

COMFORTDELGRO ENGINEERING

Our Ref : T 1118 / SHB4167X / JW(st)

Your ref :

Date : 07-Dec-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
501 Yishun Industrial Park A
Singapore 768732

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHB4167X YOUR INSURED SLZ8269K
AND OTHER ON 23.11.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHB4167X** 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 **SLZ8269K** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,835.50
2	4 days Loss of Rental @ \$ 119.28 per day	\$ 477.12
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 :		\$ 3,320.11

HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per day	\$ 320.00
Total Claims:		\$ 3,640.11

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

a) Original repair bill and photocopies of photographs : 4 pcs.

b) LTA search slip/s of : **SLZ8269K**

c) GIA / Police report/s of : **SHB4167X**

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

Jim Wong

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@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 SHB4167X , SLZ8269K
ALONG SERANGOON RD TOWARDS PETAIN RD****ON 23-Nov-18 03:00****I / We TEO HOW HIA (Hirer) NRIC No.: S1634570I****and/or LIM TIONG HO (Relief) NRIC No.: S1329131D****Taxi Number SHB4167X**

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 23-Nov-2018**Name of Hirer TEO HOW HIA
Hirer NRIC S1634570I**

Signature :

**Address 253A ANG MO KIO STREET 21 #06-...
561253****Contact No. 91503410****Name of Relief LIM TIONG HO
Relief NRIC S1329131D**

Signature :

**Address 559 ANG MO KIO AVE 10 #03-1850
560559****Contact No. 87781764**

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE 069110

CONTACT NO: 62239433

Description : 3P 23.11.2018

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969

383 Sin Ming Drive Singapore 575717

45 Pandan Road Singapore 609286

320 Ubi Road 3 Singapore 408649

24 Senoko Loop Singapore 758156

7 Sungei Kadut Way Singapore 728791

501 Yishun Industrial Park A Singapore 768

COMPANY REG. NO.: 199506048W
Page: 1

VEHICLE NO
SHB4167X

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
30.05.2015

CHASSIS CODE
KMHLB41UMFU069444

NO/DATE
91410803 29.11.2018

JOB NO.
305242611

ODOMETER READING

JOB TYPE

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,650.00
Add GST @ 7.000 %		185.50
Total Invoice amount		2,835.50

Issued by : CHEWBEELENG 29.11.2018 09:44:19
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: CT18110714

Date: 28 November 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 23/11/2018 @ 03:00 hrs
ALONG SERANGOON RD TOWARDS PETAIN RD
INVOLVING SLZ8269K

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 **SHB4167X** (the "Taxi"). The Taxi was hired to **TEO HOW HIA IC NO S1634570I** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$119.28** 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.

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO
244	0600	1745
206	1848	0534
249	0600	1630
164	1800	0542
253	0600	1710
168	1842	0539
265	0600	1725
172	1837	0543
Servicing.	0600	1405
238	1810	1825
133	1844	0509

[illegible]

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLZ8269K	23 Nov 2018 / 03:00:00	Successful	E04	EQ INSURANCE COMPANY LTD

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

SUB 4067X



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/EQI18021311/K1hb3

29 April 2019

KHAIRUL ABBAS BIN HAMZAH

APT BLK 411

YISHUN RING ROAD

#03-1817

SINGAPORE 760411

Dear Sir/Madam,

ACCIDENT INVOLVING SLZ8269K & SHB4167X ON 23/11/2018

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Kindly note that we have reviewed this matter and would like to advise that you and/or your authorized driver may not be absolved from blame for this accident.

If you have evidence/information to proof that we should not settle the third party claim, kindly let us have them in writing within the next 10 days i.e. by 10/05/2019, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

KHANCHNA

Case Handler

DID: 6841 2360

FAX: 6741 4108

EMAIL: vicalpeh@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

	P		SN		L	
\$	2,201.10	\$	80.00	\$	300.00	
\$	341.10			\$	800.00	
\$	107.10			\$	20.00	
\$	2,649.30					
	x80%					
\$	2,119.44	\$	80.00	\$	1,120.00	\$ 3,319.44
						x80%
						\$ 2,655.55
				L/sum		\$ 2,650.00