60 R16 | HANKOOK | 7 mm |
| L/H Rear Tyre | 205/60 R16 | HANKOOK | 7 mm |
| 4. Description of Damages | | | |
| THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS. | | | |
| 5. General Information | | | |
| Accident Date | 27/07/2018 | Inspection Date | 31/07/2018 |
| Survey held at | COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969 | | |
| 5a. Remarks | | | |
| A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | |
| 5b. Estimate Days of Repair | | | |
| ESTIMATED NORMAL PERIOD FOR REPAIR: | | 2 Working Days | |



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 3550T

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|------------------------------------|--|----------------------|---------------------------|-------------------|
| REPLACEMENT OF PARTS | | | | |
| 1 | FRONT BUMPER COVER (CONSISTENT) | TO REPAIR SEE LABOUR | 562.30 | - |
| 1 | FRONT BUMPER BRACKET TOP (RH) (CONSISTENT) | SERVICEABLE | 22.40 | - |
| 1 | FRONT BUMPER BRACKET (RH) (CONSISTENT) | SERVICEABLE | 24.60 | - |
| | LESS 20% DISCOUNT | | -121.86 | - |
| | | | 487.44 | - |
| LABOUR | | | | |
| | PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT BUMPER COVER. | | 350.00 | 100.00 |
| | SPRAY PAINTING CHARGE. | | 250.00 | 200.00 |
| | | | 600.00 | 300.00 |
| GRAND TOTAL | | | 1,087.44 | 300.00 |
| RECOMMENDED COST OF REPAIRS | | | | 300.00 |

Report Ref No. CC4/ASM18014185/K1ea3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Service Request Details

Claim

SRM000GN

Reference

CC4/ASM18014185/K1ea3a2

Loss Date

27 July 2018

Report Date

31 Jul 2018 12:41:35 PM

Request Date

21 August 2018

Due Date

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (LTD)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Vehicle Information

Incident Vehicle Registration #

SHD3350T

Make

TPWD HYUNDAI

Model

I40

Service Address

Primary Contact/Insured

TAN TAI SUAN

BLK 230H TAMMINES STREET 21, #09-679, 522230, Singapore

INFO@ALLINS.COM.SG

Claim Handler

ANG Richard

richard.ang@ps@axa.com.sg

Actions

Next Step

Wait for Approve Invoice

Add Remarks

Additional Instructions

Document Type

Document SubType

Upload Documents

NAME

TYPE

SUB-TYPE














AUTHOR

DATE UPLOADED

Accident Statement

Reports & Statement

Mermen

| NAME | TYPE | SUB-TYPE | AUTHOR | DATE UPLOADED |
|---|----------------------------|----------------------------------|-----------------------------------|---------------|
|  LKK Invoice 1 (2).pdf | Invoice | Surveyor/ Assessor expense | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  RENTAL RECEIPT.pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  RENTAL MILEAGE.pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  payment breakdown.pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  LTA SEARCH.pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  LOD.pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  LKK Inspection (2).pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  LKK Adjustment 1a (2).pdf | Forms / Claim Documents | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  DISCHARGE VOUCHER.pdf | Forms / Claim Documents | Satisfaction / Discharge Voucher | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  AUTHORISATION TO ACT FORM.pdf | Forms / Claim Documents | POA / Authority Letter | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  WORKSHOP INVOICE.pdf | Invoice | Repaier | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  LETTER TO OI.pdf | Letters and Correspondence | Policy Holders / Insured | LKK AUTO CONSULTANTS PTE LTD (TP) | 18 April 2019 |
|  Immediate Advice with Mandate.pdf | Reports & Statement | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 13 March 2019 |
|  LKK Survey Photo.pdf | Reports & Statement | Others | LKK AUTO CONSULTANTS PTE LTD (TP) | 13 March 2019 |

