

Poh Kin (LKKAUTO)

From: ONG LI LI <llong@lonpac.com>
Sent: Monday, 25 February 2019 5:56 PM
To: Poh Kin (LKKAUTO)
Cc: MT_Claim_SG; Admin A
Subject: RE: SEEK MANDATE; ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. GBC 833Z (OI) AND SHA 1690B (TP) ON 25-10-2018; LKK ref : CC4/LPC18019615/Gfa3; Lonpac ref: 18/18/18/VC00/021062 [External Confidential]

Lonpac External - Confidential

Dear Poh Kin

Pls proceed.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.

From: Poh Kin (LKKAUTO) [mailto:pohkin@lkkauto.com]
Sent: Saturday, 23 February, 2019 10:08 AM
To: ONG LI LI
Cc: MT_Claim_SG; Admin A
Subject: SEEK MANDATE; ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. GBC 833Z (OI) AND SHA 1690B (TP) ON 25-10-2018; LKK ref : CC4/LPC18019615/Gfa3; Lonpac ref: 18/18/18/VC00/021062
Importance: High

Without Prejudice

Our Ref: CC4/LPC18019615/Gfa3
Your Ref: 18/18/18/VC00/021062

Dear Ms Li Li,

ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. GBC 833Z (OI) AND SHA 1690B (TP) ALONG GEYLANG ROAD ON 25/10/2018

We refer to the above matter.

Liability: The accident occurred when our Insured Driver collided into rear of third party vehicle. Liability is down against our Insured.

Summary to offer to third party repairer, ComfortDelgro Engineering Pte Ltd is as follows: -

	Claimed Amount	Revised Amount
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Attachments: LKK Adjustment report.pdf; LKK Inspection report.pdf; LKK RESURVEY PHOTO.pdf; LKK RESURVEY PHOTO-AFTER REPAIR.pdf; LKK SURVEY PHOTO.pdf; TP LOD_SHA 1690B.pdf
Importance: High

Without Prejudice

Our Ref: CC4/LPC18019615/Gfa3
Your Ref: 18/18/18/VC00/021062

Dear Ms Li Li,

ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NOS. GBC 833Z (OI) AND SHA 1690B (TP) ALONG GEYLANG ROAD ON 25/10/2018

We refer to the above matter.

Liability: The accident occurred when our Insured Driver collided into rear of third party vehicle. Liability is down against our Insured.

Summary to offer to third party repairer, ComfortDelgro Engineering Pte Ltd is as follows: -

	Claimed Amount	Revised Amount
1. Cost of Repair (w/GST)	\$ 6,845.54 (\$6,397.70 + 7%gst)	\$ 4,868.50 (\$4,550.00 + 7% gst)
2. Loss of Rental	\$ 586.40 (\$117.28 x 5 days)	\$ 527.76 (\$117.28 x 4.5 days)
3. Loss of Income	\$ 400.00 (\$80.00 x 5 days)	\$ 225.00 (\$50.00 x 4.5 days)
4. LTA search fee	\$ 7.49	\$ 7.49
Total	\$ 7,839.43	\$ 5,628.75

****05 days recommendation for repair**

Relevant supporting claim documents are attached herewith for your perusal and reference.

The above is for your approval.

COMFORTDELGRO ENGINEERING

Our Ref : T 1018/ SHA1690B /KS(st)
Your Ref :
Date : 09-Nov-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: 199506048W

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
11 Yishun Industrial Park A
Singapore 768732

Lonpac Insurance Bhd
300 Beach Road
#17-04 / 07, The Concourse
Singapore 199555

Attn : Motor Claim Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA1690B YOUR INSURED GBC 833Z AND OTHER _____ ON 25.10.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA1690B 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 : GBC 833Z we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 4,868.50
2	5 days Loss of Rental @ \$ 117.28 per day	\$ 586.40
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 :		\$ 5,462.39

HIRER'S CLAIM

7	5 days Loss of Income @ \$ 80.00 per days	\$ 400.00
Total Claims:		\$ 5,862.39

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

- a) Original repair bill and photocopies of photographs : 7 pcs.
- b) LTA search slip/s of : GBC 833Z
- c) GIA / Police report/s of : SHA1690B
- 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
Kazali Hj Selahudin
CDGE Taxi Claims Department
Tel : 6214 8736 Fax: 6214 1843 Email: kazali@cdge.com.sg

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

A member of

COMFORTDELGRO



LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA1690B , GBC833Z
ALONG GEYLANG RD NEAR HAIG RD FOOD CENTRE

ON 25-Oct-18 14:30

I / We **TAJUDDIN BIN BADRUD...** (Hirer) NRIC No.: **S1769561D**

and/or (Relief) NRIC No.:

Taxi Number **SHA1690B**

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 **25-Oct-2018**

Name of Hirer **TAJUDDIN BIN BADRUDDIN**

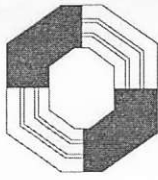
Hirer NRIC **S1769561D**

Signature :



Address **856F TAMPINES STREET 82 #03-214**
526856

Contact No. **90121627**



LONPAC INSURANCE BHD

CLAIM NO : 18/18/18/VC00/021062

DATE : 01/03/2019


DISCHARGE VOUCHER

I/We, COMFORT TRANSPORTATION PTE LTD confirmed acceptance from M/s **LONPAC INSURANCE BHD** and/or the owner of GBC 833Z the sum of Singapore Dollars Five Thousand Five Hundred Forty Only (\$5,540.00) in full and final satisfaction, liquidation and discharge of property claim competent to me/us upon the said M/s **LONPAC INSURANCE BHD** in respect of property claim sustained by me/us whether now or hereafter to become manifest, arising either directly or indirectly from an accident to my vehicle, SHA 1690B on 25th October 2018 along/at Geylang Road.

I /We hereby agree to indemnify and keep indemnify (**UNICOLIVING PTE LTD /LONPAC INSURANCE BHD**) against all claims and any claims whatsoever made by any person/persons on our behalf in respect of the said accident.

I/We further authorize you to pay the above settlement sum directly to M/s **COMFORTDELGRO ENGINEERING PTE LTD.**

I/We hereby acknowledge that this payment is made on a without admission of liability basis and without prejudice to all related claims and in respect of our insured's recovery action.


CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508959
01/03/19
.....
Signature of vehicle owner/Date

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD.
59 LOYANG DRIVE
SINGAPORE 508959
.....
Name of vehicle owner/Date

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"

TAX INVOICE

8010042

LONPAC INSURANCE BERHAD
THE CONCOURSE

300 BEACH ROAD #17-04/07
SINGAPORE 199555

CONTACT NO: 62507388

VEHICLE NO
SHA1690B

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
11.02.2014

CHASSIS CODE
KMHLEB41UMDU043674

NO/DATE
91405329 31.10.2018

JOB NO.
305230584

ODOMETER READING

JOB TYPE

Description : 3P 25.10.2018

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	4,550.00
Add GST @ 7.000 %	318.50
Total Invoice amount	4,868.50

Issued by : CHEWBEELENG 01.11.2018 16:33:43
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.
- 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.

Our Ref: CT18100813

Date: 01 November 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 25/10/2018 @ 14:30 hrs
ALONG GEYLANG RD NEAR HAIG RD FOOD CENTRE
INVOLVING GBC833Z

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 **SHA1690B** (the "Taxi"). The Taxi was hired to **TAJUDDIN BIN BADRUDDIN IC NO S1769561D** 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 **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.

[illegible]

Vehicle No.	Incident Date/ Time	Search Status	Insurance Company Code	Insurance Company Name
GBC833Z	25 Oct 2018 / 14:30:00	Successful	L06	LONPAC INSURANCE BHD

OK

SHAC690B