




INS. CASE OWNER:		CC 4/AXA1801 4763, F7+637		LKK IDAC:	
Surveyor: <u>Kallin</u>		DOI: <u>17/8/18</u>		Date / Time: <u>14/8/18</u>	
Pre-assign / CCU / FTE		ASSIGNMENT			
Insured Vehicle No. : <u>SLF 8448R</u>		Claim No. : <u>88000001 / 62883</u>			
Name of Insured : <u>SENTOSA BUILDING CONSTRUCTION Pte Ltd</u>		Policy No. : _____			
Insured Tel No. : _____		HP: _____		Make / Model : _____	
Excess Sec II : \$5		D.O.A : <u>14/8/18</u>		Place of Accident : _____	
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. : _____		(VL: YES / NO)		Insured Liability : % Final ? Yes / No	
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>INSRS: _____ WSP: _____ Tel: _____ Liability: _____ RMKS: _____</p> </div> <div style="text-align: center;">  <p>INSRS: _____ WSP: _____ Tel: _____ Liability: _____ RMKS: _____</p> </div> <div style="text-align: center;">  <p>INSRS: _____ WSP: _____ Tel: _____ Liability: _____ RMKS: _____</p> </div> </div>					
Date/ Time		STAGE			
1/8		Non-Reporting ltr (1st):			
4/9/18		Non-Reporting ltr (2nd):			
4/9/18		Non-Reporting ltr (Final):			
4/9/18		Notification ltr (if non-pickup):			
4/9/18		Call OI:			
4/9/18		After call ltr to OI: <u>5/4/2018 e-mail</u>			
4/9/18		Documentation Check List: Handler Typist			
4/9/18		Notification ltr (if non-pickup) <input type="checkbox"/>			
4/9/18		After call ltr to OI: <input checked="" type="checkbox"/>			
4/9/18		Authorisation To Act: <input checked="" type="checkbox"/>			
4/9/18		Release Voucher: <input checked="" type="checkbox"/>			
4/9/18		Final Repair Bill: <input checked="" type="checkbox"/>			
4/9/18		Car Rental Invoice: <input checked="" type="checkbox"/>			
4/9/18		Towing Invoice: <input type="checkbox"/>			
4/9/18		LTA / GIA : <input checked="" type="checkbox"/>			
4/9/18		Medical Bill: <input type="checkbox"/>			
4/9/18		PBR: <input type="checkbox"/>			
4/9/18		Mandate/Reject Instruction: <input checked="" type="checkbox"/>			
4/9/18		LOD: <input checked="" type="checkbox"/>			
4/9/18		Payment Breakdown Form: <input type="checkbox"/>			
4/9/18		Post-Repair Photos: <input type="checkbox"/>			
4/9/18		Others: <input type="checkbox"/>			
PRIMARY ADVICE Date/Time: <u>6/11/2018</u>		Sent By: <u>CPK</u>			
ESTIMATION Date/Time: _____		Confirm with: _____			
Cost: \$5 1,450.00 (2 days) Reduction: 44 %		Confirm by: _____			
SETTLEMENT Date/Time: <u>1/11/2018</u>		Email <input type="checkbox"/> Call <input checked="" type="checkbox"/>			
Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>15</u>		IF NO or B 28, Ass. Lia: _____			
Cost: (w/loss) \$5 1,557.50		020 Changing date <u>8/12/18</u>			
Rental (LOR): \$5 460.00 (4 days) x \$115.00					
Use (LOU): \$5 - (15 x days)					
Income (LOI): \$5 200.00 (\$50.00 x 4 days)					
By <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOI <input type="checkbox"/> LOR + LOI <input checked="" type="checkbox"/> (Tick only one)					
A Search \$5 7.44		1) Claim status: <u>Normal/Reject/Private Settle</u>			
\$5 -		2) Report Format: <u>TP</u>			
\$5 - (e.g. Tow/ Independent)		3) Survey fee: <u>\$350.00</u>			
\$5 -					
\$5 2,218.44 Global Sum \$5: <u>2,220.00</u>					
PAYMENT Date/Time: _____		Confirm with: _____			
\$5 2,220.00		Email <input type="checkbox"/> Call <input type="checkbox"/>			
(Strike if N.A.) \$5		Name 1: <u>Comfort Delgro Engineering Pte Ltd</u>			
(Strike if N.A.) \$5		Name 2: _____			
(Strike if N.A.) \$5		Name 3: _____			

Girveur: Kalvin

ASSIGNMENT

ODITP/WS/TPRES/ODRES/EVA/INV/MV

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

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

Truck / Trailer or

Sp. Reading 651164 T/Radio: Ins Q / Std / NI / NA.

Eng/No: _____

C/Nº: KM HLB 414MF40 64560

Gen. Cond: Good / ~~Fair~~ / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: inoper / Jammed / Leaked / Burnt on.Modi: Nil / S/Rlm / ~~SV~~A/Rlm or

Tyre Size: F: 205/60R16

R: -

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

TOYO/YOKO or *Carolina*

Front	Rear
-------	------

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

D.O.A. 11/2/68 D.O.I. 12/2/68

Survey held at (DHE (Village))

Doc. of Demand: Ert / Boaz / O/S / N/S / U/S / Reaction or

es. of Damages : Frt / Rear / O/S / N/S / U/C
O/S Frnt.

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

Date / Time	Action / Instruction
	AxA 4s
	(K) \$110,000 / (Rd) \$1394.48 / 49.1%)

Data/Time, File Pass to?

☐: Prel. Report

11

☐ : Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

Photos

1 Others

TOTAL

Report Format :

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

Add Fee: : Site Insp (\$

□: Interview (\$)

Tech. Invs. (\$

Weekend (\$)



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/ASM18014763/K1fb3		
8 SHENTON WAY #24-01 AXA TOWERS SINGAPORE 068811		Date : 14-08-2018		
		Code : ASM		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLF 8448R	Veh. Inspected	SHC 8729T	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	14/08/2018	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
4. Description of Damages				
5. General Information				
Accident Date	11/08/2018	Inspection Date	13/08/2018	
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.				

Team: ARC Repair TP(CLSO)1	JOB CARD	Sales Order: 3847100	JC NO.: 305199011
OMER	REGN NO.: SHC8729T	MILEAGE	
S COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL	
OMER NO. 7010045	MODEL I-40	E.....1/2.....F	
ESS 383 SIN MING DRIVE	YR OF MANU. 05.02.2015	DATE/TIME IN 11.08.2018 08:15	
Singapore SINGAPORE 575717	CHASSIS CODE KMHLB41UMFU064560	TARGET DATE	
65508755 (R) (O)		COMPLETION DATE/TIME	
DUNT CARD NO.			

Accident Date: 11.08.2018
NATURE: 3P 11.08.18/B

JOB DESCRIPTION

S/NO	LABOR CODE	DESCRIPTION
		

CHECKED & PASSED OUT BY: _____		_____	
SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
Acknowledgement Slip		Exit Pass	
No.: SHC8729T	PZ AXA	Vehicle No.: SHC8729T	
Signature/Date	Signature/Date	Name of Service Advisor	Date
Returned to Service Reception upon collection		To be kept by Security Guard	

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305199011

Date : 15.08.2018

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHC8729T

Date of Accident : 11.08.2018

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

1. The repair job shall bill to: AXA — SLF8448R
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$0.00
 - (b) Labour Charges \$0.00
 - Total for Part-By-Part Repair Cost** \$0.00
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$1,450.00
Final Lumpsum Repair cost \$1,450.00

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 : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : Calvin

Date : 16/8/18

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 : SHC 8729T

DATE 13/8/2018 11:18

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Front Fender (RH) <i>But</i>			\$ 619.00	
	Front Fender Shield (RH) <i>X 2</i>			\$ 169.80	
	Rocker Panel Outer Garnish <i>X 1</i>			\$ 483.60	
	Front Wheel Hub Cap (RH) <i>head</i>			\$ 150.70	
	<i>Front Door (RH) X 1</i>				
	SUB TOTAL			\$ 1,423.10	
	LESS 20%			\$ 284.62	
	DISCOUNTED TOTAL			\$ 1,138.48	
	Front Door Comfort Logo (RH) <i>me</i>			\$ 75.00	Nett
	Front Tyre (RH) <i>X 2</i>			\$ 216.00	Nett
				\$ 291.00	
	Labour Charge				
	Panel Beating			\$ 500.00 <i>400</i>	
	Spray Painting Charge			\$ 750.00 <i>600</i>	
	Tuff Kote			\$ 50.00 <i>20</i>	
	FRT Wheel Alignment			\$ 120.00 <i>60</i>	
	<i>Tuning - \$60</i>				
	TOTAL LABOUR			\$ 1,420.00	
	ESTIMATE TOTAL			\$ 2,849.48	

Kalvin LKK
 13/8/18 15:00 hrs
 20/7/18
 4/8
 After Repair photo

LKK Auto Consultants hereby notify the Repairer of the following:

- To return the vehicle to the repairer
- To display damaged parts during repair
- Parts prices are subject to confirmation
- Third party survey is not allowed
- No illegal modifications are allowed
- Supplementary items must be surveyed 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.

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 8729T

DATE 13/8/2018 11:18

MAKE :

MODEL : HYUNDAI i40

AXA

Whole Right Side

LS FZ

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Front Fender (RH) ✓			S 619.00	
	Front Fender Shield (RH) ?			S 169.80	
	Rocker Panel Outer Garnish x repair			S 483.60	
	Front Wheel Hub Cap (RH) ✓			S 150.70	
	Front Door (RH) x repair				
	SUB TOTAL			S 1,423.10	
	LESS 20%			S 284.62	
	DISCOUNTED TOTAL			S 1,138.48	
	Front Door Comfort Logo (RH) ✓			S 75.00	Nett
	Front Tyre (RH) x			S 216.00	Nett
				S 291.00	
	Labour Charge				
	Panel Beating			S 500.00 400	
	Spray Painting Charge			S 750.00 600	
	Tuff Kote			S 50.00 20	
	FRT Wheel Alignment			S 120.00 60	
	Towing ✓ \$60 ✓				
	TOTAL LABOUR			S 1,420.00	
	ESTIMATE TOTAL			S 2,849.48	
	KK Auto Consultants hence notify the Repaired of the following: • To resurvey before/after spray painting • To display damaged part(s) during resurvey • Parts prices are subject to information • Third party survey is on a "without prejudice" basis • No illegal modification(s) is allowed • Supplementary damage must be resurveyed and is subject to final approval from insurance company Acknowledged by Repaired 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.				

Kelvin 1CKK4
 13/8/18 15:06hrs
 20/8/18
 4/9
 After Repair photo



Auto
Consultants
Pte Ltd

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

14 Aug 2018

**SENTOSA BUILDING CONSTRUCTION PTE LTD
37 LORONG 23 GEYLANG #03-02, YU LI INDUSTRIAL BUILDING
Singapore 388371**

Dear Sir,

**OUR REF : CC4/ASM18014763/K1fb3
YOUR REF : SLF 8448R**

**ACCIDENT INVOLVING SLF 8448R & SHC 8729T ALONG JURONG WEST
CENTRAL 1 TOWARDS JALAN BOON LAY ON 11/08/2018**

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

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

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

We highlight that this accident has not been reported to your insurer. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you. We would appreciate it if you could urgently file a report at our approved reporting centre.

The report has to be lodged at any of AXA Premium Workshops or reporting centres (subject to your policy). For the list of AXA Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit <https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting>.

Your full co-operation is required. Kindly submit the following when lodging the report which list 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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to pohkin@lkkauto.com or deliver it by hand to 51 Ubi Avenue 1, #01-25 Paya Ubi Ind. Park S(408933).

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition, your insurer shall have full discretion in the process and settlement of the said third party claim subject to the merits of the case and according to the rights afforded under the policy.

Your NCD (No Claim Discount) will be reduced by 30% (20% for motorcycle/commercial vehicles) if a claim is made under your policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, your insurer reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact us at 6841 2132 if you have any further enquiries.

Yours sincerely,
Claim department

This is a computer generated letter and no signature is required.

CC: AXA INSURANCE PTE LTD

Poh Kin (LKKAuto)

From: Poh Kin (LKKAuto)
Sent: Thursday, 1 November 2018 3:40 PM
To: 'William Tan Thoo Seng'
Subject: RE: ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ON 11.08.2018
Attachments: DV SHC 8729T.pdf

WITHOUT PREJUDICE

Our Ref: CC4/ASM18014763/K1fb3
Your Ref: T0818/ SHC8729T/WT(st)

Dear William,

ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ON 11.08.2018

We refer to above matter and our tele conversation on even date.

As spoken over the phone, We are view that our offer is already fair and reasonable. As such, we maintain and confirmed settlement at global sum of **\$2,220.00**(all in)

Please duly sign the DV attached and return for payment processing.

Your prompt reply will be very much appreciated.

"Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement."

Best Regards,

Poh Kin, Chong (Mr) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2132 | email: pohkin@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

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Poh Kin (LKKAuto)

From: Poh Kin (LKKAuto)
Sent: Thursday, 1 November 2018 2:07 PM
To: 'William Tan Thoo Seng'
Subject: ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ON 11.08.2018

Importance: High

WITHOUT PREJUDICE

Our Ref: CC4/ASM18014763/K1fb3
Your Ref: T0818/ SHC8729T/WT(st)

Dear Sir,

ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ON 11.08.2018

We refer to the above matter.

Towards an amicable settlement and without admission of liability to our Insured's part, we offer at global sum of **\$2,220.00**(all in).

Kindly confirm acceptance.

Your prompt reply will be very much appreciated.

"Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement."

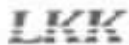
Best Regards,

Poh Kin, Chong (Mr) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2132 | email: pohkin@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



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Re:< S8M00RRT > IA with mandate uploaded

Type

🔗 Question

Message

PLS PROCEED FOR DS LOR & LOI AT MAX 4 DAYS

Reply

<< < S8M00RRT > IA with mandate uploaded

Type

 Question

Message

Liability: Insured Driver collided to third party vehicle while changing lane. Liability is down against our insured. We did clarify with insured the nature of the accident and agreed to settle and aware NCD (if any) is affected. Immediate Advice (with mandate) have been uploaded in SMART CLAIM. Propose settlement amount is around \$2,323.99. All the relevant documents had been uploaded in SMART CLAIM. For your kind attention and instruction. Thank you- Pohkin 06/09/2018

[Reply](#)



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 480933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 06/09/2018

Survey Details:

Date of loss	11-Aug-18
Date of appointment	13-Aug-18
Date of survey	13-Aug-18
Location of survey	COMFORTDELGRO ENGINEERING PTE LTD

Vehicle Details:

Claim Type:	Third party
Vehicle number	SHC 8729T
Make and Model	HYUNDAI I-40
Date of registration	5/2/2015
Excess	
Market Value	\$0
Part Rebate	\$0
Nett Loss	\$0

Repair details:

Initial Estimate	\$ 2,849.48
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 690.76
Check Items (estimate)	\$ -
Labour	\$ 1,080.00
Total	\$ 1,416.61
Lump Sum(if applicable)	\$ 1,450.00

Number of days for repair	2
---------------------------	---



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 480933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

We have not authorized repairs.

Mandate:

Liability(TP)		100%	
Proposed repair cost (w/gst)	\$	1,551.50	(\$1450.00 + 7% GST)
Loss of use	\$	-	
Loss of rental (estimate)	\$	540.00	(\$120.00 x 4.5 days)
Loss of income (estimate)	\$	225.00	(\$50.00 x 4.5 days)
LTA search fees	\$	7.49	
Others	\$	-	
Proposed Total	\$	2,323.99	

Our Ref : T 0818/ SHC8729T /WT(st)

Your Ref :

Date : 21-Aug-18

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

Attn : Motor Claims Department

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

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mobile: +65 6383 6280
Facsimile: +65 6280 9755

www.cdge.com.sg

Company Registration No: 19970100000

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 758158

Sungei Kadut
7 Sungei Kadut Way
Singapore 725791

Yishun
Yishun Industrial Park A
Singapore 756732

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC8729T YOUR INSURED SLF8448R
AND OTHER ON 11.08.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SHC8729T** 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 : **SLF8448R** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,551.50
2	5 days Loss of Rental @ \$ 115.00 per day	\$ 575.00
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 :		\$ 2,133.99

HIRER'S CLAIM

7	5 days Loss of Income @ \$ 80.00 per days	\$ 400.00
Total Claims:		\$ 2,533.99

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

- Original repair bill and photocopies of photographs 9 pcs
- LTA search slip/s of : SLF8448R
- GIA / Police report/s of : SHC8729T
- Letter of authority from owner / hirer / operator
 - (X) 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.

Poh Kin (LKKAUTO)

From: Poh Kin (LKKAUTO)
Sent: Wednesday, 5 September 2018 3:08 PM
To: 'sentosa_lcb@hotmail.com'
Cc: Hsiao Tong (LKKAUTO); Admin A
Subject: ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ALONG JURONG WEST CENTRAL ON 11.08.2018

Our Ref: CC4/ASM18014763/K1fb3
Your Veh: SLF 8448R

SENTOSA BUILDING CONSTRUCTION PTE LTD

37 Lorong 23 Geylang,
#03-02 Yu Li Industrial Building,
Singapore 388371.

Dear Sir/Madam,

ROAD TRAFFIC ACCIDENT INVOLVING SLF 8448R AND SHC 8729T ALONG JURONG WEST CENTRAL ON 11.08.2018

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 SHC 8729T against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided into the Third Party vehicle SHC 8729T. As such, liability is down against us.

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 full co-operation in the handling of the claim is required and kindly submit the following to pohkin@lkkauto.com within 7 days from the date of this letter **if not provided at AXA's 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
- Authorization letter for driving company vehicle

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 6841 2132 or email us at pohkin@lkkauto.com.

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

Best Regards,

Poh Kin, Chong (Mr) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2132 | email: pohkin@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LKK

Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGI 40 SHC8729T , SLF8448R
JUR WEST CENTRAL 1 TWDS JLN BOON LAY

ON 11-Aug-18 08:15

I / We

MUSA B JANTAN

(Hirer) NRIC No.:

S0090184I

and/or

(Relief) NRIC No.:

Taxi Number

SHC8729T

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

11-Aug-2018

Name of Hirer

MUSA B JANTAN

Hirer NRIC

S0090184I

Signature :



Address

136 TECK WHYE LANE #02-297
680136

Contact No.

96857420



redefining / insurance

CLAIM REF : S8M00RRT
INSURED : SENTOSA BUILDING CONSTRUCTION PTE LTD

DISCHARGE VOUCHER

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated 11.08.2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of Comfort Transportation Pte Ltd and the Hirer, Musa Bin Jantan of vehicle no. SHC 8729T.

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 **Two Thousand Two Hundred Twenty** only (**S\$2,220.00**) 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 (SLF 8448R) arising out of an accident with (SHC 8729T) on 11.08.2018.
- 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. SLF 8448R 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. SLF 8448R.

Dated this 1st day of November 2018

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp _____
COMFORTDELGRO ENGINEERING PTE LTD
88 LORONG BRIDE
SINGAPORE 13988

Witness : _____

Name : _____

I/C No : _____

Address : _____
COMFORTDELGRO ENGINEERING PTE LTD
88 LORONG BRIDE
SINGAPORE 13988

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"

TAX INVOICE

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO
SHC87291

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
05.02.2015

CHASSIS CODE
KMH18411MFU064560

NO/DATE
91390248 16.08.2018

JOB NO.
305199011

ODOMETER READING

JOB TYPE

Description : 3P 11.08.18

Invoice for lump Sum Repair

Total lump Sum Repair Amt	1,450.00
Add GST @ 7.000 %	101.50
Total Invoice amount	1,551.50

Issued by : KATHKRINETAN 16.08.2018 17:25:07
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

1. WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN BY UNTRAINED OWNERS' RISK.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 3 DAYS PRIOR TO DELIVERY AND NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. THEREAFTER THE VEHICLE 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 OF PAYMENT (i.e. AFTER 30 DAYS FROM THE DELIVERY DATE) PERIOD OF DEFAULT.

4. PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR INCOMPLETIONS 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.

Our Ref: CT18080306

Date: 16 August 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	11/08/2018 @ 08:15 hrs
ALONG	JURONG WEST CENTRAL 1 TWDS JLN BOON LAY
INVOLVING	SLF8448R

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 **SHC8729T** (the "Taxi"). The Taxi was hired to **MUSA B JANTAN IC NO S0090184I** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** 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.

5
H/L
Vel.
Sale

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO
57	0700	2000
180	0700	2000
24	0700	2030
16	0700	2200
16	2205	1755
245	1735	2000
245	0700	1800
236	1300	0600
248	0700	1800
300	1800	0600

DATE	NAME OF DRIVER	MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
					FROM	TO
8/8/18	WUSA	649	767	180	0700	1800
9/8/18	Suliman	650	042	274	1800	0600
10/8/18	Suliman	650	252	220	0700	1800
11/8/18	Suliman	650	555	293	1800	0600
12/8/18	Suliman	650	862	307	0700	1800
13/8/18	Suliman	651	142	280	1800	0600
14/8/18	Suliman	65			0700	1815
15/8/18	Accident	(Accident S.W. Centre)			0815	—
16/8/18	Repair	1N			—	1815



Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLF8448R	11 Aug 2018 / 08:15:00	Successful	A12	AXA INSURANCE PTE LTD

Previous OK

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SLF 8448R (Insd veh)	Model:	HYUNDAI I40
	SHC 8729T (TP veh)		
Date of Accident:	11/08/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	3,113.14
Final Repair Cost	:	\$	1,551.50
Loss of Token Sum	:	\$	200.00
Rental (if any)	:	\$	460.00
LTA / GIA Search Fee	:	\$	7.49

Others:	:	\$	0.00
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	:	\$	
Final Settlement Sum (Global Sum)	:	\$	2,220.00

Is Third Party Workshop GIA Registered? ☒ 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: _____

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	:	\$ 2,220.00

JOANNE LEE KHANG MIN
LKK Auto Consultants Pte Ltd

15/11/2018
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/ASM18014763/K1fb3q2		
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:KIAN CHUAN		Date : 15-11-2018		
		Code : ASM		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLF 8448R	Veh. Inspected	SHC 8729T	
Policy No.	GA260290	Coverage (\$)	0.00	
Claim No.	S8M00RRT	Excess (\$)	0.00	
Assign From		Assign Date	13/08/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI I40	c.c	168540	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	KMHLB41UMFU064560	Colour	BLUE	
Odometer	651164	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/60 R16	CAMPEON	7 mm	
L/H Front Tyre	205/60 R16	CAMPEON	7 mm	
R/H Rear Tyre	205/60 R16	CAMPEON	7 mm	
L/H Rear Tyre	205/60 R16	CAMPEON	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	11/08/2018	Inspection Date	13/08/2018	
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. SHC 8729T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT FENDER (RH) (CONSISTENT)	DENTED	619.00	619.00
1	FRONT FENDER SHIELD (RH) (CONSISTENT)	SERVICEABLE	169.80	-
1	ROCKER PANEL OUTER GARNISH (CONSISTENT)	TO REPAIR SEE LABOUR	483.60	-
1	FRONT WHEEL HUB CAP (RH) (CONSISTENT)	GRAZED	150.70	150.70
1	FRONT DOOR (RH) (NPA)(CONSISTENT)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-284.62	-153.94
			1,138.48	615.76
<u>SPECIAL NETT ITEMS</u>				
1	FRONT DOOR COMFORT LOGO (RH) (SN) (CONSISTENT)	NECESSARY	75.00	75.00
1	FRONT TYRE (RH) (SN) (CONSISTENT)	SERVICEABLE	216.00	-
			291.00	75.00
<u>LABOUR</u>				
	PANEL BEATING .INCLUSIVE OF THE REPAIR OF ROCKER PANEL OUTER GARNISH AND FRONT DOOR (RH) .		500.00	400.00
	SPRAY PAINTING CHARGE.		750.00	600.00
	TUFF KOTE.		50.00	20.00
	FRT WHEEL ALIGNMENT .		120.00	60.00
	TOWING .		60.00	60.00
			1,480.00	1,140.00
GRAND TOTAL			2,909.48	1,830.76
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,450.00

Report Ref No. CC4/ASM18014763/K1fb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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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.