

Our Ref : T 0119 / SHA7555U /WT(st)

Your Ref :

Date : 27-Feb-19

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

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 578701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198900249W

Workshops

Braddell
205 Braddell Road
Singapore 578701

Loyang
59 Loyang Drive
Singapore 508969

Sin Ming
383 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 605236

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

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

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA7555U YOUR INSURED SJY2242E
AND OTHER _____ ON 16.01.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA7555U 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 SJY2242E we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 869.10
6	2 days Loss of Rental @ \$ 125.19 per day	\$ 250.38
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 :		\$ 1,126.97

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 1,286.97

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 : SJY2242E
- c) GIA / Police report/s of : SHA7555U
- d) Letter of authority from owner / hirer / operator
 - () Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
 - (X) Photograph/s of Accident Scen (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.

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Wednesday, 8 May 2019 2:37 PM
To: 'RAKSUN@YMAIL.COM'
Subject: ACCIDENT INVOLVING SJY 2242E AND SHA 7555U ON 16/01/2019

Our Ref: CC3/CTI19001085/Neb3

08 MAY 2019

YING YONGCHENG

Dear Sir/Madam,

ACCIDENT INVOLVING SJY 2242E AND SHA 7555U ON 16/01/2019

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 and accident scenario, 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,

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

c.c. China Taiping Insurance (Singapore) Pte Ltd
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGHyundai Ioniq SHA7555U , SJY2242E
KRAMAT RD X CAVENAGH RD

ON 16-Jan-19 03:10

I / We

LIONEL GAN KIM HWEE

(Hirer) NRIC No.: S7221189H

and/or

(Relief) NRIC No.:

Taxi Number

SHA7555U

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

16-Jan-2019

Name of Hirer

LIONEL GAN KIM HWEE

Hirer NRIC

S7221189H

Signature :



Address

318 UBI AVENUE 1 #03-477
400318

Contact No.

98996699

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3059981800

Claim No : SNM19D200330

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,226.97

DOLLARS ONE THOUSAND TWO HUNDRED TWENTY SIX AND CENTS
NINETY SEVEN 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 7555U

Insured Vehicle No. : SJY 2242E

Date of Loss : 16/01/2019

Place of Accident : KRAMAT RD X CAVENAGH RD

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 : YING YONGCHENG

Driver Name : YING YONGCHENG

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) General Damages	S\$	
(2) Cost of Repair/ Excess	S\$	869.10
(3) Loss of Use/Rental/Earning	S\$	350.38
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	7.49
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
TOTAL	S\$	1,226.97

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :  CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
591 CANG DRIVE
SINGAPORE 449419

Date : 21-5-19

"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)PTR LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA7555U

INV. NO/DATE
91428120 26.02.2019

MAKE
HYUNDAI

JOB NO.
305260702

MODEL
IONIQ(G2)

ODOMETER READING

DATE OF REG
13.09.2018

DATE/TIME IN
16.01.2019 03:50

CHASSIS (VIN)
KMHC851CVKU107504

Description : 3P 16.01.19

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0104-2534	IONIQV2 COVER-FR BUMPER#	1	418.30	20.00	334.64
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP REAR	10	2.20	20.00	17.60
SUB-TOTAL:			:			352.24

JOB NATURE

0001	L	PANEL BEATING		200.00		200.00
0002	L	SPRAY PAINTING CHARGE		200.00		200.00
0003	L	TOWING FEE		60.00		60.00
SUB-TOTAL:			:			460.00

WE HEREBY TAKE ALL RESPONSIBILITY FOR THE CONDITION OF THE VEHICLE UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM DELIVERY ADVISE THE CUSTOMER OF ANY COMPLAINTS. OTHERWISE THE VEHICLE WILL BE DEEMED TO BE IN GOOD ORDER.
CUSTOMERS SHALL INSPECT THE VEHICLE IMMEDIATELY UPON DELIVERY AND SIGN OFF THE VEHICLE CONDITION REPORT FORM.
INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS ON THE OUTSTANDING BALANCE OF THE VEHICLE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT OR 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 SUMMARY DOES NOT COME 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.
8010012	91428120	869.10	

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
SHA7555UMAKE
HYUNDAIMODEL
IONIQ(G2)DATE OF REG
13.09.2018CHASSIS CODE
KMHC851CVKU107504INV. NO/DATE
91428120 26.02.2019JOB NO.
305260702

ODOMETER READING

DATE/TIME IN
16.01.2019 03:50

Items total	812.24
Add GST @ 7.000 %	56.86
Invoice amount	869.10

Issued by : KATHERINETAN 26.02.2019 11:44:32
 Repair type : CISO/57/57
 Payment type/Term: /Credit 30 days

1. Whilst taking all reasonable precautions, accept the theft or accidental damage of vehicles delivered in RESPONSIBILITY FOR CARE ON CHIEF INSURANCE BELONGING TO CUSTOMERS AND VEHICLES NOT INSURED AND TESTED & OWNERS' RISK.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM THE DELIVERY DAY NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE CONSIDERED RELEASED FROM ACCIDENT IN GOOD ORDER.

3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY-TO-DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OUTSTANDING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (i.e. AFTER 30 DAYS FROM THE DELIVERY DAY TO PERIOD OF DEFAULT).

4. PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DISCREPANCY OR AMBIGUITY 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.
8010012	91428120	869.10	

Our Ref: CT19010412

Date: 26 February 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 16/01/2019 @ 03:10 hrs
ALONG KRAMAT RD X CAVENAGH RD
INVOLVING SJY2242E

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 **SHA7555U** (the "Taxi"). The Taxi was hired to **LIONEL GAN KIM HWEE IC NO S7221189H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.19** 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.

SNA 75554

DATE	NAME OF DRIVER	MILEAGE READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIM)	DATE	NAME OF DRIVER	MILI
14/11	off			FROM TO			
14/11-15/11	Lowen	56908	289	1800 2530			
15/11	TRB	57068	160	1300 1700			
15/11-16/11	Lowen	57275	205	1800 0345			
16-17/11	Accident		N	0330 -			
17-18/11	Papam		007	1300 -			
12/11	TRB						
17/11-18/11	Lowen						
18/11	TRB						
18/11-19/11	Lowen						

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJY2242E	16 Jan 2019 / 03:10:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous OK