

05/2018

INS. CASE OWNER:

Lyntua

CCY / AXA1801

AGM. 9405, 25, KLJ 1639

LKK IDAC

Surveyor:

Kalvin

DOI:

ASSIGNMENT

24/10/18

Date / Time:

25/10/18

Registered in Meritum:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJT 7771M

Claim No.:

Ssmou zhu / 7771M

Name of Insured:

LEE LEONG HUAT

Policy No.:

6AD07878

Insured Tel No.:

HP:

Make / Model:

BMW

Excess Sec II :SS

D.O.A.:

13/10/18

Place of Accident:

Sungei Besi

Is driver the owner? (YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability:

Final ? Yes / No

SH 6747E



INSRS: WSP: Tel: Liability: RMKS:

LDTE WJ



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/Time

20/10/18
11M

SH 6747E - X

SJT 7771M - X

STAGE

DATE / PIC

Non-Reporting Itr (1st):

Non-Reporting Itr (2nd):

Non-Reporting Itr (Final):

Notification Itr (if non-pickup):

Call OI:

JOY 9-1-19

After call Itr to OI:

Documentation Check List: Handler Typist

Notification Itr (if non-pickup)

X

After call Itr to OI

X

Authorisation To Act:

X

Release Voucher:

X

Final Repair Bill:

X

Car Rental Invoice:

X

Towing Invoice:

X

LTA / GIA:

X

Medical Bill:

X

PIR:

X

Mandate/Reject Instruction:

X

LOD

X

Payment Breakdown Form:

X

Post-Repair Photos:

X

Others:

X

28-11-18

TRANSFER: THINK TO JOY

7-12-18

EM CODE FOR VIDEO.

9-1-19 @ 330

CALLED OI 4X. HE SAID WRONG X. SJT NOT HIS VEH.

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

SS

100

(Agreed / Assessed) BOLA S/N No.:

15

Repair Cost:

SS

1,084.21

Loss of Rental (LOR):

SS

313.50

(25 days)

125.40

TP VIDEO

Loss of Use (LOU):

SS

5

(5 days)

Loss of Income (LOI):

SS

125

(530 x 2 days)

LOR only

LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

SS

7.49

Medical:

SS

Disbursement:

SS

(e.g. Tow/Independent)

Legal Cost:

SS

Total:

SS

1,530.20

Global Sum SS:

1,530

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

1,530.20

Name 1:

COMFORTDELGRO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

SS

Name 2:

X

Payee 3: (Strike if N.A.)

SS

Name 3:

X

TP VIDEO WITH SHARDED LANE

ASSIGNMENT

From: _____ Date: 24/02/18

Estimated Cost: _____

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

To Inspect Vehicle No: SH 6742K

at Workshop n/s: Comfort Drive

of: 59 Layang Drive

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: SH 6742K Yr Regn: 23 Aug 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / T 0 / Prime Mover /

Truck / Trailer or _____

Make: Toyota Prius c.c. 1798

Colour: Blue A/C: Insured 6 / Std / NI / NA

Sp. Reading: 179835 T/Radio: Insured 0 / Std / NI / NA

Eng/No: _____

C/No: JTDKBJFY103563409

Gen. Cond: Good / Fair 6 / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

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

Modi: Nil / S/Rim / STD 6 Rim or _____

Tyre Size F: 195/65R15

R: _____

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

TOYO / YOKO or Dava ti

Front	Rear
R/Bal. 7 mm	R/Bal. 7 mm
L/Bal. 7 mm	L/Bal. 7 mm
D.O.A. 27/10/18 13/10/18	D.O.I. 24/10/18
Survey held at	CPE (Layang)

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

o/s Rear

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

(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. Repairs: 2 days Res: Yes or No

Lum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time	Action / Instruction
31-10-18	1013.28
	IN 23 - 11am 5
	OUT 24 - out 1
	OUT 25 - 1330 2
	R (\$ 688.88 / 40%)

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: _____

Survey Fee: _____

Transportation: _____

3) S + RE: \$ _____

4) Photos _____

5) Other _____

6) _____

7) _____

8) _____

9) _____

TOTAL _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)



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			
AXA INSURANCE PTE LTD		Ref : CC4/ASM18019425/K1ub3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date : 25-10-2018	
		Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJT 7771M	Veh. Inspected	SH 6742K
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	25/10/2018
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	13/10/2018	Inspection Date	24/10/2018
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.			

Member of COMFORTDELGRO

Date/Time: 23.10.2018 13:57 Page : 1

Team: ARC Repair TP(CLSO)1 **JOB CARD** Sales Order: JC NO.: 305229511

TOMER MS COMFORT TRANSPORTATION PTE LTD TOMER NO 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (Q) (P)	REGN NO.:	SH 6742K	MILEAGE
	MAKE:	TOYOTA	FUEL E _____ 1/2 _____ F
	MODEL:	PRIUS HYBRID(G4)	DATE/TIME IN 23.10.2018 11:00
	YR OF MANU:	23.08.2017	TARGET DATE
	CHASSIS CODE:	JTDKB3FU103563409	COMPLETION DATE/TIME:

AXA

OUNT CARD NO.

JOB DESCRIPTION

Accident Date: 13.10.2018
 NATURE: 3P 13.10.2018

S/NO	LABOR CODE	DESCRIPTION

CKED & PASSED OUT BY: _____

 SERVICE ADVISOR CUSTOMER'S SIGNATURE

acknowledgment Slip
 No. SH 6742K LKE

 of Service Advisor Signature/Date
 returned to Service Reception upon collection

Exit Pass
 Vehicle No. SH 6742K

 Name of Service Advisor Date
 To be kept by Security Guard

COMFORTDELGRO ENGINEERING

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

Our Job Ref No 305229511
Date : 30/10/18

FINALIZATION FORM

To : LKK Fax : _____
Attn : Mr KALVIN ANG
Vehicle Reg No. SH 6742K CTPL 13.10.18

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

1. The repair job shall bill to: AXA -- SJT7771M
2. The finalized amount shall be:

(a) Spare Parts after List discount	<u>\$213.28</u>
(b) Labour Charges	<u>\$800.00</u>
Total for Part-By-Part Repair Cost	<u>\$1,013.28</u>
(c.) Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: <u>20%</u>	_____
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 KWOK ENG
Tel : 62148316
Fax : 65468156

Signature : 
Name : Kalvin
Date : 31/10/18

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:

Final Amount Subject to Insurer Approval

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305229511
 REGN NO : SH 6742K
 MILEAGE : 0000000000
 MAKE : TOYOTA
 MODEL : PRIUS HYBRID(G4)
 DATE OF REGN : 23.08.2017
 DATE/TIME IN : 23.10.2018 11:00
 ACCIDENT DATE : 13.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 28-01-0103-2013-A I40V3 APP LOGO REAR DOOR 1 N 80.00 0.00 80.00

0002 03-01-0302-2057-G PRIG4 CAP WHEEL 1 L 177.70 25.00 133.27

SUB-TOTAL : 213.27

JOB NATURE

0000 L PANEL BEATING 200.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 600.00

SUB-TOTAL : 800.00

TOTAL : 1,013.27

AUTHORISED : YES / NO

MVA NAME & SIGNATURE

SURVEYOR NAME & SIGNATURE

DATE :

DATE :

REPAIR ESTIMATE

VEHICLE NO : SH 6742K

23/10/2018 14:36

MAKE :

Lice

PbyP

MODEL : TOYOTA PRIUS

AXA

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
REAR WHEEL HUB CAP ,RH <i>housed</i>			\$ 177.70
<i>Rear Bumper x repair</i>			
<i>Rear Fender (RH) x repair</i>			
<i>Rear Door (RH) x repair</i>			
SUB TOTAL			\$ 177.70
LESS 20%			\$ 35.54
DISCOUNTED TOTAL			\$ 142.16
REAR BUMPER RUBBER MAT <i>X</i>			\$ 50.00
REAR DOOR COMFORT & APPS STICKER, RH <i>---</i>			\$ 80.00
			\$ 130.00
LABOUR CHARGE			
Panel Beating-Repair Rear Fender			\$ 400.00 ²⁰⁰
Spray Painting Charge			\$ 600 ^{900.00}
Tuff Kote			\$ 100 ^{50.00}
Rear Wheel Alignment			\$ 100 ^{80.00}
TOTAL LABOUR			\$ 1,430.00
ESTIMATE TOTAL			\$ 1,702.16

Kalvin (UKH)
24/10/18 1120hrs
2 Pys
PIP
After Repair photo

LKK Auto Consultants hereby notify the Repairer of the following:

- To remedy below after fully parking
- To display damaged parts during survey
- Parts prices are subject to confirmation
- Third party survey is on a "no prejudice" basis
- No illegal modifications allowed
- Supplementary work must be surveyed and is subject to final 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.

REPAIR ESTIMATE

VEHICLE NO : SH 6742K

23/10/2018 14:36

MAKE :

MODEL : TOYOTA PRIUS

PbyP

Lice

AXA

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
REAR WHEEL HUB CAP ,RH ✓			\$ 177.70
<i>Rev Bumper x rpr</i> <i>Rev Fender (RH) x rpr</i> <i>Rear Door (RH) x rpr</i>			
SUB TOTAL			\$ 177.70
LESS 20%			\$ 35.54
DISCOUNTED TOTAL			\$ 142.16
REAR BUMPER RUBBER MAT X			\$ 50.00
REAR DOOR COMFORT & APPS STICKER, RH ✓			\$ 80.00
			\$ 130.00
LABOUR CHARGE			
Panel Beating-Repair Rear Fender			\$ 400.00 ²⁰⁰
Spray Painting Charge			\$ 900.00 ⁶⁰⁰
Tuff Kote			\$ 50.00
Rear Wheel Alignment			\$ 80.00
TOTAL LABOUR			\$ 1,430.00
ESTIMATE TOTAL			\$ 1,702.16

Ko Lin (LKK)
 24/10/18 1120hrs
 2 Dy,
 PIP
 After Repair photo

LKK Auto Centre (Pty) Ltd
 the Repairer of this vehicle
 • To resolve any disputes arising during resurvey
 • To display original copies during resurvey
 • Parts prices are subject to market fluctuation
 • Third party liability is on a "Without Prejudice" basis
 • No illegal modifications is allowed
 • Supplementary claims must be resurveyed and is subject to final 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.

Our Ref : T 1018/ SH 6742K /WT(st)

Your Ref :

Date : 12-Nov-18

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508989

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198800499

AXA Insurance Pte Ltd
8 Shenton Way
#24-01, AXA Tower
Singapore 068811

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SH 6742K YOUR INSURED SJT7771M
AND OTHER _____ ON 13.10.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SH 6742K 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 : SJT7771M we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair		\$	1,084.21
2	<u>3</u> days Loss of Rental @	\$	125.40	per day
3	Survey Report Fees	(Surveyed by M/s LKK)	\$	-
4	GIA / LTA Search Fee		\$	7.49
5	GIA / Police Report Fees		\$	-
6	Towing Fees		\$	-
				Sub Total :
				\$ 1,467.90

HIRER'S CLAIM

7	<u>3</u> days Loss of Income @	\$	80.00	per days	\$	240.00
						Total Claims:
						\$ 1,707.90

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

- a) Original repair bill and photocopies of photographs 5 pcs
- b) LTA search slip/s of : SJT7771M
- c) GIA / Police report/s of : SH 6742K
- d) Letter of authority from owner / hirer / operator
 - () Photocopies of Accident Scene Photo/s () Traffic Compound () PIR
 - () Witness statement/s (x) Rental Rate letter (x) Downtime/Mileage record

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.

Workshops

Braddell
205 Braddell Road
Singapore 579701

Loyang
59 Loyang Drive
Singapore 508989

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
Yishun Industrial Park A
Singapore 768732



09 January 2019

TEE LEONG HUAT
BLK 124 SIMEI ST. 1
#06-350
SINGAPORE 520124

Dear Sir/Madam,

OUR REF : CC4/ASM18019425/K1jb3
YOUR REF : SJT 7771M

ACCIDENT INVOLVING SJT 7771M AND SH 6742K ALONG SIMEI AVE ON 13.10.2018

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

We have received a claim from M/s COMFORTDELGRO ENGINEERING PTE LTD, acting on behalf of the owner of SH 6742K against your motor insurance policy.

Based on the accident report and video of the accident scenario, it was observed that your vehicle had changed lane hitting Third Party vehicle which was travelling straight. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to joyirene@lkkauto.com within 10 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (if any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)



Auto
Consultants
Pte Ltd

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

- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

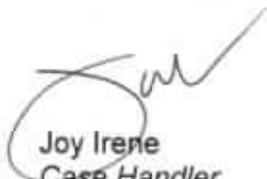
This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6256 3561 or email us at joyirene@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Joy Irene
Case Handler
DID: 6841 2409
FAX: 6741 4108
Email: joyirene@lkkauto.com

c.c. AXA Insurance Singapore Pte Ltd (AXA)
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING **TOYOTA PRIUS SH6742K , SJT7771M** **ON 13-Oct-18 18:30**
ALONG **SIMEI AVE TWDS PIE B4 UPP CHANGI RD JUNCTION**

I / We **LAU PENG KHOON** (Hirer) NRIC No.: **S0060886F**

and/or **LIM BENG YAT** (Relief) NRIC No.: **S0988730Z**

Taxi Number **SH6742K**

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-Oct-2018**

Name of Hirer **LAU PENG KHOON**
 Hirer NRIC **S0060886F**

Signature :



Address **132 SIMEI STREET 1 #03-130**
520132

Contact No. **96383393**

Name of Relief **LIM BENG YAT**
 Relief NRIC **S0988730Z**

Signature :



Address **855 TAMPINES ST 83 #04-246**
520855

Contact No. **83717382**



redefining / insurance



CLAIM REF : S8M00ZHQ
INSURED : TEE LEONG HUAT

DISCHARGE VOUCHER

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated **15 OCT 2018**, we are authorised to and do hereby give this discharge for ourselves and on behalf of **Comfort Transportation Pte Ltd** and the Hirer **LAU PENG KHOON** of vehicle no. **SH 6742K**

Now we **ComfortDelgro Engineering Pte Ltd** for ourselves and the said Hirer and the driver jointly and severally:-

- a) agree to accept the sum of Singapore Dollars **ONE THOUSAND FIVE HUNDRED THIRTY ONLY (S\$1,530.00)** in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(SJT 7771M)** arising out of an accident with **(SH 6742K)** on **13.10.2018**.
- b) declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(SJT 7771M)** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- c) We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of **ComfortDelgro Engineering Pte Ltd** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **(SJT 7771M)**.

Dated this 16 day of January 2019

Signed by [Signature]
(AUTHORISED SIGNATORY)

Company Stamp [Stamp]
SILONG DRIVE
SINGAPORE 30868

Witness : _____
Name : CLAIMS DEPARTMENT
I/C No : _____
Address : SILONG DRIVE
SINGAPORE 30868

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

*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*

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
 Page: 1

8010010
 AXA INSURANCE PTE LTD
 8 SHENTON WAY AXA TOWER #24-01
 SINGAPORE SG 068811
 CONTACT NO: 63387288

VEHICLE NO
SH 6742K

INV. NO/DATE
91405191 31.10.2018

MAKE
TOYOTA

JOB NO.
305229511

MODEL
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG
23.08.2017

DATE/TIME IN
23.10.2018 11:00

CHASSIS CODE
JTDKB3FU103563409

Description : 3P 13.10.2018

S/No	Part No.	Qty	Unit Price	%Disc	Net
PART REQUISITION					
0001	28-01-0103-2013 I40V3 APP LOGO REAR DOOR	1	80.00	0.00	80.00
0002	03-01-0302-2057 PRIG4 CAP WHEEL	1	177.71	25.00	133.28
SUB-TOTAL :					213.28

JOB NATURE					
0001	L	PANEL BEATING	200.00		200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	600.00		600.00
SUB-TOTAL :					800.00

I HEREBY TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARE OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND KEPT AT OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL, WITHIN 7 DAYS FROM DATE OF 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 ADDITION TO ANY PENALTY FOR DELAYED PAYMENT TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DATE (DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.

PLEASE EXAMINE THE 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.
8010010	91405191	1,084.21	

Workshops

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO. : 199506048W
 Page: 2

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
 SINGAPORE SG 068811

CONTACT NO: 63387288

VEHICLE NO
 SH 6742K

MAKE
 TOYOTA

MODEL
 PRIUS HYBRID(G4)

DATE OF REG
 23.08.2017

CHASSIS CODE
 JTDKB3FU103563409

INV. NO/DATE
 91405191 31.10.2018

JOB NO.
 305229511

ODOMETER READING

DATE/TIME IN
 23.10.2018 11:00

Items total		1,013.28
Add GST @	7.000 %	70.93
Invoice amount		1,084.21

Issued by : CHEWBEELING 01.11.2018 11:07:05
 Repair type : CLS0/57/57
 Payment Type/Term: /Credit 30 days

WE WILL TAKE ALL RESPONSIBLE PRECAUTIONS AGAINST THE THEFT OR ACCIDENTAL DAMAGE THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND VEHICLE OWNERS' RISK.
 CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY TIME NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE THE VEHICLES WILL BE DEEMED TO HAVE BEEN RECEIVED IN GOOD ORDER.
 INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY DELINQUENT PAYMENTS TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT I.E AFTER 30 DAYS FROM THE MONTH END THE PERIOD OF DEFAULT.
 PLEASE EXAMINE THE 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/CHO No.
8010010	91405191	1,084.21	

Our Ref: CT18100461

Date: 01 November 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 13/10/2018 @ 18:30 hrs
ALONG SIMEI AVE TWDS PIE B4 UPP CHANGI RD JUNCTION
INVOLVING SJT7771M

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 **SH6742K** (the "Taxi"). The Taxi was hired to **LAU PENG KHOON IC NO S0060886F** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.40** 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.

23/10 grand 0 179835 1km

MILEAGE TRAVELLED (KM)	NAME OF DRIVER	DATE	MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
			FROM	TO		FROM	TO
182	SH6742K	21/10	179448	205730	205	730	330
170	Lim	21/10	179608	160	0820	1615	
276	Lim (no reg)	22/10	179830	222	718	340	
237	Accident	23/10/18	Down	Kayang	1100	—	
266	Repair	25/10/18	Daylong	Down	—	1530	

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO
182	1130	1610
170	730	330
276	0600	1650
237	1750	125
266	0600	1630
255	0600	1645
244	730	350
239	0600	1600
200	630	250
317	0630	1750



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			
AXA INSURANCE PTE LTD		Ref : CC4/ASM18019425/K1jb3q2	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:CYNTHIA LOH		Date : 28-01-2019	
		Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJT 7771M	Veh. Inspected	SH 6742K
Policy No.	GA037878	Coverage (\$)	0.00
Claim No.	S8M00ZHQ	Excess (\$)	0.00
Assign From		Assign Date	24/10/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU103563409	Colour	BLUE
Odometer	179835	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	DAVANTI	7 mm
L/H Front Tyre	195/65 R15	DAVANTI	7 mm
R/H Rear Tyre	195/65 R15	DAVANTI	7 mm
L/H Rear Tyre	195/65 R15	DAVANTI	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	13/10/2018	Inspection Date	24/10/2018
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. SH 6742K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR WHEEL HUB CAP ,RH (CONSISTENT)	GRAZED	177.70	177.70
1	REAR BUMPER (NPA)(CONSISTENT)	TO REPAIR SEE LABOUR	-	-
1	REAR FENDER (RH) (NPA)(CONSISTENT)	TO REPAIR SEE LABOUR	-	-
1	REAR DOOR (RH) (NPA)(CONSISTENT)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-35.54	-
	LESS 25% DISCOUNT		-	-44.42
			142.16	133.28
SPECIAL NETT ITEMS				
1	REAR BUMPER RUBBER MAT (SN) (CONSISTENT)	NOT NECESSARY	50.00	-
1	REAR DOOR COMFORT & APPS STICKER ,RH (SN) (CONSISTENT)	NECESSARY	80.00	80.00
			130.00	80.00
LABOUR				
	PANEL BEATING -REPAIR REAR FENDER.INCLUSIVE OF THE REPAIR OF REAR BUMPER,REAR FENDER (RH) AND REAR DOOR (RH).		400.00	200.00
	SPRAY PAINTING CHARGE.		900.00	600.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REAR WHEEL ALIGNMENT .	NOT NECESSARY	80.00	-
			1,430.00	800.00
GRAND TOTAL			1,702.16	1,013.28
RECOMMENDED COST OF REPAIRS				1,013.28

Report Ref No. CC4/ASM18019425/K1jb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Service Request Details

Claim	56H002HQ
Reference	CC1/AS3M18019425/R1B3q2
Loss Date	13 October 2018
Request Date	23 October 2018
Due Date	
Vendor Name	LKK AUTO CONSULTANTS PTE LTD (ITP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions

Next Step: Wait for Approve invoice

Add Process

Vehicle Information	
Incident Vehicle Registration #	5H46742K
Make	TM20 TOYOTA
Model	PRUIS
Service Address	

Primary Contact/Insured

TEE LEONG HUAT
 BLK 124 SIMEI STREET 1, #06-350, S20124, Singapore
 82288082

Claim Handler

LOH Cynthia
 656804843
 cynthia.loh@axa.com.sg

Additional Instructions

Messages Invoices History Documents Assessment Metrics Notes

Document Type

[Upload Documents](#)

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
LKKInvoice 1 (2).pdf	Invoice	Surveyor/ Assessor expense	LKK AUTO CONSULTANTS PTE LTD (ITP)	28 January 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
RENTAL RECEIPT.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
RENTAL MILEAGE.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
payment breakdown.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LTA SEARCH.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LOD.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LKK Inspection (1).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LKK Adjustment (a) (2).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LKK PHOTO-2.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LKK PHOTO.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
DISCHARGE VOUCHER.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
AUTHORISATION TO ACT FOIRM.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
WORKSHOP INVOICE.pdf	Invoice	Repairer	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
LETTER TO OI.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	28 January 2019
TP VIDEO.mp4	Evidence	Videos	LKK AUTO CONSULTANTS PTE LTD (TP)	9 January 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 TP ESTIMATE- MARKED.pdf	Reports & Statement	Estimate / Quotation	LKK AUTO CONSULTANTS PTE LTD (TP)	26 October 2018
 S1T7771M 060 GIA.PDF	Reports & Statement	GIA Report	RATAN BHOSALE Pragal	23 October 2018
 EMAIL RECEIVED FROM WORKSHOP WITH TP GIA REPORT.png	Letters and Correspondence	Workshop	RATAN BHOSALE Pragal	23 October 2018