

Our Ref : T 0918 / SHD7105U / JW(st)  
Your ref :  
Date : 04-Oct-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

## Workshops

**Braddell**  
205 Braddell Road  
Singapore 579701

**Loyang**  
59 Loyang Drive  
Singapore 508969

**Sin Ming**  
383 Sin Ming Drive  
Singapore 575717

**Pandan**  
45 Pandan Road  
Singapore 609286

**Ubi**  
320 Ubi Road 3  
Singapore 408649

**Senoko**  
24 Senoko Loop  
Singapore 758156

**Sungei Kadut**  
7 Sungei Kadut Way  
Singapore 728791

**Yishun**  
501 Yishun Industrial Park A  
Singapore 768732

EQ Insurance Company Limited  
5 Maxwell Road, MND Complex  
#17-00 Tower Block  
Singapore 069110

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

## ACCIDENT INVOLVING OUR TAXI SHD7105U YOUR INSURED GBF5545G AND OTHER ON 26.09.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHD7105U 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 GBF5545G we are submitting these claims for your consideration on behalf of the claimants.

### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,201.65
2	2 days Loss of Rental @ \$ 121.28 per day	\$ 242.56
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transporation Fees	\$ -
Sub Total :		\$ 1,451.70

### HIRER'S CLAIM

7	0 days Loss of Income @ \$ 80.00 per day	\$ -
Total Claims:		\$ 1,451.70

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

- a) Original repair bill and photocopies of photographs : 9 pcs.  
b) LTA search slip/s of : GBF5545G  
c) GIA / Police report/s of : SHD7105U  
d) Letter of authority from owner / hirer / operator  
( ) Witness statement/s ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance  
( X ) Photograph/s of Accident Scene ( 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.

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****i 40 SHD7105U , GBF5545G  
PIE TOWARDS LORNIE RD****ON 26-Sep-18 22:50**

I / We

**POON KAR KIONG**(Hirer) NRIC No.: **S0137581D**

and/or

**PEH TOH YANG**(Relief) NRIC No.: **S1552019A**

Taxi Number

**SHD7105U**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

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

Date

**27-Sep-2018**

Name of Hirer

**POON KAR KIONG**

Hirer NRIC

**S0137581D**

Signature :



Address

**289 BISHAN STREET 24 #09-15  
570289**

Contact No.

**96792882**

Name of Relief

**PEH TOH YANG**

Relief NRIC

**S1552019A**

Signature :



Address

**142 LORONG 2 TOA PAYOH #24-170  
310142**

Contact No.

**97336988**

## TAX INVOICE

COMPANY REG. NO.: 199506048W

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8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00  
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO  
SHD7105U

INV. NO/DATE  
91398943 01.10.2018

MAKE  
HYUNDAI

JOB NO.  
305218189

MODEL  
I-40

ODOMETER READING

DATE OF REG  
10.11.2016

DATE/TIME IN  
27.09.2018 10:30

CHASSIS CODE  
KMHLB41UMGU093517

Description : 3P 26.09.18/C

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0574	140VC PANEL-FENDER LH+	1	566.30	20.00	453.04
			SUB-TOTAL	:		453.04

### JOB NATURE

0001	I.	PANEL BEATING- FR.	200.00		200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	450.00		450.00
0003	20-00	TUFF COAT ON AFFECTED PARTS.	20.00		20.00
			SUB-TOTAL	:	670.00

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.  
CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE INVOICE FOR THE PERIOD OF DEFAULT.  
PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd  
A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91398943	1,201.65	



GST REG. NO. M2-8921817-3

**TAX INVOICE****ComfortDelGro Engineering Pte Ltd**205 Braddell Road Singapore 579701  
Mainline + 65 6383 6280 Facsimile + 65 6280 9755**Workshops**58 Loyang Drive Singapore 508959 24 Senoko Loop Singapore 758156  
383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791  
45 Pandan Road Singapore 609286 501 Yehun Industrial Park A Singapore 768732  
320 Ubi Road 3 Singapore 408649COMPANY REG. NO.: 199506048W  
Page: 2

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00  
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO  
SHD7105UMAKE  
HYUNDAIMODEL  
I-40DATE OF REG  
10.11.2016CHASSIS CODE  
KMHLB41UMGU093517INV. NO./DATE  
91398943 01.10.2018JOB NO.  
305218189

ODOMETER READING

DATE/TIME IN  
27.09.2018 10:30

Items total		1,123.04
Add GST @	7.000 %	78.61
Invoice amount		1,201.65

Issued by : KATHERINETAN 01.10.2018 14:18:23  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.

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**ComfortDelGro Engineering Pte Ltd**  
A member of **COMFORTDELGRO**Head Office:  
205 Braddell Road  
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

**CUSTOMER'S COPY**

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91398943	1,201.65	

Our Ref: CT18090747

Date: 01 October 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      26/09/2018    @ 22:50 hrs  
ALONG                                PIE TOWARDS LORNIE RD  
INVOLVING                        GBF5545G

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 **SHD7105U** (the "Taxi"). The Taxi was hired to **POON KAR KIONG IC NO S0137581D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$121.28** 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.

M5012-CHS

[illegible]

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GBF5545G	26 Sep 2018 / 22:50:00	Successful	E04	EQ INSURANCE COMPANY LTD

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

SHD7105 U



