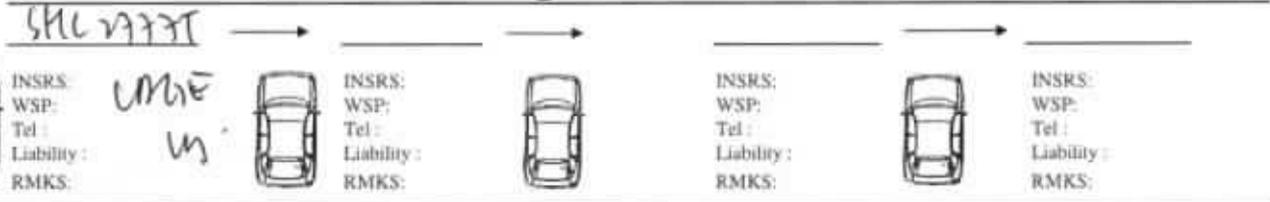


INS. CASE OWNER: CC 3 / CT11801 7067, F2 2639 LKK IDAC

Surveyor: Falvin DOI: 18/9/18 Date / Time: 18/9/18
Registered in Merit: _____

Pre-assign / CCU / FTE

Insured Vehicle No.: SUR 3A18B Claim No.: SMM18D0454701/8
 Name of Insured: ROHAK LEITWER Policy No.: IMP PLS 0005871300
 Insured Tel No.: _____ HP: 966725479 Make / Model: ANO1
 Excess Sec II :SS _____ D.O.A.: 18/9/18 Place of Accident: PAN PACIFIC SINGAPORE
 Is driver the owner? (YES / NO) Nature of Accident: _____
 If NO. Driver Name / Age: DEWI HANSAWI LEITWER OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO
 Driver Tel No.: _____ (VL YES / NO) Insured Liability: % Final ? Yes / No



Date/ Time	STAGE	DATE / PIC
27/10/18	Non-Reporting hr (1st):	
27/10/18	Non-Reporting hr (2nd):	
27/10/18	Non-Reporting hr (Final):	
27/10/18	Notification hr (if non-pickup):	
27/10/18	Call OI:	<u>THAM By Email</u>
27/10/18	After call hr to OI:	<u>2410</u>
27/10/18	Documentation Check List:	Handler Typist
27/10/18	Notification hr (if non-pickup)	
27/10/18	After call hr to OI:	<u>2410</u>
27/10/18	Authorisation To Act:	<input checked="" type="checkbox"/>
27/10/18	Release Voucher:	<input checked="" type="checkbox"/>
27/10/18	Final Repair Bill:	<input checked="" type="checkbox"/>
27/10/18	Car Rental Invoice:	<input checked="" type="checkbox"/>
27/10/18	Towing Invoice:	<input type="checkbox"/>
27/10/18	LTA/GIA:	<input checked="" type="checkbox"/>
27/10/18	Medical Bill:	<input type="checkbox"/>
27/10/18	PIR:	<input type="checkbox"/>
27/10/18	Mandate/Reject Instruction:	<input type="checkbox"/>
27/10/18	LOD:	<input checked="" type="checkbox"/>
27/10/18	Payment Breakdown Form:	<input type="checkbox"/>
27/10/18	Post-Repair Photos:	<input type="checkbox"/>
27/10/18	Others:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: 19/09/18 Sent By: ES

FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____

Repair Cost: 49 \$S 1,850.00 (2 days) Reduction: 69 % Email Call

FINAL SETTLEMENT Date/Time: 21/11/18 Confirm with: WILKINSON Email Call

Final Liability: % 100 (Assessed) BOLA S/N No.: 24 If NO or B 28, Ass. Lia: COLD (COUNTS TO LOS)
 Repair Cost: (W/SS) \$S 1,979.50
 Loss of Rental (LOR): \$S 385.60 (2 days) X 192.80
 Loss of Use (LOU): \$S 100.00 (S 50 x 2 days)
 Loss of Income (LOI): \$S - (S 5 x 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 -
 Total: \$S 2,422.59 Global Sum \$S: 2,420.00
 1) Claim status: Normal/Reject/Private Settle
 2) Report format:
 3) Survey fee: 400.00

FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email Call

Payee 1: \$S 2,420.00 Name 1: COMPOSITEBLARO 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: Kalvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop no/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 Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 10 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHC 2777 T Yr Regn: 18 Oct 2013

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

Truck / Trailer or

Make: Mercedes Benz E200 cc 2013

Colour: White A/C: Ins Std / NI / NA

Sp. Reading: 829636 T/Radio: Ins Std / NI / NA

Eng/No: _____

C/No: WDD 21200 22A7 59176

Gen. Cond: Good / 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: 205/60R16

R: _____

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

TOYO / YOKO or Westlake

Front: _____ Rear: _____

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

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 15/9/12 D.O.I. 18/9/13

Survey held at CDHE (Layang)

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

Front o/s

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>CTZ</u>
	<u>43</u>
	<u>Lg \$1,850.00</u>
	<u>CRSB: \$4,200.56 (69%67)</u>

Date/Time, File Pass to? : Prel. 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	_____



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/CTI18017063/K1ub3

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Date : 19-09-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLQ 3918B	Veh. Inspected	SHC 2777T
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	19/09/2018

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	15/09/2018	Inspection Date	18/09/2018
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.

Member of COMFORTDELGRO

ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305214451

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

REGN NO.: SHC2777T	MILEAGE
MAKE: MERCEDES BENZ	FUEL: E 1/2 F
MODEL: E220CDI (E5)	DATE/TIME IN: 18.09.2018 10:00
YR OF MANU: 18.10.2013	TARGET DATE
CHASSIS CODE: WDD2120022A759176	COMPLETION DATE/TIME

ARD NO.

JOB DESCRIPTION

Ident Date: 15.09.2018
 URE: 3P 15.09.18

LABOR CODE	DESCRIPTION

PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nt Slip

SHC2777T JU CHINA

Advisor _____ Signature/Date _____

Service Reception upon collection.

Exit Pass

Vehicle No.: SHC2777T

Name of Service Advisor _____ Date _____

To be kept by Security Guard



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: To Be Advised
Our ref: CC3/CTI18017063/K1ub3

Date: 19.09.2018

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

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. SHC2777T

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 18.09.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	6,050.56
Revised Estimate Amount	: S\$	2,324.00
"Check" Items Amount	: S\$	1,470.40
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the Front O/S Portion.



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 2777T

DATE 18/9/2018 10:51

MAKE :

MODEL : MERCEDES

Handwritten initials/signature

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bumper Assy, Frt <i>X repair</i>			\$ 1,890.50
	Bumper Reinforcement, Frt <i>X re</i>			\$ 1,158.00
	Bumper Bracket, Frt/RH <i>X re</i>			\$ 95.00
	Bumper Sponge, Frt/Centre <i>X re</i>			\$ 285.00
	Daylight (RH) <i>X re</i>			\$ 439.20
	Daylight Chrome Cover (RH) <i>X re</i>			\$ 78.00
	Head Lamp Assy (RH) <i>hazel</i>			\$ 2,380.00
	Head Lamp Bracket (RH) <i>X re</i>			\$ 300.00
	SUB TOTAL			\$ 6,625.70
	LESS 20%			\$ 1,325.14
	DISCOUNTED TOTAL			\$ 5,300.56
	Labour Charge			
	Panel Beating			\$ 400.00 ²⁰⁰
	Spray Painting Charge			\$ 300.00 ²⁰⁰
	Wiring Charge			\$ 50.00 ²⁰
	TOTAL LABOUR			\$ 750.00
	ESTIMATE TOTAL			\$ 6,050.56

Kalin (KKA)
18/9/18 1120L
2072
U/S
After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before after spray painting
- To do any cosmetic parts having necessary
- Part of the panel to be replaced
- To do any necessary work to the "original" state
- To do any necessary work to the "original" state
- To do any necessary work to the "original" state
- To do any necessary work to the "original" state

Acknowledged & 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.

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305214451
Date : 19/08/2019

FINALIZATION FORM

To : LKK Fax : _____
Attn : KALVIN
: SHC2777T Date of Accident : 15/08/2018

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

- The repair job shall bill to: CHINA --- SLQ3918B
###
- 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% **\$1,850.00**
Final Lumpsum Repair cost _____
- 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 : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : Kelvin
Date : 19/9/18

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		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 2777T

DATE 18/9/2018 10:51

MAKE :

MODEL : MERCEDES

Chun
JH

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bumper Assy, Frt <i>X repair</i>			\$ 1,890.50
	Bumper Reinforcement, Frt ?			\$ 1,158.00
	Bumper Bracket, Frt/RH ?			\$ 95.00
	Bumper Sponge, Frt/Centre ?			\$ 285.00
	Daylight (RH) <i>X</i>			\$ 439.20
	Daylight Chrome Cover (RH) <i>X</i>			\$ 78.00
	Head Lamp Assy (RH) <i>/</i>			\$ 2,380.00
	Head Lamp Bracket (RH) ?			\$ 300.00
	SUB TOTAL			\$ 6,625.70
	LESS 20%			\$ 1,325.14
	DISCOUNTED TOTAL			\$ 5,300.56
	Labour Charge			
	Panel Beating			\$ 400.00 ²⁰⁰
	Spray Painting Charge			\$ 300.00 ²⁰⁰
	Wiring Charge			\$ 50.00 ²⁰
	TOTAL LABOUR			\$ 750.00
	ESTIMATE TOTAL			\$ 6,050.56

Kalin (CKK)
18/9/18 1120h
2071
U/S
After Repair photo

LEK Auto Components hereby certify the Repairer of the following:

- To restore the vehicle to original condition
- To ensure that the repair work is satisfactory
- Parts used are of the correct specification
- Third party goods are not damaged on a "no-fault" basis
- No work is done on the vehicle without the owner's consent
- Subsequent damage to the vehicle will be covered and is subject to 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.

Shu Pei (LKKAuto)

From: Elaine Cheong <elaine.cheong@sg.cntaiping.com>
Sent: Tuesday, 16 October 2018 10:56 AM
To: Shu Pei (LKKAuto)
Cc: Lucas Lee; Admin A; Thin Thin (LKKAuto)
Subject: RE: Direct Settlement - Accident Involving SLQ3918B (OI : CTI - SNM18D04547C02/8) and SHC2777T (TP : LKK REF - CC3/CTI18017063/K1ub3) on 15.09.2018
Attachments: MNA118133779-SLQ3918B.pdf

Dear Shu Pei,

Attached a copy of our insured's GIA report for your perusal.

Please be advised that insured may dispute on third party quantum. Kindly touch base with him before settlement.

Thank you.

Regards,

Elaine Cheong
Executive (Motor Claims)
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower
Singapore 079909
Co. Reg. No. 200208384E
DID: 6389 6530
Fax: 6224 7478 / 6224 7175
Email: elaine.cheong@sg.cntaiping.com
Website: www.sg.cntaiping.com



From: Shu Pei (LKKAuto) [mailto:shupeil@lkkauto.com]
Sent: Wednesday, 19 September, 2018 6:31 PM
To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Cc: Lucas Lee <lucas.lee@sg.cntaiping.com>; Elaine Cheong <elaine.cheong@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>; Thin Thin (LKKAuto) <thinthin@lkkauto.com>
Subject: Direct Settlement - Accident Involving SLQ3918B (OI : CTI - TBA) and SHC2777T (TP : LKK REF - CC3/CTI18017063/K1ub3) on 15.09.2018

WITHOUT PREJUDICE

Dear Elaine,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SHC 2777T at M/s ComfortDelGro Engineering Pte Ltd (Loyang).

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

Enclosed for your perusal is:

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

Our case handler in-charge is Thin Thin and she can be contacted at DID: 6841 2360.

Thank You.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

Our Ref : T 0918 / SHC2777T /WT(st)
 Your Ref :
 Date : 25-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. 199508048W

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 SHC2777T YOUR INSURED SLQ3918B
 AND OTHER _____ ON 15.09.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC2777T 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 SLQ3918B we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,979.50
2	<u>2</u> days Loss of Rental @ \$ 167.80 per day	\$ 335.60
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 2,322.59

HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 2,482.59

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 : SLQ3918B
- c) GIA / Police report/s of : SHC2777T
- 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.

Thin Thin (LKKAuto)

From: Thin Thin (LKKAuto)
Sent: Wednesday, 24 October 2018 11:42 AM
To: 'leitnerroger@yahoo.co.uk'
Cc: Admin A; Vivian Lau (LKKAuto); 'Elaine Cheong'
Subject: ACCIDENT INVOLVING SLQ 3918B & SHC 2777T ON 15/09/2018



Auto
Consultants
Pte Ltd

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

Our Ref: CC3/CTI18017063/K1ub3

24 OCTOBER 2018

ROGER LEITNER
77 FLORA RISE
#07-21
SINGAPORE 506884

Dear Sir/Madam,

ACCIDENT INVOLVING SLQ 3918B & SHC 2777T ON 15/09/2018

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

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.

Understand that you would like to know the final amount of the settlement made against your policy.

The adjusted amount of the third party claim for cost of repair is **\$ 1,850.00** excluded GST with 2days for repair.

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,

THIN THIN HLAING
Case Handler
DID: 6841 2360
Fax: 6741 4108
Email: thinthin@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd*

(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****MERCEDES E220 SHC2777T , SLQ3918B
PAN PACIFIC LOBBY DRIVE.****ON 15-Sep-18 04:20**

I / We

LI TING KOON

(Hirer) NRIC No.:

S7813326J

and/or

(Relief) NRIC No.:

Taxi Number

SHC2777T

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

15-Sep-2018

Name of Hirer

LI TING KOON

Hirer NRIC

S7813326J

Signature :



Address

**80 C TELOK BLANGAH STREET 31 #1...
103080**

Contact No.

96503336

h

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3058171700 Claim No : SNM18D04547C02/8
Claimant : COMFORT TRANSPORTATION PTE LTD
Amount : S\$ 2,420.00
Singapore Dollars Two Thousand Four Hundred and Twenty 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. : SHC 2777T
Insured Vehicle No. : SIQ 3918B

Date of Loss : 15/09/2018
Place of Accident : PAN PACIFIC SINGAPORE

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 : ROGER LEITNER
Driver Name : DEWI HAPSARI LEITNER

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.

Global Sum	:	S\$ 2,420.00
Total	:	S\$ 2,420.00

Claimant Name : COMFORT TRANSPORTATION PTE LTD NRIC No : _____

Signature :  Date : 21-11-18

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
25 LORANG DRIVE
SINGAPORE 508988

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
SHC27777

NO/DATE
91396725 20.09.2018

MARK
MRCRCKRS BRN%

JOB NO.
305214451

MODEL
K220CDI (R5)

ODOMETER READING

DATE OF REG
18.10.2013

CHASSIS CODE
W002120022A759176

JOB TYPE

Description : 3P 15.09.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,850.00
Add GST @ 7.000 %	129.50
Total Invoice amount	1,979.50

Issued by : KATHERINE TAN 20.09.2018 16:19:59
Repair Type : CI/SO/57/57
Payment type/Term : /Credit 30 days

ComfortDelGro Engineering Pte Ltd
member of COMFORTDELGRO

Head Office:
15 Braddell Road
Singapore 579701

Please kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

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

Our Ref: CT18090397

Date: 20 September 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 15/09/2018 @ 04:20 hrs
ALONG PAN PACIFIC LOBBY DRIVE.
INVOLVING SLQ3918B

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 **SHC2777T** (the "Taxi"). The Taxi was hired to **LI TING KOON IC NO S7813326J** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$167.80** 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.

SAC 2777

MILEAGE READING	MILEAGE TRAVELLED (KM)		HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)		HOURS OPERATED (TIME)	
	FROM	TO	FROM	TO			FROM	TO	FROM	TO			
25988	359		2100	1000	16-09-18	Li Hwee Gim	828	655	277	10.40	21.00		
26212	224		10.40	20.50	16/9/18	Li Hwee Gim	828	986	332	2240	1005		
26561	349		2120	1040	17-09-18	Li Hwee Gim	829	200	213	10.05	20.50		
26697	135		10.45	19.25	17/9/18	Li Hwee Gim	829	636	436	2115	1000		
27080	384		2000	1020	18/09/18	Accident			10	1060	-		
27213	170		10.25	20.10	19/09/18	Repair			001	1600	-		
27588	375		2120	1300									
27705	117		13.00	21.00									
28029	324		2031	1100									
28179	149		10.55	20.40									
28417	238		2240	0930									

Enquire Vehicle Insurer

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

SLQ39188 15 Sep 2018 / 04:20:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SHC 2777T



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/CTI18017063/K1hb3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Date : 29-11-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLQ 3918B	Veh. Inspected	SHC 2777T
Policy No.	DMPCSN3058171700	Coverage (\$)	0.00
Claim No.	SNM18D04547C02/8	Excess (\$)	0.00
Assign From		Assign Date	18/09/2018

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ E 220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	WDD2120022A759176	Colour	WHITE
Odometer	829636	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	WEST LAKE	7 mm
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	15/09/2018	Inspection Date	18/09/2018
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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 2777T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BUMPER ASSY ,FRT	TO REPAIR SEE LABOUR	1,890.50	-
1	BUMPER REINFORCEMENT ,FRT	SERVICEABLE	1,158.00	-
1	BUMPER BRACKET ,FRT /RH	SERVICEABLE	95.00	-
1	BUMPER SPONGE ,FRT/CENTRE	SERVICEABLE	285.00	-
1	DAYLIGHT (RH)	SERVICEABLE	439.20	-
1	DAYLIGHT CHROME COVER (RH)	SERVICEABLE	78.00	-
1	HEAD LAMP ASSY(RH)	GRAZED	2,380.00	2,380.00
1	HEAD LAMP BRACKET (RH)	SERVICEABLE	300.00	-
	LESS 20% DISCOUNT		-1,325.14	-476.00
			5,300.56	1,904.00
LABOUR				
	PANEL BEATING INCLUSIVE OF THE REPAIR OF BUMPER ASSY ,FRT .		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.		50.00	20.00
			750.00	420.00
GRAND TOTAL			6,050.56	2,324.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,850.00

Report Ref No. CC3/CTI18017063/K1hb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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