

INS. CASE OWNER:

CC 4, PWD 180 15850, Please

LICK IDAC

Surveyor:

Amc

DOI:

ASSIGNMENT

29/8/2018

Date / Time:

29/8/18

Registered in Merimen:

30/8/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLA 227 G

Name of Insured:

MARINA KHAN 28W

Insured Tel No.:

HP: 97389329

Excess Sec II :SS

D.O.A: 2/1/2018

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident:

Claim No.:

PMPV 2018-0004627

Policy No.:

Make / Model:

PEUGEOT

Place of Accident:

KPE

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

HO 9K -> SLA 7098R

SDE 9742J

SLA 227 G

SHA 4406 L



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

cont by as. TP

Date/Time	STAGE	DATE / PIC
4/9/18	Non-Reporting Itr (1st)	
	Non-Reporting Itr (2nd)	
	Non-Reporting Itr (Final)	
	Notification Itr (if non-pickup)	
	Call OI	
	After call Itr to OI	
	Documentation Check List: Handler Typist	
21.9.18	Notification Itr (if non-pickup)	
	After call Itr to OI	
	Authorization To Act	<input checked="" type="checkbox"/>
	Release Voucher	<input checked="" type="checkbox"/>
	Final Repair Bill	<input checked="" type="checkbox"/>
	Car Rental Invoice	<input checked="" type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA	<input checked="" type="checkbox"/>
	Medical Bill	<input type="checkbox"/>
	PIR	<input type="checkbox"/>
	Mandate/Reject Instruction	<input checked="" type="checkbox"/>
	LOD	<input checked="" type="checkbox"/>
	Payment Breakdown Form	<input type="checkbox"/>
	Post-Repair Photos	<input type="checkbox"/>
	Others	<input type="checkbox"/>

PRELIMINARY ADVICE	Date/Time: 8/9/18	Sent By: Amc
FINALIZATION	Date/Time:	Confirm with: Amc
Repair Cost: P/P \$561.08	(3 days) Reduction: %	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: 11/11/18	Confirm with: Amc
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 28		Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Repair Cost: \$1651	\$565.96	3 Veh CC 01 2nd
Loss of Rental (LOR):	\$5438.17 (3.5 days) = +105.19	
Loss of Use (LOU):	\$5 - (\$ x days)	
Loss of Income (LOI):	\$5175.00 (\$50 x 3.5 days)	
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input checked="" type="checkbox"/>		[Tick only one]
GIA/LTA Search	\$57.49	
Medical	\$5 -	
Disbursement:	\$5 - (e.g. Tow/ Independent)	
Legal Cost	\$5 -	
Total:	\$51500.63	Global Sum \$5:
FINAL PAYMENT	Date/Time: 11/11/18	Confirm with: Amc
Payee 1:	\$51300.63	Name 1: COMPACTOR/US/2018 ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	\$5	Name 2:
Payee 3: (Strike if N.A.)	\$5	Name 3:

Surrey: Kalvin

REF: _____

ASSIGNMENT

From: _____ Date: _____
 Estimate/Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop no: _____
 of _____
 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 Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repair: 2 days Res: Yes or No
 Lum Sum: - % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHA 4406 L Yr Regn: 17 Mar 2017
 Type: M.Car / M.Cycle / Bus / Van / Lorry / T. / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai cc 1580
 Colour: Blue A/C: Ins / Std / NI / NA
 Sp. Reading: 156200 T/Radio: Ins / Std / NI / NA
 Eng/No: _____
 C/No: KMH C85 / CVH 402788
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD / Rim or _____
 Tyre Size: F: 195 / 65 R 15
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Nexen.
 Front: _____ Rear: _____
 R/Bal. 2 mm R/Bal. 2 mm
 L/Bal. 2 mm L/Bal. 2 mm
 D.O.A. 27/8/18 D.O.I. 29/8/18
 Survey held at: (DHE (Loyang))
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or Rear
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	PIP: 641.0B (P&O)

Date/Time, File Pass to: _____ : : Prell. Report
 1) _____ : : Final Report
 Date/Time, File Return to: _____
 2) _____
 Report Format: _____
 Lump Sum / I.B.I.: (\$ _____)

Days Of Repair: _____
 Resurvey No. of Trip: _____

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

Survey Fee: _____
 Transportation: _____ \$ + RS _____ \$
 Photos: _____
 Others: _____
 TOTAL: _____

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 4406L

DATE 29/8/2018 10:33

MAKE :

MODEL : HYUNDAI IONIQ

FWO
REAR

FZ

Fauzy

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>x Repair</i>			
	Rear Bumper Garnish (Black) <i>Return</i>			\$ 270.00
	Rear Bumper Sponge <i>x 1.5m</i>			
	SUB TOTAL			\$ -
	LESS 20%			\$ -
	DISCOUNTED TOTAL			\$ -
	Rear Bumper Reverse Sensor <i>x 5m</i>			\$ 135.70
	Rear No. Plate <i>1 ea</i>			\$ 25.00
	Rear Bumper Rubber Mat <i>x 1m</i>			\$ 50.00
				\$ 210.70
	Labour Charge			
	Panel Beating			\$ 400.00 ²⁰⁰
	Spray Painting Charge			\$ 250.00 ²⁰⁰
	Wiring Charge			\$ 50.00 ^{x 1.1}
	Remove/Refix Reverse Sensor			\$ 120.00 ^{x 1.1}
	TOTAL LABOUR			\$ 820.00
	ESTIMATE TOTAL			

Kahr 10/10/18
29/8/18 1515 L
2 Pys
PIP
After Repair photo

LKS Auto Consultants hence notify the Repairer of the following:

- To resolve before/after spray painting
- To display damaged parts during survey
- Parts price agreement
- The Survey scope & time
- To illegal modification
- Supplemental work
- Subject to the above terms & conditions

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.

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: 27-8-2018 Time Received: 19:33

2. New SPARK Kakis
 Name of Customer : MR CHUA
 Contact No. : 96894699
 Vehicle No. : SHA 4406L
 Make / Model / Colour : _____
 Email : _____

3. Vehicle Type:
 Private
 Taxi (CTPL/CCPL)
 Fleet
 STK (Boon Lay)

4. Type of Towing:
 Normal Tow
 King Dolly
 Fiat Bed
 Crane-up

5. Nature of Service:
 Jumpstart
 Recovery
 Change Tyre / Battery

6. Parts Replaced/Remarks:

7. Location: FORT RD HEAVY VEH CARPARK

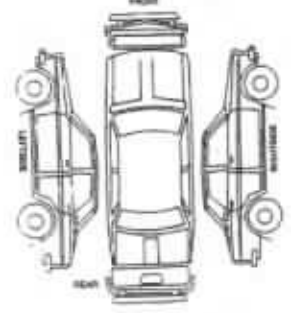
8. Vehicle Tow - In Workshop:
 Smoky Exhaust Wheel Jammed
 Overheating Steering Faulty
 Brake Faulty Alternator Faulty
 Starting Problem Loss Power
 Accident Engine Stalled
 Return Taxi

9. Preferred Workshop:
 Braddell Loyang Pandan
 Sin Ming Sungei Kadut Ubi
 Senoko Komoco (UBI / Leng Kee) Cycle & Carriage (PD)
 Others: _____

10. Odometer Reading : _____

Fuel Level : F 1/4 1/2 3/4 E

11. Radio / CD Player
 OK
 Faulty
 Not tested



: Cracked X : Dentec
 / : Scatched O : Missin

Job Attended

12. Tow Truck / Recovery Van : VRS QA GAO TZ YISHUN OTHERS TOWING

Name of Driver : zhai shu Jian
 Vehicle No. : YP 7494G
 Time Dispatch : 19:33
 Time of Arrival : 20:00
 Time Completed : 21:00

Signature of Customer: _____

Cash Invoice Details (if applicable)

13. Cash Invoice No. : _____

Customer Acknowledgement

a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupon cash cards, spectacles, pen, etc.
 b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
 c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

27-8-2018 20:00 _____
 Date Time Signature of Customer

14. WORKSHOP

 Name of Attending Staff/Guard Date & Time of Arrival Signature of Attending Staff/Guard

CUSTOMER'S

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

To: FWD Singapore Pte. Ltd.
6 Temasek Boulevard
#18-01 Suntec Tower 4
Singapore 038986

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Josey Loh

Date: 04 Sep 2018

Preliminary Advice

Insured Vehicle No	: SLA2217G	Accident Date	: 27/08/2018
TP Vehicle No	: SHA4406L	Assignment Date	: 30/08/2018
Make	: HYUNDAI AE IONIQ HEV DCT	Est. Duration of Repair	: 2 days
Date of Inspection	: 29/08/2018		
Inspection At	: ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969		

Point of Impact / General Description of Damages

The vehicle sustained impact / damagesrear... portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	1,246.78
Revised Amount	:S\$	641.08
Check Items (Estimated)	:S\$	0.00
Total	:S\$	641.08

Lump Sum Repair :S\$

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

- () The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- (X) Other comments : We have not authorized repairs.

Team: ARC Repair TP(CLSO)1 **JOB CARD** Sales Order: 3851830 JC NO.: 305205499

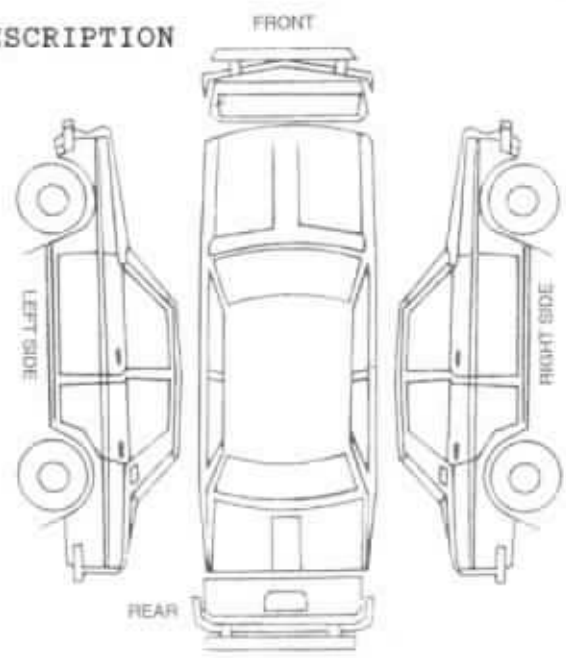
TOMER MS TOMER NO. RESS (R) (P)	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755	REGN NO.: SHA4406L	MILEAGE FUEL E.....1/2.....F
		MAKE: HYUNDAI	DATE/TIME IN 27.08.2018 19:35
		MODEL IONIQ	TARGET DATE
		YR OF MANU 17.03.2017	COMPLETION DATE/TIME:
		CHASSIS CODE KMHC851CVHU022788	
	COUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 27.08.2018
 NATURE: 3P 27.08.18/B-

S/NO LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY: _____

 SERVICE ADVISOR

 CUSTOMER'S SIGNATURE

Wedge ment Slip
 Vehicle No.: **SHA4406L** FZ FWD
 Signature/Date

Exit Pass
 Vehicle No.: **SHA4406L**
 Name of Service Advisor Date

returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 4406L

FWO

DATE 29/8/2018 10:33

F2
Fauzy

MAKE :

MODEL : HYUNDAI IONIQ

REAR

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper <i>x repair</i>				
	Rear Bumper Garnish (Black) <i>—</i>				
	Rear Bumper Sponge <i>?</i>				
	SUB TOTAL			\$ -	
	LESS 20%			\$ -	
	DISCOUNTED TOTAL			\$ -	
	Rear Bumper Reverse Sensor <i>x</i>			\$ 135.70	Nett
	Rear No. Plate <i>—</i>			\$ 25.00	Nett
	Rear Bumper Rubber Mat <i>x</i>			\$ 50.00	Nett
				\$ 210.70	
	Labour Charge				
	Panel Beating			\$ 400.00	
	Spray Painting Charge			\$ 250.00	<i>200</i>
	Wiring Charge			\$ 50.00	<i>x</i>
	Remove/Refix Reverse Sensor			\$ 120.00	<i>x</i>
	TOTAL LABOUR			\$ 820.00	
	ESTIMATE TOTAL				
<p><i>Kehir 100%</i></p> <p><i>29/8/18 1515L</i></p> <p><i>2 Dya</i></p> <p><i>PIP</i></p> <p><i>After Repair photo</i></p>					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> To resolve before spray painting To display damaged parts being replaced Parts prices are subject to market fluctuation Third party survey is not a condition for repair No replacement of parts without approval Supplies and materials must be approved and is subject to final approval from insurance Company <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> </div>					
<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.</p>					

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305205499
 Date : 03.09.2018

ComfortDelGro Engineering Pte Ltd
 59 Loyang Drive Singapore 508989
 Fax: 6546 8156

FINALIZATION FORM

To : LKK
 Attn : KALVIN

Fax :

Vehicle Reg No. : SHA4406L Date of Accident : 27.08.2018

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

1. The repair job shall bill to: FWD --- SLA2217G
2. The finalized amount shall be:


(a) Spare Parts after List discount	<u>\$241.08</u>
(b) Labour Charges	<u>\$400.00</u>
Total for Part-By-Part Repair Cost	<u>\$641.08</u>
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	<u>\$0.00</u>
Final Lumpsum Repair cost	<u>\$0.00</u>


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 : 4/9/8

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:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305205499
 REGN NO : SHA4406L
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ
 DATE OF REGN : 17.03.2017
 DATE/TIME IN : 27.08.2018 19:35
 ACCIDENT DATE : 27.08.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-2360-G IONIQV1 MOULDING ASSY-RR 1 270.10 20.00 216.08

0002 FNPS NO PLATE(S) 1 N 25.00 2.00- 25.00

SUB-TOTAL : 241.08

JOB NATURE

0000 L PANEL BEATING 200.00

0001 L SPRAY PAINTING CHARGE 200.00

SUB-TOTAL : 400.00

TOTAL : 641.08

MVA NAME & SIGNATURE
 DATE :

AUTHORISED : YES / NO
 SURVEYOR NAME & SIGNATURE
 DATE :

Claim Audit

AUDIT TRAIL				
No.	On	Action	Remarks	By
1	30 Aug 2018 16:18	Cim Veh Model Changed	(205282) HYUNDAI AE JONIQ HEV DCT 1.6 (A).	[A] HOW MEI KWAN
2	30 Aug 2018 16:18	Cim Created	Reg No: SHA4406L. Acct Date: 2018/08/27, Claim Type: TP, Insurer: FWD Singapore Pte. Ltd. (HQ). TP Insurer: MS First Capital Insurance Ltd (HQ). Workshop: ComfortDelGro Engineering Pte Ltd (Loyang)	[A] HOW MEI KWAN
3	30 Aug 2018 16:18	Cim Existing Check Notice		[A] HOW MEI KWAN
4	30 Aug 2018 16:18	Adj Co Assigned	LKK Auto Consultants Pte Ltd (HQ); RR Region: FWD - Ext Auto Adj Assignment. Suggested Adj. : VICOM Ltd.	[A] HOW MEI KWAN
5	30 Aug 2018 16:18	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2018/09/10	[A] HOW MEI KWAN
6	30 Aug 2018 16:18	Adj Mandate Set	Approved:0.00.Reinspr:Adj decides.	[A] HOW MEI KWAN
7	30 Aug 2018 16:18	Label Added	(20004):SJE,(20005):Direct Settlement .	[A] HOW MEI KWAN
8	30 Aug 2018 16:18	Adj Adjuster Assigned	[None] -> KALVIN ANG WEI KUN	[A] HOW MEI KWAN
9	31 Aug 2018 11:03	Cim Registration Modified	Pol No:->PNPV2018-00004627.	[I] Josey Loh
10	04 Sep 2018 08:52	Adj Im. Advice Submitted	Next Rpt:Final Rpt.Due Date:2018/09/10	[A] HOW MEI KWAN
11	30 Oct 2018 15:30	Adj Rpt Initiated		[A] JOANNE LEE KHANG MIN
12	30 Oct 2018 15:30	Cim Dtl Modified	JPJ Reg. Date: -> 2017/03/17.	[A] JOANNE LEE KHANG MIN
13	30 Oct 2018 15:30	Cim Details Notified		[A] JOANNE LEE KHANG MIN
14	09 Nov 2018 11:02	Adj Mandate Request	Cur.Req:1306.62:LIABILITY: 100% B:28 SVEH CC OI 2ND QUANTUM: (a) COR w/GST: \$685.96 + (b) LOR : \$438.17 (3.5days x \$125.19) + LOI : \$175.00 (3.5days x \$50) + (d) LTA: \$7.49 Total: a+b+c+d = \$1,306.62 PLEASE REVERT WITH YOUR APPROVAL / MANDATE / INS	[A] Asher Sng Rong Yi

Date From Date To Audit Type None

ACTIVITY

No record

Merimen Billing for this case - Transaction History

Bill Ref No	Bill Date	Bill Type	Bill Agency	Bill Party (Insured)	Bill No	Bill Amt	Amount
1906537	04/09/2018 08:52	Motor	LKK Auto Consultants Pte Ltd	LKK Auto Consultants Pte Ltd (HQ)	SHA4406L	SLA2217G	10.70

Print Received Message

This mail is associated with :

***SHA4406L (1201800010845)**
[SLA2217G]
TP
COMFORT TRANSPORTATION PTE LTD
Aug 27 2018 5:00PM
[KHIN ZAW]
ComfortDelGro Engineering Pte Ltd

From FWD Singapore Pte. Ltd. (HQ) (FWD_SG), sent on 09/11/2018 17:31 PM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$1306.62) - SHA4406L - Claim Handler: Clara Li Zi Rong

Approved:1306.62.

Our Ref : T 0818/ SHA4406L /JW (st)

Date : 17-Sep-18

FWD Singapore Pte Ltd
6 Temasek Boulevard
#18-01 Suntec Tower 4
Singapore 038986



CDGE Tax Claims Dept
59 Loyang Drive 4th Fl
Singapore 508999

1201800010845

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

www.cdge.com.sg

Company Registration No. 109669498R

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA4406L YOUR INSURE SLA2217G
AND OTHER 2 VEHICLES ON 27.08.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No: SHA4406L 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 : SLA2217G we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 685.96
2	<u>3.5</u> days Loss of Rental @ \$ <u>125.19</u> per day	\$ 438.17
3	Survey Report Fees (Surveyed by LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 1,131.62

HIRER'S CLAIM

7	<u>3.5</u> days Loss of Income @ \$ <u>80.00</u> per days	\$ 280.00
Total Claims:		\$ 1,411.62

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

- a) Original repair bill and photocopies of photographs :- 4 pcs.
- b) LTA search slip/s of : SLA2217G
- c) GIA / Police report/s of : SHA4406L
- d) Letter of authority from owner / hirer / operator
 - () Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
 - (X) Photocopies of Accident Scene Ph (x) Downtime/Mileage record (x) Rental Rate letter

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

Jim Wong

Deputy Manager

CDGE Claims Department

Tel : 6214 8374 Fax : 6214 1843 Email: jimwong@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO



LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING | **40 SHA4406L , SLA2217G , SDE9742J , ... ON 27-Aug-18 17:30**
ALONG | **MCE TUNNEL EXIT FORT RD**I / We **CHUA KONG HWEE** (Hirer) NRIC No.: **S7304853B**

and/or (Relief) NRIC No.:

Taxi Number **SHA4406L**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "**ComfortDelGro Engineering Pte Ltd**".

Date **28-Aug-2018**Name of Hirer **CHUA KONG HWEE**
Hirer NRIC **S7304853B**

Signature :

Address **6 JALAN MINYAK #07-370**
162006Contact No. **96894699**

RELEASE

Claim Reference:	1201800010845
Surveyor's Reference:	CC4/FWD18015850/K1ea3
TP Reference:	T0818/SHA4406L/JW(st)

We, **COMFORTDELGRO ENGINEERING PTE LTD** ("Workshop") hereby agree and confirm that we are authorized by the owner ("Claimant") of motor vehicle **SHA 4406L** ("Vehicle") to accept the sum of **\$1,306.62**, being the amount claimed for **\$685.96** (repair costs), **\$438.17** (loss of rental/ use), **\$175.00** (loss of income), **\$7.49** (search fees) as compensation for the loss of or damage to the Vehicle, as a result of an accident ("Accident") which occurred on **27/08/2018** (date of accident) at / along **MCE TUNNEL EXIT FORT RD** (location) involving vehicle no/s. **SHA 4406L** and **SLA 2217G**.

This is pursuant to the inspection conducted on **29/08/2018** (date) at the Workshop.

We confirm that this acceptance is in full and final settlement of all claims arising from the damage to the Vehicle (whether now or hereafter to become manifest), to the intent that FWD Singapore Pte. Ltd. and all other persons, in particular the driver of **SLA 2217G** be absolutely and finally exonerated and discharged from all claims of every nature and kind whatsoever which have been made or which may be made in respect of this Accident.

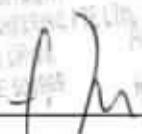
We also declare that we are authorized by the Claimant to receive the above compensation and we have full authority to make the claim as set out above and to settle the matter on behalf of the Claimant in any manner we deem fit.

This settlement is reached on a without prejudice and without admission of liability basis. As such, this Release is not to be construed as an admission of liability on the part of FWD Singapore Pte Ltd, their policyholder and / or authorised driver and shall not be used as evidence in any claims and / or action which may be lodged by any of them.

Dated this 10th day of Dec 2018

CLAIMANT

BLANC DEPARTMENT
ENGINEERING ENGINEERING PTE LTD
110, BUKIT TIMAH LANE
SINGAPORE 102563



[Signed by the "Workshop" with Co. Stamp]
For and on behalf of the "Claimant"

*"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"*



AWK

[FWD's appointed surveyor with Co. Stamp]
For and on behalf of FWD Singapore Pte. Ltd.

Please forward your cheque made payable to
COMFORTDELGRO ENGINEERING PTE LTD

TAX INVOICE

8010655

FWD SINGAPORE PTE LTD
SUNTEC TOWER 4

#18-01 6 TEMASEK BOULEVARD
SINGAPORE SG 038986

CONTACT NO: 67275700

VEHICLE NO
SHA44061

MARK
HYUNDAI

MODEL
(ONTQ)

DATE OF REG
17.03.2017

CHASSIS CODE
KMHC851CVHU022788

INV. NO/DATE
91393799 04.09.2018

JOB NO.
305205499

ODOMETER READING

DATE/TIME IN
27.08.2018 19:35

Description : 3P 27.08.18

S/No Part No.

Qty Unit Price Disc Net

PART REQUISITION

S/No	Part No.	Description	Qty	Unit Price	Disc	Net
0001	04-01-0104-2360	IONIQV1 MOUNTING ASSY-HR	1	270.10	20.00	216.08
0002	PNPS	NO PLATE(S)	1	25.00	0.00	25.00
SUB-TOTAL:						241.08

JOB NATURE

S/No	Part No.	Description	Qty	Unit Price	Disc	Net
0001	1.	PANEL BRACING		200.00		200.00
0002	1.	SPRAY PAINTING CHARGE		200.00		200.00
SUB-TOTAL:						400.00

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 N
8010655	91393799	685.96	

TAX INVOICE

8010655

FWD SINGAPORE PTE LTD
SUNTEC TOWER 4

#18-01 6 TEMASIK BOULEVARD
SINGAPORE SG 038986

CONTACT NO: 67275700

VEHICLE NO
SHA44061.

MAKE
HYUNDAI

MODEL
IONIQ

DATE OF REG
17.03.2017

CHASSIS CODE
KMHC851CVHU022788

INV. NO/DATE
91393799 04.09.2018

JOB NO.
305205499

ODOMETER READING

DATE/TIME IN
27.08.2018 19:35

Items total		641.08
Add GST @	7.000 %	44.88
Invoice amount		685.96

Issued by : KATHERINETAN 04.09.2018 15:37:26
Repair type : (J30)/57/57
Payment type/Term: /Credit: 30 days

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/CHO N
8010655	91393799	685.96	



Our Ref: CT18080832

Comfort Transportation Pte Ltd
CityCab Pte Ltd
383 Sin Ming Drive Singapore 575717

Date: 05/09/2018

Mainline +65 6555 1188
Facsimile +65 6453 3183

www.cdgtaxi.com.sg

TO WHOM IT MAY CONCERN

Company Registration No. 199303821R
Company Registration No. 199502839G

Dear Sir/Madam

ACCIDENT ON 27/8/18@17:30hrs
ALONG MCE TUNNEL EXIT FORT RD
INVOLVING SLA2217G, SDE9742J, SLQ7098R,

1. 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 **SHA4406L**he ("Taxi"). The Taxi was hired to **CHUA KONG HWEE, I/C NOS7304853B** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate \$125.19 per day (inclusive of GST).
2. 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.
3. 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.
4. Please liaise with the said hirer-operator or his authorised workshop directly for any dispute or 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

Members of

COMFORTDELGRO



Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLA2217G	27 Aug 2018 / 17:30:00	Successful	F04	FWD SINGAPORE PTE. LTD.

Previous

OK

SHR 4406 L

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

Direct Settlement

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	31 Aug 2018 Edit Reg		29 Aug 2018 00:00 Edit Adj Rpt	S\$641.08 Edit Estimates	S\$641.08 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	HAUNG KHIN ZAW , ID: S2738231B								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHA4406L	Date of Loss:	27/08/2018 17:00 - :59 [17 Months and 10 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 1201800010845	Policy/Cover Note No.:	PNPV2018-00004627 (Comprehensive)						
Vehicle Reg. No. (Insured):	SLA2217G	Policy No. (Claimant):	D-18088936MFSH						
		Excess:							
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	FWD Singapore Pte. Ltd. (HQ) - Tel: 6727 5700 ... [Handled by Clara Li Zi Rong]								
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 10/09/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
• FWD_SG (09/11/2018): Alert - Adj Mandate Approved (S\$1306.62) - SHA4406L - Claim Handler: Clara Li Zi...									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SHA4406L (1201800010845)
[SLA2217G]
TP
COMFORT TRANSPORTATION PTE LTD
Aug 27 2018 5:00PM
[MAUNG KHIN ZAW]
ComfortDelGro Engineering Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View	View in Browser	
Letters/Correspondences										1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail			Print			
1	(Draft)	Third Party Express Settlement - Payment Breakdown				Edit					
Assessment Reports										1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail			Print			
1	04/09/18 08:52	Adjuster Immediate Advice				Load HTM					
Photos/Images										3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail			Print			
1	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
2	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
3	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
4	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
5	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
6	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
7	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
8	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
9	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
10	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
11	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
12	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
13	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
14	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
15	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
16	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
17	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
18	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
19	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
20	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
21	09/11/18 11:01	General View				Load JPG		<input checked="" type="checkbox"/>			
22	09/11/18 11:01	Chassis Number				Load JPG		<input checked="" type="checkbox"/>			
23	09/11/18 11:01	Odometer Reading				Load JPG		<input checked="" type="checkbox"/>			
24	09/11/18 11:01	Reinspection Photo				Load JPG		<input checked="" type="checkbox"/>			
25	09/11/18 11:01	Reinspection Photo				Load JPG		<input checked="" type="checkbox"/>			
26	09/11/18 11:01	Reinspection Photo				Load JPG		<input checked="" type="checkbox"/>			
27	09/11/18 11:01	Reinspection Photo				Load JPG		<input checked="" type="checkbox"/>			
Documentation										1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail			Print			
1	30/08/18 16:19	NOTIFICATION FROM WORKSHOP + TP ESTIMATE + TP GIA REPORT				Load PDF					

Letters/Correspondences			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail Print
2	30/08/18 16:19	ACKNOWLEDGEMENT EMAIL TO FWD DD 29.08		Load PDF
3	04/09/18 10:30	TP ESTIMATE + TOWING		Load PDF
4	05/09/18 13:31	EMAIL - FWD TO OI DD 31.08.2018		Load PDF
5	30/10/18 15:35	WORKSHOP INVOICE		Load PDF
6	30/10/18 15:35	RENTAL RECEIPT		Load PDF
7	30/10/18 15:35	RENTAL MILEAGE		Load PDF
8	30/10/18 15:35	LTA SEARCH		Load PDF
9	30/10/18 15:35	LOD		Load PDF
10	18/12/18 14:07	Release Voucher		Load PDF
11	18/12/18 14:07	AUTHORISATION TO ACT FORM		Load PDF
No	Finalized On	FWD Singapore Pte. Ltd. (HQ)		Thumbnail Print
1	31/08/18 11:04	Insured GIA Report		Load PDF

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
Show Remarks To: <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:	SLA2217G (Insd veh)	Model:	HYUNDAI AE IONIQ HEV DCT 1.6 (A)
	SHA4406L (TP veh)		
Date of Accident:	27/08/2018		

Global Sum Settlement	:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Repair Estimate	:	\$	1,334.05	
Final Repair Cost	:	\$	685.96	
Loss of Income	:	\$	175.00	3.50 days at \$50.00 per day
Rental (if any)	:	\$	438.17	3.50 days
LTA / GIA Search Fee	:	\$	7.49	
Others:	:	\$	0.00	
	:	\$		
Final Settlement Sum	:	\$	1,306.62	

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 (*): _____ 0 _____ (%)
 * 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	:	\$ 1,306.62
2)		:	\$
3)		:	\$
4)		:	\$

JOANNE LEE KHANG MIN

LKK Auto Consultants Pte Ltd

18 Dec
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 (Co.Reg.No:199607198R)

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: CC4/FWD18015850/K1EA3Q2
Date: 18/12/2018

REFERENCE

Handling Insurer: FWD Singapore Pte. Ltd.	Policy No:	PNPV2018-00004627	
Claimant Vehicle No : SHA4406L	Insured Vehicle No :	SLA2217G	
Date of Loss: 27/08/2018	Nature of Claim: TP	Claim No: 1201800010845	

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHA4406L	Engine No:	G4LEGU329719
Make & Model:	HYUNDAI AE IONIQ HEV DCT, 1.6 (A)	Chassis No:	KMHC851CVHU022788
Reg. Date:	17/03/2017 (Man. Year: 2017)	Odometer:	156200 km
Colour:	Blue		
Engine Capacity:	1580 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:	195/65 R15	Rear Tyre Size:	195/65 R15
Front Left Side:	Nexen 7 mm	Rear Left Side:	Nexen 7 mm
Front Right Side:	Nexen 7 mm	Rear Right Side:	Nexen 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	426.78	241.08	185.70	43.51
Miscellaneous Items	0.00	0.00	0.00	
Labour	820.00	400.00	420.00	51.22
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	1,246.78	641.08	605.70	48.58
+ GST 7.00/7.00% (S\$)	87.27	44.88	42.39	48.57
Nett Amount (S\$)	1,334.05	685.96	648.09	48.58
+ Loss of Use (3.5 x S\$50.00/day) (S\$)		175.00		
+ Car Rental (3.5 x S\$125.19/day) (S\$)		438.17		
+ Doc/Search Fee (S\$)		7.49		
Nett Liability (S\$)		1,306.62		

INSPECTION

Date of Assignment:	29/08/2018	
Date Inspected:	29/08/2018 Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: Asher Sng Rong Yi

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

Reference		
Part Source:	(Last Synchronised: 30 Oct 2018)	
Parts:	N/A	HYUNDAI AE IONIQ HEV DCT 1.6 (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHA4406L)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER (NPA)	Repair	0.00 FL	*- FL
2	1		*REAR BUMPER GARNISH (BLACK)	Deformed	270.10 FL	*270.10 FL
3	1		*REAR BUMPER SPONGE (NPA)	Serviceable	0.00 FL	*- FL
4	1		*REAR BUMPER REVERSE SENSOR	Serviceable	135.70 FS	*- FS
5	1		*REAR NO.PLATE	Cracked	25.00 FS	*25.00 FS
6	1		*REAR BUMPER RUBBER MAT	Not Necessary	50.00 FS	*- FS

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

Sub Total (\$\$)	480.80	295.10
- List Item Discount on L Items 20.00/20.00% (\$\$)	54.02	54.02
Total Parts (\$\$)	426.78	241.08

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	400.00	200.00
2	SPRAY PAINTING CHARGE	New	250.00	200.00
3	WIRING CHARGE	New	50.00	0.00
4	REMOVE/REFIX REVERSE SENSOR	New	120.00	0.00
Gross Labour Cost (S\$)			820.00	400.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >