

A member of COMFORTDELGRO

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

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

COMPANY REG. NO.: 199506048W

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD SPRINGLEAF TOWER

3 ANSON ROAD #16-00 SINGAPORE SG 079909

CONTACT NO: 62222366

VEHCLE NO SH 9329B

INV. NO/DATE 91401797 15.10.2018

MAKE HYUNDAI JOB NO. 305223764

MODEL I - 40

ODOMETER READING

DATE OF REG 17.03.2016

DATE/TIME IN 09.10.2018 14:35

CHASSIS CODE KMHT.B41UMGU085577

Items total

3,808.48

Add GST @

7.000 %

266.59

Invoice amount

4,075.07

CHEWBEELENG 15.10.2018 12:00:39

Issued by : CHEWBEELENG 15.7 Repair type : CLSO/57/57 Payment Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. **INVOICE No.** BANK/CHQ No. **AMOUNT** 4,075.07 8010012 91401797

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT18100253

Date: 15 October 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

09/10/2018 @ 10:50 hrs

ALONG

SIMS WAY X JUNCTION OF SIMS AVE

INVOLVING

GBH7281T

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 SH9329B (the "Taxi"). The Taxi was hired to GOH KWEE SENG IC NO S0362898A 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 **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.

DATE												
HOURS OPERATED (TIME)	FROM TO	1948 1948	06412142	0644 1912	458/ 4080	0704 208	07382242	06521916	06371802	0631	1438	1362
MILEAGE TRAVELLED (KM)		25H	274	216	192	314	194	326	187	7.	1329B	Ga
MILEAGE READING		12/850	258435	288651	258843	759152	259351	259677	7,28650		38	Keloni
	NAME OF DRIVER	K. C. Cod	Las	JV	7,1	714	11		1110			(Athaland
	DATE	1/10/18	2/10	3/10	7/12	0/10	7/10	7/10	0) 8	976	87 W 80	80,001

Enquire Vehicle Insurer

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

GBH7281T 09 Oct 2018 / 10:50:00 Successful

C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

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SH19378B