

- Surveyor:

POTTER

DOI:

ASSIGNMENT

29-10-18

Date / Time:

30/10/18

Registered in Meriton:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SME 500SE

Claim No.:

S8m010Y5

Name of Insured:

Sng Ys Xiang

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II : \$5

D.O.A.:

78/10/2018

Place of Accident:

Mountbatten Rd

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability:

%

Final ? Yes / No

SHA 5376H



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time:

8/11/18

SHA 5376H - cut 1st 170 12483 / 11/11/18 (20/11/18)

STAGE

DATE / PIC

Non-Reporting hr (1st):

Non-Reporting hr (2nd):

Non-Reporting hr (Final):

Notification hr (if non-pickup):

Call OI:

After call hr to OI:

Documentation Check List: Handler Typist

Notification hr (if non-pickup)

After call hr 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:

05/12/18

SME 500SE - X

- MINUS

- ORIGINAL TP LOD IN.

- FILE REVIEWED. OI REPAIR-ENDED TP.

- SEND LETTER IN BULK TO OI TO

NOTIFY TP CLAIM.

- OI TO ADVISE VEH. #.

- UPDATE WARRANTS IF IN OC.

- AYA APPROVED WARRANTS

- SEND 1st OFFER TO TP.

06/12/18

07/12/18

12/12/18

- IN IN. TP ACCEPTED OFFER.

- ALL DOCS IN ORDER.

- TO CLOSE.

RECEIVED 12 DEC 2018

PRELIMINARY ADVICE

Date/Time:

05/12/18

Sent By:

VIC

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

\$5

2,100.00

(2 days)

Reduction:

48 %

Email

Call

FINAL SETTLEMENT

Date/Time:

07/12/18

Confirm with:

WILLIAM

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost (w/ GST)

\$5

2,247.00

Loss of Rental (LOR):

\$5

573.84

(3.5 days)

x \$106.81

Loss of Use (LOU):

\$5

115.00

(3.5 days)

x 3.5 days

Loss of Income (LOI):

\$5

-

(3 days)

x days

LOR only

LOU 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

2,803.83

Global Sum \$5:

2,800.00

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$5

2,800.00

Name 1:

COMPTONALGO ENGINEERING PTB LTD

Payee 2: (Strike if N.A.)

\$5

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$5

-

Name 3:

-

Surveyor: KolvinREF: 03/QW18019647/Kldp

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Insured Vehicle No: _____

at Workshop m/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 Report: _____ Consistent?: Yes or No

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

Est Repairs: 1 days Res.: Yes or NoLump Sum: 10 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SHA 53 76H Yr Regn: 19 Apr 2012

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

Truck / Trailer or

Make: Hyundai Sonata c.c. 199Colour: Blue A/C: Insured / Std / Nil / NASp. Reading: 181675 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: KMH5T41VACAS22917

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD Alloy or

Tyre Size: F: 215/60R16

R: _____

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

TOYO / YOKO or Hankook

Front: _____ Rear: _____

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 28/10/18 D.O.I. 29/10/18Survey held at CDGE (Loyang)

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

Rear

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

Date / Time	Action / Instruction
	<u>SHA 5376H - (18/10/18) 17018955 / M110137</u>
<u>31/10/2018</u>	<u>AXA informed ComfortDelGro no record found in their system</u>
<u>30/10/2018</u>	<u>received assignment from AXA by smart claim</u>
	<u>US \$2,100.00</u>
	<u>CRMD: \$1,964.82 (46%)</u>

Date/Time, File Pass to?

☐ : Prelim. Report

1) _____

☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

Report Format: _____

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

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

number of COMFORTDELGRO

Date/Time: 29.10.2018 10:02 Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO: 305231603

MER
COMFORT TRANSPORTATION PTE LTD
7010045
MER NO.
SS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755

REGN NO: SHA5376H	MILEAGE
MAKE: HYUNDAI	FUEL E 1/2 F
MODEL SONATA	DATE/TIME IN 28.10.2018 10:40
YR OF MANU 19.04.2012	TARGET DATE
CHASSIS CODE KMHE741VMCA822917	COMPLETION DATE/TIME

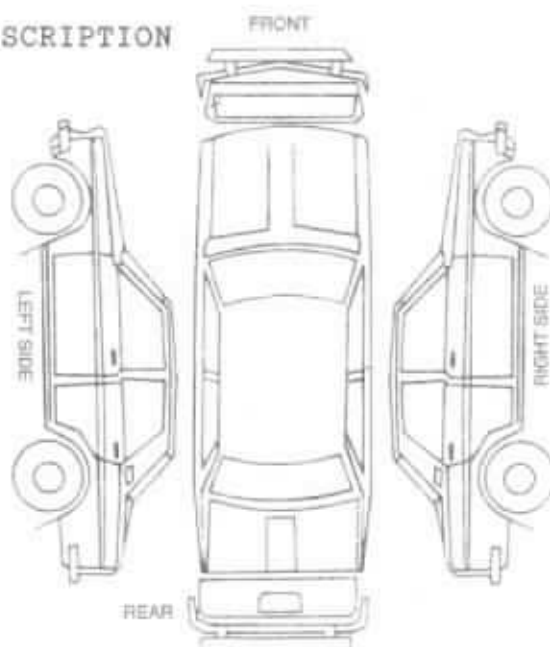
AXA

JNT CARD NO:

JOB DESCRIPTION

Accident Date: 28.10.2018
NATURE: 3P 28.10.2018

S/NO LABOR CODE DESCRIPTION



IED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Idgement Slip

Exit Pass

at: SHA5376H LKE

Vehicle No.: SHA5376H

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

DATE 29/10/2018 11:39

MODEL : HYUNDAI SONATA

Page 1 of 1

COMFORTDELGRO ENGINEERING

Our Job Ref No 305231603

Date : 31/10/18

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

FINALIZATION FORM

To : LKK

Fax :

Attn : Mr KALVIN ANG

Vehicle Reg No. SHA5376H CTPL

28.10.18

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

1. The repair job shall bill to: AXA SME5005Z
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost**
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$2,100.00
Final Lumpsum Repair cost \$2,100.00

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 :

Date : 1/11/18

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

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 5376H

DATE 29/10/2018 11:39

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid			\$ 1,349.50
	Boot Lid Lock Upper			\$ 132.10
	Boot Lid Lock Lower			\$ 30.30
	Boot Lid Sonata Plate			\$ 43.60
	Boot Lid Hyundai Plate			\$ 24.20
	Boot Lid 'H' Emblem			\$ 26.10
	Boot Lid CRDI Plate			\$ 22.70
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Bumper Protector (LH/RH)		\$ 38.00	\$ 76.00
	SUB TOTAL			\$ 3,111.40
	LESS 20%			\$ 622.28
	DISCOUNTED TOTAL			\$ 2,489.12
	Boot Lid Comfort Logo & Tel No. Sticker			\$ 30.00
	Boot Lid Advertisement Logo			\$ 100.00
	Rear Bumper Reverse Sensor			\$ 135.70
	Rear Bumper Advertisement Logo			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00
				\$ 515.70
	Labour Charge			
	Panel Beating			\$ 200
	Spray Painting Charge			\$ 400.00
	Wiring Charge			\$ 500.00
	Tuff Kote			\$ 30.00
	Remove/Refix Reverse Sensor			\$ 50.00
				\$ 80.00
	TOTAL LABOUR			\$ 1,060.00
	ESTIMATE TOTAL			\$ 4,064.82
<p>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.</p>				



Service Request Details

Claim

S8M010Y5

Reference

None 

Loss Date

October 28, 2018

Request Date

October 30, 2018

Due Date

November 7, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Actions

Next Step

Agree to perform service

Decline WorkAccept Work

Insured

Vehicle Information

Incident Vehicle Registration #
SHA5376H

Make
TPVD HYUNDAI

Model
SONATA -2.0 A

Service Address

...

Primary Contact

COMFORT TRANSPORTATION PTE LTD
199303821R, Singapore
65508768

Claim Handler

RATAN BHOSALE Pragati
Contact only through email
pragati.bhosale@axa.com.sg

Additional Instructions

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)

New Message



Pls proceed DS with quantum as proposed

Type

🔗 Question

Message

Reply

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: GME 5005Z
Name (as shown in NRIC) : _____ NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 28/10/18 Time of Accident : _____
Place of Accident : _____
Insurance Company: AXA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

"MY VEHICLE NUMBER SHOULD BE GME 5005Z. THAT'S ALL."

— 4 —

Policyholder / Driver's Signature

Date:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date:

Our Ref : T 1018/ SHA5376H /WT(st)

Your Ref :

Date : 01-Nov-18

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Martine +65 6383 6280
Facsimile +65 6280 9755

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 SHA5376H YOUR INSURED SME5005Z
AND OTHER ON 28.10.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SHA5376H** 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 : SME5005Z
we are submitting these claim for your consideration on behalf of the claimants

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,247.00
2	4 days Loss of Rental @ \$ 106.81 per day	\$ 427.24
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 :	\$ 2,681.73

HIRER'S CLAIM

7	<u>4</u>	days Loss of Income @	<u>\$ 80.00</u> per days	<u>\$ 320.00</u>
Total Claims:				\$ 3,001.73

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

- a) Original repair bill and photocopies of photographs 6 pcs
- b) LTA search slip/s of: SME5005Z
- c) GIA / Police report/s of: SHA5376H
- d) Letter of authority from owner / hirer / operator
- (X) 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 508969

Sin Ming
383 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 609286

Ubi
320 Ubi Road 3
Singapore 408849

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
Yishun Industrial Park A
Singapore 758732



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

05 DECEMBER 2018

**ONG YIXIANG
BLOCK 5 LORONG LEW LIAN
#12-110
SINGAPORE 530005**

By Post & By Email

Dear Sir/Madam,

**OUR REF : CC4/ASM18019647/K1ha3
YOUR REF : SME 5005Z
ACCIDENT INVOLVING SME 5005Z AND SHA 5376H ALONG MOUNTBATTEN ROAD
ON 28.10.2018**

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 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 SHA 5376H against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third Party vehicle SHA 5376H. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD – if applicable) 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 7 days from the date of this letter **if not provided at AXA's 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 1, #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 vicalpeh@lkkauto.com.

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

Yours sincerely,


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

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

yixiangong@gmail.com
(Email)

Vic (LKKAUTO)

From: Vic (LKKAUTO)
Sent: Wednesday, 5 December, 2018 11:50 AM
To: yixiangong@gmail.com
Cc: Admin A; Vic (LKKAUTO)
Subject: YOUR REF: SME 5005Z_ACCIDENT INVOLVING SME 5005Z AND SHA 5376H ALONG MOUNTBATTEN ROAD ON 28.10.2018
Attachments: ADDENDUM FORM.pdf



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

05 DECEMBER 2018

ONG YIXIANG
BLOCK 5 LORONG LEW LIAN
#12-110
SINGAPORE 530005

By Post & By Email

Dear Sir/Madam,

OUR REF : CC4/ASM18019647/K1ha3
YOUR REF : SME 5005Z
ACCIDENT INVOLVING SME 5005Z AND SHA 5376H ALONG MOUNTBATTEN ROAD ON 28.10.2018

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 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 SHA 5376H against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third Party vehicle SHA 5376H. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD – if applicable) 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 7 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 7 days from the date of this letter **if not provided at AXA's 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)

- 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 vicalpeh@lkkauto.com.

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

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)



Save the Earth. Print only when necessary.

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LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGSONATA SHA5376H , SME5005Z
MOUNTBATTEN RD TOWARDS NICOLL HWY

ON 28-Oct-18 09:40

I / We

YEO BOON NGEE

(Hirer) NRIC No.: S1775761Z

and/or

(Relief) NRIC No.:

Taxi Number

SHA5376H

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

28-Oct-2018

Name of Hirer

YEO BOON NGEE

Hirer NRIC

S1775761Z

Signature :



Address

524-B TAMPINES CENTRAL 7 #07-63
522524

Contact No.

98699153



redefining / insurance

CLAIM REF : S8M010Y5
INSURED : ONG YIXIANG

DISCHARGE VOUCHER

We, **COMFORTDELGRO ENGINEERING PTE LTD** confirm that by letter of authorisation dated **28/10/2018**, we are authorised to and do hereby give this discharge for ourselves and on behalf of COMFORT TRANSPORTATION PTE LTD and the Hirer, **YEO BOON NGEE** of vehicle no. **SHA 5376H**.

Now we **COMFORTDELGRO ENGINEERING PTE LTD** for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars **TWO THOUSAND EIGHT HUNDRED only (\$2,800.00)** 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 **SME 5005Z** arising out of an accident with **SHA 5376H** on **28/10/2018**.
- 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. **SME 5005Z** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- 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. **SME 5005Z**.

Dated this 7th day of December 2018

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp _____
COMFORTDELGRO ENGINEERING PTE LTD
89 LOYANG DRIVE
SINGAPORE 638981

Witness : _____

Name : _____

I/C No : _____

Address : _____

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

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO
SHA5376H

MAKE
HYUNDAI

MODEL
SONATA

DATE OF REG
19.04.2012

CHASSIS CODE
KMHET41VMCA822917

NO/DATE
91405326 31.10.2018

JOB NO.
305231603

ODOMETER READING

JOB TYPE

Description : 3P 28.10.2018

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	2,100.00
Add GST @ 7.000 %	147.00
Total Invoice amount	2,247.00

Issued by : CHEWBEELENG 01.11.2018 16:28:59
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

WE/ST TAKING ALL REASONABLE PRECAUTIONS AGAINST THE THEFT OR ACCIDENTAL DAMAGE TO THE COMPANY'S ASSETS AND RESPONSIBILITY FOR CARB OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DROPPED AND RETURNED TO OWNERS' FREE.

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 VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS ON ANY BALANCE DUE TO COMPANY BY 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 THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 15 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THE 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: CT18100872

Date: 01 November 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	28/10/2018 @ 09:40 hrs
ALONG	MOUNTBATTEN RD TOWARDS NICOLL HIGHWAY
INVOLVING	SME5005Z

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 **SHA5376H** (the "Taxi"). The Taxi was hired to **YEO BOON NGEE IC NO S1775761Z** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$106.81** 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]

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SME5005Z	28 Oct 2018 / 09:40:00	Successful	A12	AXA INSURANCE PTE LTD

Previous OK

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SME 5005Z (Insd veh)	Model:	HYUNDAI SONATA
	SHA 5376H (TP veh)		
Date of Accident:	28/10/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	4,349.36
Final Repair Cost	:	\$	2,247.00
Loss of Token Sum	:	\$	175.00
Rental (if any)	:	\$	373.84
LTA / GIA Search Fee	:	\$	7.49
Others:	:	\$	0.00

Final Settlement Sum (Global Sum)	:	\$	2,800.00
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A) For Non GIA Registered Workshop: Agreed Liability _____ (%)			
B) For GIA Registered Workshop: BOLA Applicable: Yes/ No BOLA Scenario No: _____			
BOLA Liability: _____ 100 (%) Assessed Liability (*): _____ (%)			
<i>* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.</i>			
Remarks _____			

Payment Instruction: Payee's Breakdown			
1)	COMFORTDELGRO ENGINEERING PTE LTD	:	\$ 2,800.00

JOANNE LEE KHANG MIN
 LKK Auto Consultants Pte Ltd

19/12/2018
 Date

Please attach all the supporting documents to the form.
 (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)



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/ASM18019647/K1ha3q2	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:PETER		Date : 19-12-2018	
		Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SME 5005Z	Veh. Inspected	SHA 5376H
Policy No.	CN015776	Coverage (\$)	0.00
Claim No.	S8M010Y5	Excess (\$)	0.00
Assign From		Assign Date	29/10/2018
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KMHET41VMCA822917	Colour	BLUE
Odometer	181675	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	HANKOOK	7 mm
L/H Front Tyre	215/60 R16	HANKOOK	7 mm
R/H Rear Tyre	215/60 R16	HANKOOK	7 mm
L/H Rear Tyre	215/60 R16	HANKOOK	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	28/10/2018	Inspection Date	29/10/2018
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 5376H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BOOT LID (CONSISTENT)	DENTED	1,349.50	1,349.50
1	BOOT LID LOCK UPPER (CONSISTENT)	SERVICEABLE	132.10	-
1	BOOT LID LOCK LOWER (CONSISTENT)	SERVICEABLE	30.30	-
1	BOOT LID SONATA PLATE (CONSISTENT)	NECESSARY	43.60	43.60
1	BOOT LID HYUNDAI PLATE (CONSISTENT)	NECESSARY	24.20	24.20
1	BOOT LID'H' EMBLEM(CONSISTENT)	NECESSARY	26.10	26.10
1	BOOT LID CRDI PLATE (CONSISTENT)	NECESSARY	22.70	22.70
1	REAR BUMPER(CONSISTENT)	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT (CONSISTENT)	SERVICEABLE	483.30	-
1	REAR BUMPER CLIP(CONSISTENT)	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE (CONSISTENT)	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER (CONSISTENT)	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00 (CONSISTENT)	SERVICEABLE	76.00	-
	LESS 20%DISCOUNT		-622.28	-413.30
			2,489.12	1,653.20
SPECIAL NETT ITEMS				
1	BOOT LID COMFORT LOGO & TEL NO.STICKER (SN) (CONSISTENT)	NECESSARY	30.00	30.00
1	BOOT LID ADVERTISEMENT LOGO (SN) (CONSISTENT)	NECESSARY	100.00	100.00
1	REAR BUMPER REVERSE SENSOR (SN) (CONSISTENT)	NOT NECESSARY	135.70	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN) (CONSISTENT)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN) (CONSISTENT)	NECESSARY	200.00	200.00
			515.70	380.00
LABOUR				
	PANEL BEATING.		400.00	200.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.	NOT NECESSARY	30.00	-
	TUFF KOTE.		50.00	20.00

Report Ref No. CC4/ASM18019647/K1ha3q2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REMOVE/REFIX REVERSE SENSOR .	NOT NECESSARY	80.00	-
			1,060.00	620.00
GRAND TOTAL			4,064.82	2,653.20
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,100.00

Report Ref No. CC4/ASM18019647/K1ha3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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