

JAN/2018

INS. CASE OWNER

CC3 / CTI1801

6126, F2 P639

LKK

IDAC

Surveyor:

Kalin

DOI:

ASSIGNMENT

7/9/18

Date / Time:

7/9/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLN 77856

Name of Insured:

OH MEE GIAM WAYNE

Insured Tel No.:

HP: 92246189

Excess Sec II :SS

D.O.A.:

1/1/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

SM180048600

Policy No.:

0MPCSW 20V8571800

Make / Model:

NISSAN

Place of Accident:

WLE EXIT TO PEPPER KO

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

SHA 7572L



INSRS:

WSP:

Tel:

Liability:

RMKS:

COME UP



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

6/8/18

UNT

12/9/18

1/1/18

6/1/18

A rear end col TP.

DV sent

Funct Shm for file

STAGE

DATE / PIC

Non-Reporting 1st (1st)

Non-Reporting 1st (2nd)

Non-Reporting 1st (Final)

Notification 1st (if non-pickup)

Call Of:

After call 1st to Of:

Documentation Check List: Handler Typist

Notification 1st (if non-pickup)

After call 1st to Of:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD:

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

( days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

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

If NO OF B 28, Ass. Lia:

Repair Cost:

S\$

1516.50

Loss of Rental (LOR):

S\$

345.00

( 3 days)

x 115.00

Loss of Use (LOU):

S\$

50.00

( 5 - x - days)

x 3 days

Loss of Income (LOI):

S\$

150.00

( 50. x 3 days)

LOR only

LOU only

LOR + LOU

LOR + LO

(Tick only one)

GIA/LTA Search

S\$

7.49

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost:

S\$

1) Claim status: Normal/Reject/Private Settle:

2) Report Format:

3) Survey fee:

Total:

S\$

1518.99

Global Sum S\$: 1500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

1500.00

Name 1:

Combitelgru Engineering Pte Ltd.

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

08/11/13

Surveyor: Kelvin

REF:

## ASSIGNMENT

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

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

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. Repairs: 2 days Res: Yes or NoLum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHA 7523 L Yr Regn: 14 May, 2015

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

Truck / Trailer or

Make: Hyundai 2400 c.c. 1685Colour: Blue A/C: Ins Ad / Std / Nil / NASp. Reading: 628684 T/Radio: Ins Ad / Std / Nil / NA

Eng/No: \_\_\_\_\_

C/No: KMHCBXUMF4069059Gen. Cond: Good / Ad / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / SB A/Rim orTyre Size: F: 205/60R16

R: \_\_\_\_\_

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

TOYO / YOKO or HankookFront: 7 mmR/Bal. 7 mmL/Bal. 7 mmD.O.A. 1/9/18 D.O.I. 3/9/18Survey held at CDHE (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
	<u>L15 \$ 950 (Rcd \$ 1289.06 / 58%)</u>
	<u>CTZ</u>
	<u>45</u>

Date/Time, File Pass to?

☐ : Prell. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

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

Report Format: \_\_\_\_\_

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



# 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				
CHINA-TAIPING INSURANCE (S) PTE LTD		Ref : CC3/CTI18016136/K1pb3		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 04-09-2018		
		Code : CTI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLN 7785G	Veh. Inspected	SHA 7523L	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	04/09/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	01/09/2018	Inspection Date	03/09/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305207575  
Date : 04/09/18

## FINALIZATION FORM

To : LKK  
Attn : KALVIN ANG

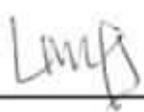
Fax :


Vehicle Reg No. : SHA7523L Date of Accident : 01-Sep-18

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

- The repair job shall bill to: CHINA TAIPING --- SLN7785G
- The finalized amount shall be:
  - Spare Parts after List discount
  - Labour Charges
  - Total for Part-By-Part Repair Cost
  - Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20% \$950.00  
Final Lumpsum Repair cost \$950.00
- Estimated normal period for repairs: 2 working days.
- We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days
- Thank you for your assistance.

We confirm the estimates and  
finalized amount

Signature :   
Name : LIM T S  
Tel : 62148398  
Fax : 65468156

Signature :   
Name : KALVIN  
Date : 4/9/18

## 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		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORT DELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE\*

China Taiping-45

TLS

VEHICLE NO : SHA 7523L

DATE 3/9/2018

MAKE :

LKK - Kalvin

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper			\$ 553.00	
	Rear Bumper Reinforcement			\$ 428.40	
	Rear Bumper Reinforcement Bracket (LH/RH)		\$ 80.30	\$ 160.60	
	Rear Bumper Clip 10 pcs			\$ 22.00	
	Rear Bumper Bracket		\$ 35.60	\$ 71.20	
	Rear Bumper Sponge			\$ 103.50	
	Rear Bumper Under Cover			\$ 228.00	
	<b>SUB TOTAL</b>			<b>\$ 1,566.70</b>	
	<b>LESS 20%</b>			<b>\$ 313.34</b>	
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,253.36</b>	
	Rear Bumper Rubber Mat			\$ 50.00	Nett
	Rear Bumper Reverse Sensor			\$ 135.70	Nett
				<b>\$ 185.70</b>	
	<b>Labour Charge</b>				
	Panel Beating			\$ <del>380.00</del> 200	
	Spray Painting Charge			\$ <del>250.00</del> 200	
	Wiring Charge			\$ <del>50.00</del> 50	
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> 30	
	Tow Charge			60.00 nett	
	<b>TOTAL LABOUR</b>			<b>\$ 800.00</b>	
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,239.06</b>	
<p>Kalvin LKK</p> <p>3/9/18 11:45 hrs</p> <p>2 Rep</p> <p>L/S</p> <p>After Repair photo</p>					
<p>LKK Auto Consultants hereby notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>To resurvey before/after spray painting</li> <li>To display damaged car in drying room</li> <li>Parts prices are subject to market prices</li> <li>Third party survey is on a "No Fault" basis</li> <li>No illegal repair is allowed</li> <li>Supplementary work must be approved and is subject to final approval from Insurance Company</li> </ul> <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p>					
<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>					

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305207575

OMER

COMFORT TRANSPORTATION PTE LTD  
7010045  
383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755

(R) (C)  
(P)

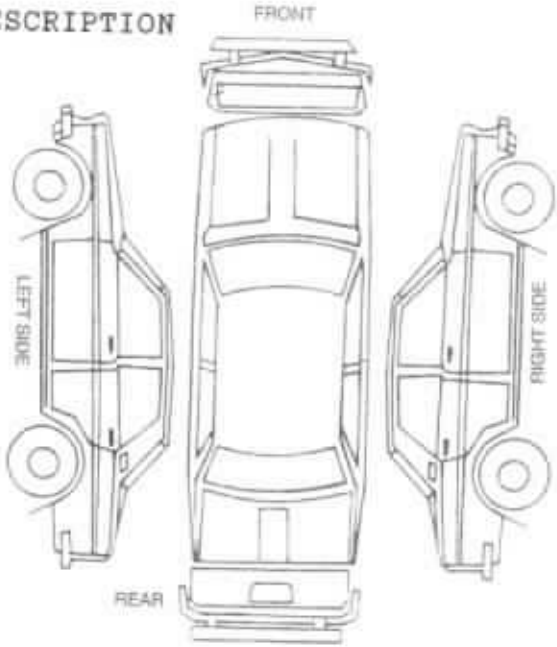
UNIT CARD NO.

REGN NO.: SHA7523L	MILEAGE
MAKE: HYUNDAI	FUEL E 1/2 F
MODEL: I-40	DATE/TIME IN: 01.09.2018 18:25
YR OF MANU: 14.05.2015	TARGET DATE
CHASSIS CODE: RMHLB41UMFU069059	COMPLETION DATE/TIME

Accident Date: 01.09.2018  
NATURE: 3P 01.09.18

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



ID & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

gement Slip

Exit Pass

SHA7523L LIMITS

Vehicle No.: SHA7523L

Service Advisor

Signature/Date

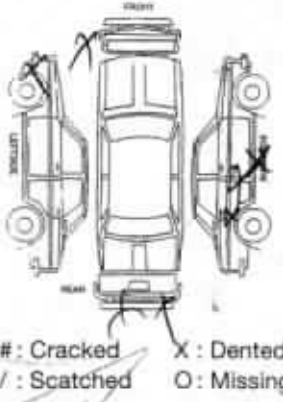
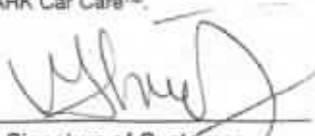
Name of Service Advisor

Date

ed to Service Reception upon collection

To be kept by Security Guard

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition			
1. Date: 1/9/18 Time Received: 11:25		3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer: MK Koh Contact No.: 94592997 Vehicle No.: 5HA7523-L Make / Model / Colour: 180 Email:		5. Nature of Service: <input type="checkbox"/> Jumpstart <input checked="" type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks:
7. Location: Holland Ave		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input checked="" type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi	
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others:		10. Odometer Reading : Fuel Level : F 1/4 1/2 3/4 E	
11. Radio / CD Player <input checked="" type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested			
12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input checked="" type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS TOWING Name of Driver : Vehicle No. : 1157717R Time Dispatch : 01/9/18 Time of Arrival : Time Completed :			
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 coupons, 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™.			
Date: 1/9/18		Time: Signature of Customer: 	
14. WORKSHOP			
Name of Attending Staff/Guard		Date & Time of Arrival	
Signature of Attending Staff/Guard		Signature of Attending Staff/Guard	



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVENUE, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: To Be Advised  
Our ref: CC3/CT118016136/K1pb3

Date: 04.09.2018

The Motor Claims Department  
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

**PRELIMINARY ADVICE OF VEHICLE NO.**

**SHA7523L**

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 03.09.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	2,239.06
Revised Estimate Amount	: S\$	1,182.40
"Check" Items Amount	: S\$	610.96
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

**Description of Damage:**

The vehicle sustained damages at the  
Rear Portion



**Comments/Present Status:**

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG  
Licensed Appraiser



## COMFORTDELGRO ENGINEERING PTE LTD

China Taiping-4/5

IS

## REPAIR ESTIMATE\*

VEHICLE NO : SHA 7523L

DATE 3/9/2018

MAKE :

LKK - kalvin

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper			\$ 553.00	
	Rear Bumper Reinforcement ?			\$ 428.40	
	Rear Bumper Reinforcement Bracket (LH/RH) ?		\$ 80.30	\$ 160.60	
	Rear Bumper Clip 10 pcs			\$ 22.00	
	Rear Bumper Bracket ?		\$ 35.60	\$ 71.20	
	Rear Bumper Sponge ?			\$ 103.50	
	Rear Bumper Under Cover			\$ 228.00	
	<b>SUB TOTAL</b>			<b>\$ 1,566.70</b>	
	<b>LESS 20%</b>			<b>\$ 313.34</b>	
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,253.36</b>	
	Rear Bumper Rubber Mat			\$ 50.00	Nett
	Rear Bumper Reverse Sensor X			\$ 135.70	Nett
				<b>\$ 185.70</b>	
	<b>Labour Charge</b>				
	Panel Beating			\$ <del>380.00</del> 200	
	Spray Painting Charge			\$ <del>250.00</del> 200	
	Wiring Charge			\$ <del>50.00</del> X	
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> 50	
	Tow Charge			60.00 nett	
	<b>TOTAL LABOUR</b>			<b>\$ 800.00</b>	
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,239.06</b>	
<p> <i>Kalvin LKK</i>  <i>3/9/18 11x5h</i>  <i>2 hrs</i>  <i>4/5</i>  <i>After Repair photo</i> </p> <p> <b>LKK Auto Consultants</b> hereby notify the Repainer of the following:            • To survey before the repair work            • To display damaged parts and materials            • Parts prices are based on the latest market prices            • Third party claims and insurance are subject to the insurance company's decision            • No illegal modification or alteration            • Supplementary items, materials, and labour are subject to final approval from insurance Company            Acknowledged by Repainer            Signature:            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.					

## Hsiao Tong (LKKAUTO)

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**From:** William Tan Thoo Seng <williamtan@cdge.com.sg>  
**Sent:** Thursday, 29 November 2018 11:10 AM  
**To:** Hsiao Tong (LKKAUTO)  
**Subject:** Re: Your ref: T 0918/ SHA7523L/ WT(st) \*Our Ref: CC3/CTI18016136/K1pb3 [ACCIDENT INVOLVING SLN 7785G(CHINA TAIPING) AND SHA 7523L ON 01/09/2018]

Without Prejudice.

Dear Hsiao Tong

We accept your global offer. Kindly forward your D.V.

Thank you.

Best Regards  
William Tan  
Claims Department | ComfortDelgro Engineering Pte Ltd  
Off : 62148737 | Fax : 62141843

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**From:** Hsiao Tong (LKKAUTO) <chewht@lkkauto.com>  
**Sent:** Thursday, 29 November 2018 10:49 AM  
**To:** William Tan Thoo Seng; Catherine Koh Mui Gek  
**Subject:** Your ref: T 0918/ SHA7523L/ WT(st) \*Our Ref: CC3/CTI18016136/K1pb3 [ACCIDENT INVOLVING SLN 7785G(CHINA TAIPING) AND SHA 7523L ON 01/09/2018]

Your ref: **T 0918/ SHA7523L/ WT(st)**  
Our Ref: CC3/CTI18016136/K1pb3

**WITHOUT PREJUDICE**

Dear Sir/Madam,

**ACCIDENT INVOLVING SLN 7785G(CHINA TAIPING) AND SHA 7523L ON 01/09/2018**

We refer to the above matter.

We propose settlement at a global sum of **\$1,500.00(all-in)**.

Please confirm acceptance.

"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,

**Hsiao Tong, Chew** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742-3197 | email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) | fax: 6741-4108

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

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ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

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## Shu Pei (LKKAuto)

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**From:** Lucas Lee <lucas.lee@sg.cntaiping.com>  
**Sent:** Thursday, 6 September 2018 3:34 PM  
**To:** Shu Pei (LKKAuto)  
**Subject:** RE: Direct Settlement - Accident Involving SLN7785G (OI : CAI - SNM18D04286C02) and SHA7523L (TP : LKK REF - CC3/CTI18016136/K1pb3) on 01.09.2018  
**Attachments:** leeSZ\_SNM18D04286C01-SLN7785G-LKKDirectSettlementAccidentLtr\_CLCR95.569.pdf; MLHM18113997-SLN7785G.pdf

Dear Sirs,

Kindly refer to the above attachment.

Case Handler: Elaine Cheong

Lucas Lee  
Claims Department (Motor)  
**China Taiping Insurance (Singapore) Pte. Ltd.**  
3 Anson Road #16-00 Springleaf Tower Singapore 079909  
Direct (65) 6389 6181  
Fax (65) 6222 7175/6224 7478  
Email: [lucas.lee@sg.cntaiping.com](mailto:lucas.lee@sg.cntaiping.com)  
Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)



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**From:** Shu Pei (LKKAuto) [mailto:shupeil@lkkauto.com]  
**Sent:** Tuesday, 4 September, 2018 6:47 PM  
**To:** Claims Dept of CTI  
**Cc:** Elaine Cheong; Lucas Lee; Admin A; Hsiao Tong (LKKAuto)  
**Subject:** Direct Settlement - Accident Involving SLN7785G (OI : CAI - TBA) and SHA7523L (TP : LKK REF - CC3/CTI18016136/K1pb3) on 01.09.2018

**WITHOUT PREJUDICE**

Dear Elaine,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SHA 7523L at M/s ComfortDelGro Engineering Pte Ltd (Loyang).

Enclosed for your perusal is:

- TP GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Hsiao Tong and she can be contacted at DID: 6742 3197.

Thank you

Best Regards,

**Shu Pei** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6366-0055 | email: [shupeil@lkkauto.com](mailto:shupeil@lkkauto.com) | fax: 6741-4108

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

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中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #16-00 Springleaf Tower Singapore 079600  
Tel: 6389 6111 Fax: 6322 1033  
Website: www.sg.taiping.com  
Co. Reg. No. 200208384E

Our Reference: **SNM18D04286/C01/5**

Date : **06 SEPTEMBER 2018**

via Ordinary & Registered Mail

**OH CHEE SIANG WAYNE  
67 TAMPINES CENTRAL 7  
#11-35 CITYLIFE@TAMPINES  
SINGAPORE 528598**

Dear Sir / Madam

**ACCIDENT INVOLVING SLN7785G AND SHA7523L ON 01 SEPTEMBER 2018  
ALONG MCE EXIT KEPPEL ROAD**

We refer to the abovementioned accident.

Please be advised that the third party vehicle, **SHA7523L**, is filing a third party property claim against your vehicle.

We have appointed **LKK Auto Consultants Pte Ltd**, to administer the said claim on our behalf and they will contact you for more information about the accident.

Kindly render your assistance and co-operation accordingly.

Yours truly,  
Claims Department

*(This is a computer generated letter and no signature is required.)*

CC : LKK Auto Consultants Pte Ltd  
Attn : HSHAO TONG  
Ref : CC3/CT118016136/K1PB3  
Contact No : 67423197  
via Email : HSHAO.TONG@LKKAUTO.COM

CC : Agent - (AN0444A) - META AGENCY PTE LTD

F01/LKKDS-2013

Our Ref : T 0918 / SHA7523L /WT(st)

Your Ref :

Date : 07-Sep-18

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

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199500041W

CHINA TAIPING INSURANCE CO LTD

3 ANSON ROAD

#16-00 SPRINGLEAF TOWER

SINGAPORE 079909

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA7523L YOUR INSURED SLN7785G  
AND OTHER \_\_\_\_\_ ON 01.09.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA7523L 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 SLN7785G we are submitting these claims for your consideration on behalf of the claimants.

## TAXI OWNER'S CLAIM

- 1 Cost of Repair
- 2 3.5 days Loss of Rental @ \$ 115.00 per day
- 3 Survey Report Fees (Surveyed by M/s LKK)
- 4 LTA Search Fees
- 5 GIA / Police Report Fees
- 6 Towing / Medical / Transportation Fees

\$ 1,016.50

\$ 402.50

\$ -

\$ 7.49

\$ -

\$ -

Sub Total : \$ 1,426.49

## HIRER'S CLAIM

- 7 3.5 days Loss of Income @ \$ 80.00 per days

\$ 280.00

Total Claims : \$ 1,706.49

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

- a) Original repair bill and photocopies of photographs : 4 pcs.
- b) LTA search slip/s of : SLN7785G
- c) GIA / Police report/s of : SHA7523L
- d) Letter of authority from owner / hirer / operator
- ( ) Traffic Compound ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance
- ( X ) Photograph/s of Accident Scen ( 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  
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





Auto  
Consultants  
Pte Ltd

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

Our Ref: CC3/CTI18016136/K1pb3

14 SEPT 2018

**OH CHEE SIANG WAYNE**  
67 TAMPINES CENTRAL 7  
#11-35  
SINGAPORE 528598

Dear Sir/Madam,

**ACCIDENT INVOLVING SLN 7785G AND SHA 7523L ON 01/09/2018**

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

We have received a claim from SHA 7523L against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

CHEW HSIAO TONG  
Case Handler  
DID: 6742 3197  
FAX: 6741 4108  
EMAIL: chewht@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd*  
*(Motor Claims Dept)*



(NAF / PAF)

ON 01-Sep-18 17:15

94592997

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3028571800 Claim No : SNM18D04286C02

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,500.00  
Singapore Dollars ONE THOUSAND FIVE HUNDRED Only

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHA7523L

Insured Vehicle No. : S1N7785G

Date of Loss : 01/09/2018

Place of Accident : KEPPEL ROAD AT THE FIRST TRAFFIC LIGHT EXIT

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : OH CHEE SIANG WAYNE

Driver Name : OH CHEE SIANG WAYNE

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Global Sum	S\$ 1,500.00
TOTAL . . . . .	S\$ 1,500.00

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
55 LOYANG DRIVE  
SINGAPORE 530809

Claimant Name : \_\_\_\_\_ NRIC No : \_\_\_\_\_

Signature :  Date : 03.12.18

"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"

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

## TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD  
SPRINGLEAF TOWER

3 ANSON ROAD #16-00  
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO  
SHA7523L

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
14.05.2015

CHASSIS CODE  
KMHLB41UMFU069059

NO/DATE  
91394015 05.09.2018

JOB NO.  
305207575

ODOMETER READING

JOB TYPE

Description : 3P 01.09.18

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	950.00
Add GST @ 7.000 %	66.50
<b>Total Invoice amount</b>	<b>1,016.50</b>

Issued by : CHEWBEELING 05.09.2018 15:56:54  
Repair Type : CLSO/57/57  
Payment Type/Term : /Credit 30 days

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N

Our Ref: CT18090024



Date: 05 September 2018

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	01/09/2018 @ 17:15 hrs
ALONG	KEPPEL ROAD AT THE FIRST TRAFFIC LIGHT EXIT
INVOLVING	SLN7785G

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 **SHA7523L** (the "Taxi"). The Taxi was hired to **ONG CHIN LUU IC NO S1205083F** 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 **India International Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay  
Assistant Manager, Fleet Safety

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

	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO					FROM	TO
		1650	0600	31/05/18	Samuel	628503	438	1640	0620
3	280	1055	2200	01-09-18	DAY C L	628645	141	0850	1540
2		0915		01/09/18	Samuel	628684	39	1835	1815
1	425	1645	0550	11/9	Accident	4	1	1825	—
9	150	0805	1620	4/9	repair	4	1	—	1430
7	448	1635	0555						
8	161	0905	1635						
0	402	1645	0555						
3	102	0900	1605						
4	441	1635	0540						
5	160	0650	1505						

**Enquire Vehicle Insurer**

Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name

SLN7785G 01 Sep 2018 / 17:15:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

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

SUA 7523L



# 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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI18016136/K1pb3q2

3 ANSON ROAD #16-00  
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 12-12-2018



Code : CTI

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLN 7785G	Veh. Inspected	SHA 7523L
Policy No.	DMPCSN3028571800	Coverage (\$)	0.00
Claim No.	SNM18D04286C02	Excess (\$)	0.00
Assign From		Assign Date	03/09/2018

### 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU069059	Colour	BLUE
Odometer	628684	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	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 REAR PORTION.  
DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	01/09/2018	Inspection Date	03/09/2018
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
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**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. SHA 7523L**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DEFORMED	553.00	553.00
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	428.40	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$80.30	SERVICEABLE	160.60	-
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @\$35.60	SERVICEABLE	71.20	-
1	REAR BUMPER SPONGE	SERVICEABLE	103.50	-
1	REAR BUMPER UNDER COVER	CUT	228.00	228.00
	LESS 20% DISCOUNT		-313.34	-160.60
			1,253.36	642.40
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
1	REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
			185.70	50.00
<b><u>LABOUR</u></b>				
	PANEL BEATING	NOT NECESSARY	380.00	200.00
	SPRAY PAINTING CHARGE		250.00	200.00
	WIRING CHARGE		50.00	-
	REMOVE/REFIX REVERSE SENSOR		120.00	30.00
	TOWING CHARGE		60.00	60.00
			860.00	490.00
<b>GRAND TOTAL</b>			<b>2,299.06</b>	<b>1,182.40</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>950.00</b>

Report Ref No. CC3/CTI18016136/K1pb3q2

**KALVIN ANG WEI KUN**

Automotive Assessor / Investigator

**HO LEONG CHUAN**

Automotive Assessor

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