

INS CASE OWNER:

CC 3 / EQ1180 18230 / Klpa3

IDAC:

Surveyor:

Ank

DOI:

ASSIGNMENT

8-10-18

Date / Time:

8-10-18

Registered in Meriden:

Pre-assign / CCU / FTE

Yp6252U



Insured Vehicle No. : _____

Claim No. : _____

Name of Insured : _____

Policy No. : DMCPH 018 - 002509

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$5 D.O.A: 5/10/18

Place of Accident : _____

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % Final? Yes / No

SMA 6632L



INSRS: WSP: CDWR
Tel: 10403
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:

Date/ Time

STAGE

DATE / PIC

2/3/10
OKT

SMA 6632L - 04/11/10 10:15 / Klpa3, WPA: 5/10/18
Yp6252U-X

Non-Reporting Itr (1st):
Non-Reporting Itr (2nd):
Non-Reporting Itr (Final):
Notification Itr (if non-pickup):
Call OI:
After call Itr to OI:

24/1/11

CD rear ended TP.

Documentation Check List: Handler Typist

5/12/18

AU -> Mr. Kim to close

Notification Itr (if non-pickup):
After call Itr to OI:
Authorization To Ast:
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:

RECEIVED 03 DEC 2018

PRELIMINARY ADVICE Date/Time: Sent By: Confirm with: Confirm by:

FINALIZATION Date/Time: Confirm with: Confirm by: Email: Call:

FINAL SETTLEMENT Date/Time: Confirm with: Email: Call: IF NO or B-28, Ass. Lia:

Final Liability: % 100 Agreed / Assessed BOLA S/N No.: 77.
Repair Cost: W/GST \$5 695.50
Loss of Rental (LOR): \$5 351.54 (3 days) X \$ 117.28
Loss of Use (LOU): \$5 - (\$ - x - days)
Loss of Income (LOI): \$5 150-W (\$ 50 x 3 days)
LOR only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search \$5 7.49
Medical: \$5 -
Disbursement: \$5 - (e.g. Tow/Independent)
Legal Cost \$5 -
Total: \$5 1204.82 Global Sum \$5: 1200.00
1) Claims status: Noting/Reject/Private Settle
2) Report Format:
3) Survey fee: #4W.W

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

Payee 1: \$5 1200.00 Name 1: Comfort Design Engineering Pte Ltd
Payee 2: (Strike if N.A.) \$5 Name 2:
Payee 3: (Strike if N.A.) \$5 Name 3:

Surveyor: Kalvin

REF: _____

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect 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 Rpt: _____ Consistent?: Yes or No

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

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

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SHA 6632L Yr Regn: 3 Jun 2014

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

Truck / Trailer or

Make: Hyundai 240 cc 1685

Colour: Blue A/C: Insur Std / NI / NA

Sp. Reading: 51677 T/Radio: Insur Std / NI / NA

Eng/No: _____

C/No: KMHLB419AE4053968

Gen. Cond: Good / F6 / Poor / Burnt

Steering: Jammed / Leaked / Burnt or

Brake: In ~~order~~ / Jammed / Leaked / Burnt or

Modi: Nil / SIRlm / STD Dim or

Tyre Size: F: 205 / 60 R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIV / OHTSM / PIR / SUMI /

TOYO / YOKO or West hite.

Front: _____ Rear: _____

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

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

D.O.A. 5/10/08 D.O.I. 8/10/08

Survey held at: CDHE (Layang)

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

Reqr

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

Date / Time	Action / Instruction
	<u>2/5 \$650 (Reel \$ 789.20/556)</u> <u>EQ</u> <u>42</u>

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

1) : Final Report

Date/Time, File Returns to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

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

Report Format: _____

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

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305222812

OMER

IS COMFORT TRANSPORTATION PTE LTD
OMER NO. 7010045
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)

JUNT CARD NO.

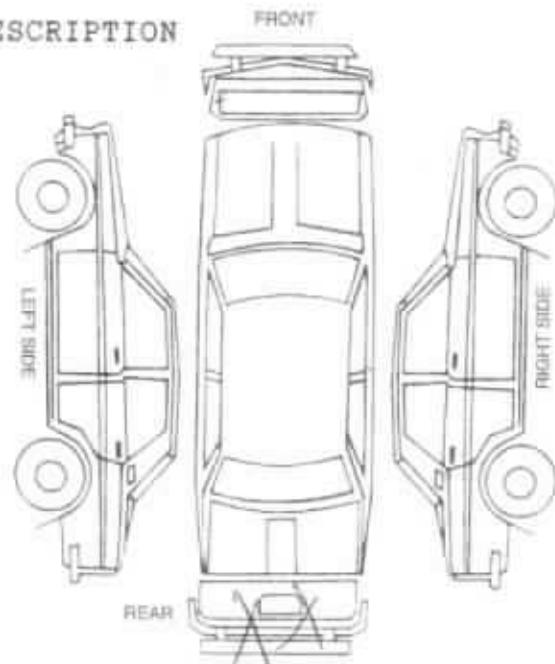
REGN NO.: SHA6632L	MILEAGE
MAKE : HYUNDAI	FUEL E _____ 1/2 _____ F
MODEL I-40	DATE/TIME IN 06.10.2018 10:30
YR OF MANU 03.06.2014	TARGET DATE
CHASSIS CODE KMHLB41UMEU053968	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 05.10.2018
NATURE: 3P 05.10.18

S/NO LABOR CODE

DESCRIPTION



RECEIVED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Check-out Slip

Exit Pass

Vehicle No.: **SHA6632L** **JU EQ**

Vehicle No.: **SHA6632L**

Service Advisor

Signature/Date

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 6632L

DATE 10/6/2018 11:13

MAKE :

MODEL : HYUNDAI i40

EQ J4

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Licence Lamp (LH) ✓		\$ 33.95	\$ 33.95
	Licence Lamp Cover ✓			\$ 380.80
	Rear Bumper <i>x Mp.2</i>			\$ 553.00
	Rear Bumper Clip 10 pcs <i>x</i>			\$ 22.00
	Rear Bumper Under Cover ✓			\$ 228.00
SUB TOTAL				\$ 1,217.75
LESS 20%				\$ 243.55
DISCOUNTED TOTAL				\$ 974.20
	Rear No. Plate ✓			\$ 25.00
TOTAL				25.00
Labour Charge				200
	Panel Beating			\$ 220.00
	Spray Painting Charge			\$ 220.00
TOTAL LABOUR				\$ 440.00
ESTIMATE TOTAL				\$ 1,439.20

? price

Nett

Ko Loh 16/11/18
8/10/18 10 20 hrs
2 Days
L/S
After Repair photo

LOCK A...
 this repair...
 • To receive...
 • To be...
 • Part...
 • The...
 • No...
 • Supp...
 is subject to...
 Acknowledged by Repairer
 Signature:
 Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305222812
Date : 09/10/18

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

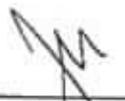
FINALIZATION FORM

To : LKK Fax : _____
Attn : KALVIN
: SHA6632L Date of Accident : 05/10/18

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

- The repair job shall bill to: EQ --- YP 6252U
###
- The finalized amount shall be:
 - Spare Parts after List discount _____
 - Labour Charges ### _____
Total for Part-By-Part Repair Cost _____
 - Lumpsum Repair (if applicable) N _____
Total for Lumpsum repair cost after Less: 20% \$650.00
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 : Kalvin
Date : 9/10/18

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 : SHA 6632L

DATE 10/6/2018 11:13

MAKE :

MODEL : HYUNDAI i40

EQ JM

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Licence Lamp (LH) <i>cut</i>		\$ 33.95	\$ 33.95
	Licence Lamp Cover <i>cut</i>		(SN) 150	\$ 380.80 <i>2 parts</i>
	Rear Bumper <i>x repair</i>			\$ 553.00
	Rear Bumper Clip 10 pcs <i>x 2</i>			\$ 22.00
	Rear Bumper Under Cover <i>cut</i>			\$ 228.00
SUB TOTAL				\$ 1,217.75
LESS 20%				\$ 243.55
DISCOUNTED TOTAL				\$ 974.20
	Rear No. Plate <i>cut</i>			\$ 25.00 Nett
TOTAL				25.00
Labour Charge				200
	Panel Beating			\$ 220.00
	Spray Painting Charge			\$ 220.00
TOTAL LABOUR				\$ 440.00
ESTIMATE TOTAL				\$ 1,439.20

Ko lah (K) 14
8/10/18 10 20 hrs
2 Dya
U/S
After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before start repair
- To display damaged parts, daily recovery
- Parts cost must be submitted
- This is not a warranty, it is a repair estimate
- No item for
- Supp. of

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.

Mei Kwan (LKKAuto)

From: Justin Wong <justin.wong@eqinsurance.com.sg>
Sent: Monday, 22 October, 2018 9:46 AM
To: Mei Kwan (LKKAuto)
Cc: Hsiao Tong (LKKAuto); Admin A
Subject: RE: Direct Settlement - Accident Involving YP6252U (OI : EQI - TBA) AND SHA6632L (TP : LKK REF - CC3/EQI18018230/K1pa3) on 05/10/2018
Attachments: OI GIA - YP6252U.PDF
Categories: HMK

Dear Mei Kwan,

Kindly find OI GIA report.

Liability is clear.

Please proceed with DS.

Regards,
Justin Wong
Executive | Claims



EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6496 9115 | tel 65 6223 9433 ext 115 | fax 65 6223 4190
www.eqinsurance.com.sg



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the

From: Mei Kwan (LKKAuto) [mailto:Meikwan@lkkauto.com]
Sent: Friday, October 19, 2018 6:23 PM
To: Justin Wong <justin.wong@eqinsurance.com.sg>
Cc: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: Direct Settlement - Accident Involving YP6252U (OI : EQI - TBA) AND SHA6632L (TP : LKK REF - CC3/EQI18018230/K1pa3) on 05/10/2018

WITHOUT PREJUDICE

Dear Justin,

We refer to the above matter.

We have inspected TP vehicle SHA6632L at M/s ComfortDelGro Engineering Pte Ltd (Loyang) on a WP basis and TP repairer proposed for a direct settlement.

Hsiao Tong (LKKAuto)

From: Jim Wong See Pah <jimwong@cdge.com.sg>
Sent: Thursday, 29 November 2018 10:04 AM
To: Hsiao Tong (LKKAuto)
Subject: Re: Your ref: T 1018/ SHA6632L/ JW(st) *Our Ref: CC3/EQ118018230/K1pa3 [ACCIDENT INVOLVING YP 6252U(EQ) AND SHA 6632L ON 05/10/2018]

Dear Ms Chew

Please process settlement in sum \$ 1200.00 for resolving our property damage claim amicably.

Thank you.

Best Regards

Jim Wong

Claims Dept / ComfortDelgro Engineering Pte Ltd

From: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>
Sent: Thursday, 29 November 2018 9:02 AM
To: Jim Wong See Pah
Subject: Your ref: T 1018/ SHA6632L/ JW(st) *Our Ref: CC3/EQ118018230/K1pa3 [ACCIDENT INVOLVING YP 6252U(EQ) AND SHA 6632L ON 05/10/2018]

Your ref: **T 1018/ SHA6632L/ JW(st)**
Our Ref: CC3/EQ118018230/K1pa3

WITHOUT PREJUDICE

Dear Sir/Madam,

ACCIDENT INVOLVING YP 6252U(EQ) AND SHA 6632L ON 05/10/2018

We refer to the above matter.

We propose settlement at a global sum of **\$1,200.00(all-in)**.

Please confirm acceptance.

"Please note that our above settlement is made on a without prejudice basis, and should not be construed as an admission of liability on our part or on the part of our insured/driver. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. Our offer made in respect of this present matter is made solely to resolve this matter only. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Settlement and payment are subject to production of original documents on demand at any time and execution of Discharge Voucher (for settlement sum above \$20,000/-) by the Plaintiff/Claimant. Further all original documents shall be retained by us after we have made payment on the settlement sum."

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties

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. 199506046W]



Our Ref : T 1018 / SHA6632L /JW(st)
 Your ref : _____
 Date : 15-Oct-18

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

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. 198000089

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
 401 Yishun Industrial Park A
 Singapore 768732

Attn : **Motor Claims Department** **WITHOUT PREJUDICE**
 Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA6632L YOUR INSURED YP 6252U
 AND OTHER _____ ON 05.10.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA6632L 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 YP 6252U we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 695.50
2	<u>4</u> days Loss of Rental @ \$ <u>117.28</u> per day	\$ 469.12
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 :		\$ 1,172.11

HIRER'S CLAIM

7	<u>4</u> days Loss of Income @ \$ <u>80.00</u> per day	\$ 320.00
Total Claims:		\$ 1,492.11

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

- a) Original repair bill and photocopies of photographs : 8 pcs.
- b) LTA search slip/s of : YP 6252U
- c) GIA / Police report/s of : SHA6632L
- 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
 CDGE Claims Department
 Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

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



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/EQ118018230/K1pa3

25 OCT 2018

ONE LAUNDRY
70 HOUGANG AVE 7
#01-05 THE FLORIDA
SINGAPORE 538804
ATTN: THE MANAGEMENT

Dear Sir/Madam,

ACCIDENT INVOLVING YP 6252U AND SHA 6632L ON 05/10/2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, EQ Insurance Company Ltd to deal with the third party claim against your policy.

We have received a claim from SHA 6632L against your insurance policy.

Based on the accident report and accident scenario, liability is not in your favour. 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 note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

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. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****I 40 SHA6632L , YP6252U
NEWTON FLYOVER TWDS BUKIT TIMAH RD****ON 05-Oct-18 17:00**

I / We

TAN CHIN TEONG(Hirer) NRIC No.: **S7331050D**

and/or

(Relief) NRIC No.:

Taxi Number

SHA6632L

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

06-Oct-2018

Name of Hirer

TAN CHIN TEONG

Hirer NRIC

S7331050D

Signature :



Address

**262A COMPASSVALE STREET #05-121
541262**

Contact No.

83238326

TAX INVOICE

8010325
 EQ INSURANCE COMPANY LIMITED
 5 MAXWELL ROAD TOWER BLOCK #17-00
 SINGAPORE 069110
 CONTACT NO: 62239433

VEHICLE NO
 SHA66321. NO/DATK
 91400937 10.10.2018

MAKE
 HYUNDAI JOB NO.
 305222812

MODEL,
 I-40 CYLINDER RATING

DATE OF REG
 03.06.2014

CHASSIS CODE JOB TYPE
 KMHLB41UMKJ053968

Description : 3P 05.10.18

Invoice for lump sum repair

Total lump sum repair amt	650.00
Add GST @ 7.000 %	45.50
Total invoice amount	695.50

Issued by : KATHERINETAN 10.10.2018 14:56:22
 Repair type : CL80/57/57
 Payment type/Term : /credit 30 days

WE HEREBY TAKE FULL RESPONSIBILITY FOR THE WORK DONE AND SHALL BE ACCORDINGLY LIABLE FOR THE COMPANY'S POLICY OF
 RESPONSIBILITY FOR LOSS OR DAMAGE TO VEHICLES BELONGING TO CUSTOMERS AND VEHICLES AND DRIVERS AND PASSENGERS
 THEREIN (REG).
 CUSTOMERS SHALL INSURE THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 24 HOURS FROM SUCH DELIVERY ADVISE
 US OF ANY ACCIDENTS TO THE COMPANY OR ANY COMPLAINTS CONCERNING THE VEHICLE. THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED
 BY THE CUSTOMER.
 WE HEREBY TAKE FULL RESPONSIBILITY FOR THE WORK DONE AND SHALL BE ACCORDINGLY LIABLE FOR THE COMPANY'S POLICY OF
 RESPONSIBILITY FOR LOSS OR DAMAGE TO VEHICLES BELONGING TO CUSTOMERS AND VEHICLES AND DRIVERS AND PASSENGERS
 THEREIN (REG).
 CUSTOMERS SHALL INSURE THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 24 HOURS FROM SUCH DELIVERY ADVISE
 US OF ANY ACCIDENTS TO THE COMPANY OR ANY COMPLAINTS CONCERNING THE VEHICLE. THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED
 BY THE CUSTOMER.

ComfortDelGro Engineering Pte Ltd
 A member of COMFORTDELGRO

Head Office:
 205 Braddell Road
 Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

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

Our Ref: CT18100158

Date: 10 October 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 05/10/2018 @ 17:00 hrs
ALONG NEWTON FLYOVER TWDS BUKIT TIMAH RD
INVOLVING YP6252U

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 **SHA6632L** (the "Taxi"). The Taxi was hired to **TAN CHIN TEONG IC NO S7331050D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$117.28** 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.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
YP6252U	05 Oct 2018 / 17:00:00	Successful	E04	EQ INSURANCE COMPANY LTD

Previous OK



To : M/s EQ INSURANCE COMPANY LTD

Date: 12/12/2018

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	YP 6252U (Insd Veh)	Your Ref. No. : DMCPHQ18-002509
	SHA 6632L (TP Veh)	Our Ref. No. : CC3/EQI18018230/K1pa3q2
Date of Accident	5/10/2018	

Liability	100%	
Final Repair Cost	: \$ 695.50	
Loss of Income	: \$ 150.00	3 days
Rental (If any)	: \$ 351.84	3 days
Others:	: \$ 7.49	
	: \$	
	1,204.83	
Final Settlement Sum	: \$ 1,200.00	GLOBAL SUM
Remarks	:	

<u>Payment Instruction: Payee's Breakdown</u>		
1)	COMFORTDELGRO ENGINEERING PTE LTD	: \$ 1,200.00
		: \$

JOANNE LEE
LKK Auto Consultants Pte Ltd



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

EQ INSURANCE COMPANY LTD

Ref : CC3/EQI18018230/K1pa3q2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 12-12-2018



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 6252U	Veh. Inspected	SHA 6632L
Policy No.	DMCPHQ18-002509	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	08/10/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	KMHLB41UMEU053968	Colour	BLUE
Odometer	516177	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 REAR PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	05/10/2018	Inspection Date	08/10/2018
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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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 6632L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	LICENCE LAMP (LH)	CUT	33.95	33.95
1	REAR BUMPER	TO REPAIR SEE LABOUR	553.00	-
10	REAR BUMPER CLIP	NOT NECESSARY	22.00	-
1	REAR BUMPER UNDER COVER	CUT	228.00	228.00
	LESS 20% DISCOUNT		-167.39	-52.39
			669.56	209.56
1	LICENCE LAMP COVER (SN)	CRACKED	380.80	150.00
	LESS 20% DISCOUNT		-76.16	-
			304.64	150.00
SPECIAL NETT ITEMS				
1	REAR NO .PLATE (SN)	CRACKED	25.00	25.00
			25.00	25.00
LABOUR				
	PANEL BEATING INCLUSIVE OF THE REPAIR OF REAR BUMPER.		220.00	200.00
	SPRAY PAINTING CHARGE.		220.00	200.00
			440.00	400.00
GRAND TOTAL			1,439.20	784.56
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				650.00

Report Ref No. CC3/EQ118018230/K1pa3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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