

100200

INS CASE OWNER:

CC 3 / CTI1801

A140, 42, 2639

LKK:
IDAC:

Surveyor:

Edwin

DOE:

ASSIGNMENT

10/10/18

Date / Time:

10/10/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GBG 4802m.

Claim No.:

GWM187000600

Name of Insured:

GUMMAN MERVON EBERKALYERNE

Policy No.:

DNCVSH1756141801

Insured Tel No.:

HP:

Make / Model:

TU40TA

Excess Sec II :SS

D.O.A.:

18/10/18

Place of Accident:

GERMANIA VN RO 2MS PRE

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: LUKA TIMA NIVE

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability:

Final ? Yes / No

SHA 8277R

INSRS:
WSP:
Tel:
Liability:
RMKS:WGE
mINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/Time	STAGE	DATE / PIC
31/10/18	Non-Reporting 1st (1st):	
	Non-Reporting 1st (2nd):	
	Non-Reporting 1st (Final):	
	Notification 1st (if non-pickup):	
	Call 01:	
	After call 1st to OI:	10/10/18 - vic
	Documentation Check List: Handler	Typist
	Notification 1st (if non-pickup)	
	After call 1st to OI:	
	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: 22/10/18 Sent By: BS

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: PP	SS 1,223.04	2 days) Reduction: 15 %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: 11/01/19	Confirm with: William	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.:	NIL	If NO or B 28, Ass. Lia:
Repair Cost: (W/Got)	SS 1,308.65		(OUIP CHARGED LANE)
Loss of Rental (LOR):	SS 230.00 (2 days) x \$115.00		TP VIDEO IN
Loss of Use (LOU):	SS 100.00 x 50 x 2 days)		
Loss of Income (LOI):	SS — (5 x days)		
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/TA Search	SS 7.49		
Medical:	SS —		1) Claim status: No / Reject/Private Settle
Disbursement:	SS — (e.g. Tow/ Independent)		2) Report Format:
Legal Cost	SS —		3) Survey fee: \$100.00
Total:	SS 1,646.14	Global Sum SS: 1,640.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	SS 1,640.00	Name 1: CONSTRUCTION ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	SS —	Name 2: —	
Payee 3: (Strike if N.A.)	SS —	Name 3: —	



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/CTI18019140/K1ub3	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909			Date : 22-10-2018	
			Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBG 4803M		Veh. Inspected	SHA 8277R
Policy No.			Coverage (\$)	0.00
Claim No.			Excess (\$)	0.00
Assign From			Assign Date	22/10/2018
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	18/10/2018		Inspection Date	19/10/2018
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.				



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/CTI18019140/K1ub3

Date: 22.10.2018

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

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHA8277R

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 19.10.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	1,453.04
Revised Estimate Amount	: S\$	1,223.04
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the
O/S Front portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

Team: ARC Repair TP(CFSO)1

JOB CARD

Sales Order:

JC NO.: 305227682

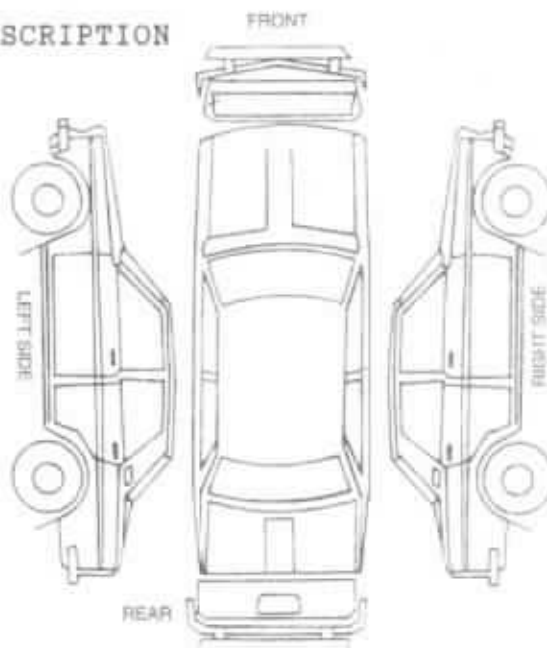
OMER	REGN NO.: SHA8277R	MILEAGE
IS CITYCAB PTE LTD	MAKE: HYUNDAI	FUEL
OMER NO. 7010070	MODEL I-40	E 1/2 F
ESS 383 SIN MING DRIVE	YR OF MANU. 25.08.2016	DATE/TIME IN 18.10.2018 14:55
Singapore SINGAPORE 575717	CHASSIS CODE KMHLB41UMGU093531	TARGET DATE
65551188 (R) (P)		COMPLETION DATE/TIME
JUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 18.10.2018
NATURE: 3P 18.10.18

S/NO LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Recognition Slip

Exit Pass

No.: SHA8277R LIMITS

Vehicle No.: SHA8277R

Signature/Date

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

China Taiping
LKK - Kalvin CP(P)

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010070
 ADDRESS : CITYCAB PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65551188

JOB NO : 305227682
 REGN NO : SHA8277R
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 25.08.2016
 DATE/TIME IN : 18.10.2018 14:55
 ACCIDENT DATE : 18.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0573-A FRONT FENDER RH

1 566.30 20.00 453.04

SUB-TOTAL : 453.04

JOB NATURE

0000 20-05 Frt Fender Adv.Sticker RH

100.00

0001 L PANEL BEATING

220.00

0002 23-502 SPRAYPAINT-Frt Bumper/W.Mirror RH

600.00

0003 17-01 WIRING CHECK

40.00

0004 20-00 TUFF COAT ON AFFECTED PARTS.

40.00

SUB-TOTAL : 1,000.00

TOTAL : 1,453.04

MVA NAME & SIGNATURE
 DATE :

SURVEYOR NAME & SIGNATURE

DATE :

Kalu 10/14

19/10/18 102.4

2 Pys.

P/P

Before P.4 P.4

AUTHORISED: YES/NO

- LKK Auto Consents hereto to be the Repairer of the following:
- To resurvey before/after spray painting
 - To display damaged part(s) during resurvey
 - Parts prices are subject to confirmation
 - Third party survey is on a "Without Prejudice" basis
 - No illegal modification(s) is allowed
 - Supplementary work must be resurveyed and is subject to prior approval from LKK Auto Consents

Acknowledged by: [Signature]
 Signature:
 Date:

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305227682

Date : 22/10/18

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHA8277R

Date of Accident : 18-Oct-18

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

1. The repair job shall bill to: CHINA TAIPING --- GBG4803M

2. The finalized amount shall be:

(a) Spare Parts after List discount \$453.04

(b) Labour Charges \$770.00

Total for Part-By-Part Repair Cost \$1,223.04

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20%

Final Lumpsum Repair cost

3. Estimated normal period for repairs: 2 working days.

4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**

5. 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 : 22/10/18

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

Remarks:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305227682
REGN NO : SHA8277R
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 25.08.2016
DATE/TIME IN : 18.10.2018 14:55
ACCIDENT DATE : 18.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0573-A FRONT FENDER RH 1 566.30 20.00 453.04

SUB-TOTAL : 453.04

JOB NATURE

0000 20-05 Frt Fender Adv.Sticker RH 100.00

0001 L PANEL BEATING 200.00

0002 23-502 SPRAYPAINT-Frt Bumper/W.Mirror RH 450.00

0003 17-01 WIRING CHECK 20.00

SUB-TOTAL : 770.00

TOTAL : 1,223.04



MVA NAME & SIGNATURE

DATE :

AUTHORISED : YES / NO

SURVEYOR NAME & SIGNATURE

DATE :

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010070
 ADDRESS : CITYCAB PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65551188

JOB NO : 305227682
 REGN NO : SHA8277R
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 25.08.2016
 DATE/TIME IN : 18.10.2018 14:55
 ACCIDENT DATE : 18.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0573-A FRONT FENDER RH 1 566.30 20.00 453.04

SUB-TOTAL : 453.04

JOB NATURE

0000 20-05 Frt Fender Adv.Sticker RH 100.00
 0001 L PANEL BEATING 220.00
 0002 23-502 SPRAYPAINT-Frt Bumper/W.Mirror RH 600.00
 0003 17-01 WIRING CHECK 40.00
 0004 20-00 TUFF COAT ON AFFECTED PARTS. 40.00

SUB-TOTAL : 1,000.00

TOTAL : 1,453.04

MVA NAME & SIGNATURE
 DATE:

SURVEYOR NAME & SIGNATURE

DATE:

Kalvin 10/14
 19/10/18 102.4.
 2 Dps.
 PIP
 Before Rep pld

AUTHORISED - YES / NO

• To resurvey the damaged vehicle
 the Reparer of the following:

- To resurvey the damaged vehicle
- To display damaged vehicle during resurvey
- Parts prices must be approved by the Reparer
- Third party survey is on a "without prejudice" basis
- No illegal modification is allowed
- Supplementary items must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Reparer

Signature:

Date:

Our Ref : CC18100586/SHA8277R/WT(st)
Your Ref :
Date : 30-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: 1995060220

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 758158

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

CHINA TAIPING INSURANCE CO LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Attn : Motor Claims Department
Dear Sir

WITHOUT PREJUDICE

ACCIDENT INVOLVING OUR TAXI SHA8277R YOUR INSURED GBG4803M
AND OTHER _____ ON 18.10.18

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No :
SHA8277R 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 : GBG4803M
we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,308.65
2	3 days Loss of Rental @ \$ 115.00 per day	\$ 345.00
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 :		\$ 1,661.14

HIRER'S CLAIM

7	3 days Loss of Income @ \$ 80.00 per days	\$ 240.00
Total Claims :		\$ 1,901.14

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 : GBG4803M
c) GIA / Police report/s of : SHA8277R
d) Letter of authority from owner / hirer / operator
(X) Photocopies of Accident Scene Photos () Certificate of Insurance
() Witness statement/s (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

CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1843 Email : williamtan@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/CTI18019140/K1hb3

10 APRIL 2019

SUNWAY AIRCON ELECTRICAL SERVICES
BLOCK 1003 TOA PAYOH INDUSTRIAL PARK
#01-1517
SINGAPORE 319075
ATTN: THE MANAGEMENT

By Post and By Email

Dear Sir/Madam,

ACCIDENT INVOLVING GBG 4803M AND SHA 8277R ON 18/10/2018

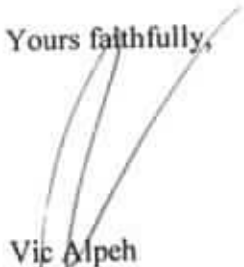
We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report, accident scenario and evidence at hand, 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,


Vic Alpeh
DID: 6841 2096
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd*
(Motor Claims Dept)
sunwayac@singnet.com.sg / johnsoncth@gmail.com
(Email)

Vic (LKKAUTO)

From: Vic (LKKAUTO)
Sent: Wednesday, 10 April, 2019 5:33 PM
To: sunwayac@singnet.com.sg
Cc: johnsoncth@gmail.com; Admin A; Vic (LKKAUTO)
Subject: Your Ref: GBG 4803M_ACCIDENT INVOLVING GBG 4803M AND SHA 8277R ON 18/10/2018



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/CTI18019140/K1hb3

10 APRIL 2019

SUNWAY AIRCON ELECTRICAL SERVICES
BLOCK 1003 TOA PAYOH INDUSTRIAL PARK
#01-1517
SINGAPORE 319075
ATTN: THE MANAGEMENT

By Post and By Email

Dear Sir/Madam,

ACCIDENT INVOLVING GBG 4803M AND SHA 8277R ON 18/10/2018

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, accident scenario and evidence at hand, 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.

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

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



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

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LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****I 40 SHA8277R , GBG4803M
SERANGOON RD TOWARDS PIE****ON 18-Oct-18 14:10**

I / We

LOH SOON LEONG(Hirer) NRIC No.: **S1455062C**

and/or

(Relief) NRIC No.:

Taxi Number

SHA8277R

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

18-Oct-2018

Name of Hirer

LOH SOON LEONG

Hirer NRIC

S1455062C

Signature :



Address

**467 NORTH BRIDGE ROAD #10-5051
190467**

Contact No.

91882179

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1756141801 Claim No : SNM18D05005C02
 Claimant : CITYCAR PTE LTD
 Amount : S\$1,640.00
 SINGAPORE DOLLARS ONE THOUSAND SIX HUNDRED FORTY 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. : SHA 8277R
 Insured Vehicle No. : GBG 4803M

Date of Loss : 16/10/2018
 Place of Accident : SERANGOON ROAD TOWARDS PIE

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 : SUNWAY AIR-CON ELECTRICAL SERVICES
 Driver Name : CHUA TIAU HOE

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 (all in) S\$ 1,640.00

TOTAL S\$ 1,640.00

CLAIM DEPARTMENT
 COMFORTDELGRO ENGINEERING PTE LTD
 50 LOWAG DRIVE
 SINGAPORE 545053
 Claimant Name : _____ NRIC No : _____

Signature :  Date : 11-4-19

*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

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 1

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA8277R

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
25.08.2016

CHASSIS CODE
KMHLB41UMGU093531

INV. NO/DATE
91403636 24.10.2018

JOB NO.
305227682

ODOMETER READING

DATE/TIME IN
18.10.2018 14:55

Description : 3P 18.10.18

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

0001	04-01-0103-0573	FRONT FENDER RH	1	566.30	20.00	453.04
SUB-TOTAL			:			453.04

JOB NATURE

0001	20-05	Frt Fender Adv.Sticker RH	100.00	100.00
0002	L	PANEL BEATING	200.00	200.00
0003	23-502	SPRAYPAINT-Frt Bumper/W.Mirror RH	450.00	450.00
0004	17-01	WIRING CHECK	20.00	20.00
SUB-TOTAL			:	770.00

ComfortDelGro Engineering Pte Ltd
member of COMFORTDELGRO

Head Office:
5 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
8010012	91403636	1,308.65	

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA8277RMAKE
HYUNDAIMODEL
I-40DATE OF REG
25.08.2016CHASSIS CODE
KMHLB41UMGU093531INV. NO/DATE
91403636 24.10.2018JOB NO.
305227682

ODOMETER READING

DATE/TIME IN
18.10.2018 14:55

Items total		1,223.04
Add GST @	7.000 %	85.61
Invoice amount		1,308.65

Issued by : CHEWBEELENG 24.10.2018 14:56:26
Repair type : CFSO/57/57
Payment Type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd
member of COMFORTDELGROHead Office:
5 Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHO No
8010012	91403636	1,308.65	

Our Ref: CC18100586



Date: 24 October 2018

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	18/10/2018 @ 14:10 hrs
ALONG	SERANGOON RD TOWARDS PIE
INVOLVING	GBG4803M

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA8277R** (the "Taxi"). The Taxi was hired to **LOH SOON LEONG IC NO S1455062C** a registered hirer-operator of **CityCab 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.

SH8277R

NAME OF DRIVER

DATE

16/10/18 KC Net
 17/10/18 Wh
 17/10/18 QNG
 18/10/18 Wh
 18/10 Accident
 20/10 repair

HOURS OPERATED (11)

DATE

NAM

MILEAGE TRAVELLED (KM)

MILEAGE READING

295

FROM

TO

1705 043
 500 1800
 1730 431
 525 154
 1455
 1100

277

278

273

277

In

614

Enquire Vehicle Insurer

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

GBG4803M 18 Oct 2018 / 14:10:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

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

SHA8277R

Vic (LKKAUTO)

From: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Sent: Wednesday, 10 April, 2019 5:39 PM
To: Vic (LKKAUTO); Admin A
Cc: Ong Chin Kiat; Alfred Toh; Hsiao Tong (LKKAUTO); sunwayac@singnet.com.sg; skylinkinsurance@gmail.com
Subject: Direct Settlement - Accident Involving GBG4803M (Our Ref: SNM18D05005C02) and SHA8277R (TP : LKK REF - CC3/CTI18019140/K1hb3) on 18.10.2018
Attachments: SHA8277R doa 18.10.18.mov; MLHM18139064-GBG4803M.pdf

LKK REF - CC3/CTI18019140/K1hb3
CTI REF - SNM18D05005C02/3 (GBG4803M)

Dear Vic

We refer to your email pertaining to the above matter.

You may proceed to negotiate the third party property damage claim at best possible terms.

Aside to Chin Kiat, please keep track on the matter.

Best Regards

Alfred Toh
Senior Executive
Claims Department
China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #XX-00 Springleaf Tower Singapore 079909
DID : (65) 6389 6183
FAX: (65) 6224 7478
W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平獅城 Taiping SG

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From: Vic (LKKAUTO) [mailto:vicalpeh@lkkauto.com]
Sent: Wednesday, 10 April, 2019 4:50 PM
To: Ong Chin Kiat <chinkiat.ong@sg.cntaiping.com>
Cc: Admin A <admin-a@lkkauto.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>; Vic (LKKAUTO) <vicalpeh@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving GBG4803M (Our Ref: SNM18D05005C02) and SHA8277R (TP : LKK REF - CC3/CTI18019140/K1hb3) on 18.10.2018

Dear Chin Kiat,

We refer to your below email.

Please be informed that TP has provided to us a copy of the video footage (see attached).

Based on the footage, it was observed that TP vehicle was within lane when Insured vehicle slowly encroached into TP's lane which resulted to this collision.

As such, liability is not to our Insured's favour.



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/CTI18019140/K1hb3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 19-06-2019



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBG 4803M	Veh. Inspected	SHA 8277R
Policy No.	DMCVSN1756141801	Coverage (\$)	0.00
Claim No.	SNM18D05005C02	Excess (\$)	0.00
Assign From		Assign Date	19/10/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU093531	Colour	YELLOW
Odometer	405425	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 O/S FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	18/10/2018	Inspection Date	19/10/2018
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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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 8277R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT FENDER RH	DENTED	566.30	566.30
	LESS 20% DISCOUNT		-113.26	-113.26
			453.04	453.04
<u>SPECIAL NETT ITEMS</u>				
1	FRT FENDER ADV.STICKER RH (SN)	NECESSARY	100.00	100.00
			100.00	100.00
<u>LABOUR</u>				
	PANEL BEATING.		220.00	200.00
	SPRAYPAINT-FRT BUMPER /W.MIRROR RH		600.00	450.00
	WIRING CHECK.		40.00	20.00
	TUFF COAT ON AFFECTED PARTS.	NOT NECESSARY	40.00	-
			900.00	670.00
GRAND TOTAL			1,453.04	1,223.04
RECOMMENDED COST OF REPAIRS				1,223.04

Report Ref No. CC3/CT118019140/K1hb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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