

Our Ref : T 0119/ SH 8566P /WT(st)

Your Ref :

Date : 30-Jan-19

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: 199506048V

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 8566P YOUR INSURED SKT3911R
AND OTHER SCV6919J ON 17.01.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SH 8566P** 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 : **SKT3911R** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

| | | |
|--------------------|---|--------------------|
| 1 | Cost of Repair | \$ 1,652.08 |
| 2 | 5 days Loss of Rental @ \$ 125.40 per day | \$ 627.00 |
| 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 : | | \$ 2,286.57 |

HIRER'S CLAIM

| | | |
|----------------------|---|--------------------|
| 7 | 5 days Loss of Income @ \$ 80.00 per days | \$ 400.00 |
| Total Claims: | | \$ 2,686.57 |

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 :
- c) GIA / Police report/s of : SH 8566P
- d) Letter of authority from owner / hirer / operator
 - (X) Photocopy/s of Accident Scene Photo/s (X) Towing receipts
 - () 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 408649

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

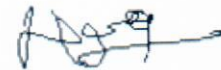
Yishun
501 Yishun Industrial Park A
Singapore 768732

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING TOYOTA PRIUS SH8566P , SKT3911R , SC... ON 17-Jan-19 18:20
ALONG ALONG PIE**I / We **SIM SWEE HONG @NG S...** (Hirer) NRIC No.: **S1577964J**and/or **SIM SWEE HONG** (Relief) NRIC No.: **S1577964J**Taxi Number **SH8566P**
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 **18-Jan-2019**Name of Hirer **SIM SWEE HONG @NG SWEE HONG**
Hirer NRIC **S1577964J** Signature :Address **484A CHOA CHU KANG AVE 5 #02-24
681484**Contact No. **96573588**Name of Relief **SIM SWEE HONG**
Relief NRIC **S1577964J** Signature :Address **484A CHOA CHU KANG AVE 5 #02-24
681484**

Contact No.

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 8566P

INV. NO/DATE
91422727 28.01.2019

MAKE
TOYOTA

JOB NO.
305261375

MODEL
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG
03.10.2017

DATE/TIME IN
18.01.2019 13:30

CHASSIS CODE
JTDKB3FU003565037

Description : 3P 17.01.2019

| S/No | Part No. | | Qty | Unit Price | %Disc | Net |
|------------------|-----------------|---------------------------|-----|------------|-------|----------|
| PART REQUISITION | | | | | | |
| 0001 | 04-01-0302-2282 | PRIG4 COVER REAR BUMPER | 1 | 458.60 | 25.00 | 343.95 |
| 0002 | 04-01-0302-2287 | PRIG4 GUARD-REAR BUMPER C | 1 | 552.60 | 25.00 | 414.45 |
| 0003 | 04-01-0302-2267 | PRIVC BUMPER PIECE | 10 | 2.20 | 25.00 | 16.50 |
| 0004 | 04-01-0302-2288 | PRIG4 REINFORCEMENT SUB-A | 1 | 318.80 | 25.00 | 239.10 |
| SUB-TOTAL | | | : | | | 1,014.00 |

JOB NATURE

| | | | | |
|-----------|--------|-----------------------------|--------|--------|
| 0001 | L | PANEL BEATING | 300.00 | 300.00 |
| 0002 | 23-502 | SPRAYPAINT ON AFFECTED AREA | 200.00 | 200.00 |
| 0003 | L | REMOVE/REFIX REVERSE SENSOR | 30.00 | 30.00 |
| SUB-TOTAL | | | : | 530.00 |

- 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. |
|-------------|-------------|----------|--------------|
| 8010010 | 91422727 | 1,652.08 | |
| | | | |
| | | | |

TAX INVOICE

8010010

AXA INSURANCE PTE LTD

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

CONTACT NO: 63387288

VEHICLE NO
SH 8566P

MAKE
TOYOTA

MODEL
PRIUS HYBRID(G4)

DATE OF REG
03.10.2017

CHASSIS CODE
JTDKB3FU003565037

INV. NO/DATE
91422727 28.01.2019

JOB NO.
305261375

ODOMETER READING

DATE/TIME IN
18.01.2019 13:30

| | |
|-------------------|----------|
| Items total | 1,544.00 |
| Add GST @ 7.000 % | 108.08 |
| Invoice amount | 1,652.08 |

Issued by : CHEWBEELENG 28.01.2019 11:26:35
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.
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ComfortDelGro Engineering Pte Ltd
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Head Office:
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CUSTOMER'S COPY

| ACCOUNT No. | INVOICE No. | AMOUNT | BANK/CHQ No. |
|-------------|-------------|----------|--------------|
| 8010010 | 91422727 | 1,652.08 | |
| | | | |
| | | | |

Our Ref: CT19010518

Date: 28 January 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 17/01/2019 @ 18:20 hrs
ALONG ALONG PIE
INVOLVING SKT3911R, SCV6919J

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 **SH8566P** (the "Taxi"). The Taxi was hired to **SIM SWEE HONG @NG SWEE HONG IC NO S1577964J** 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 **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.

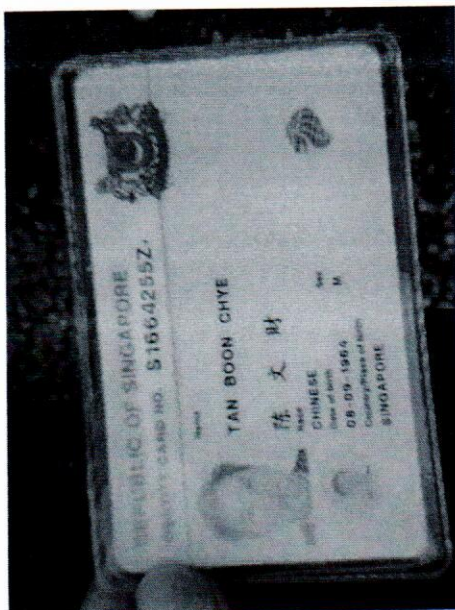
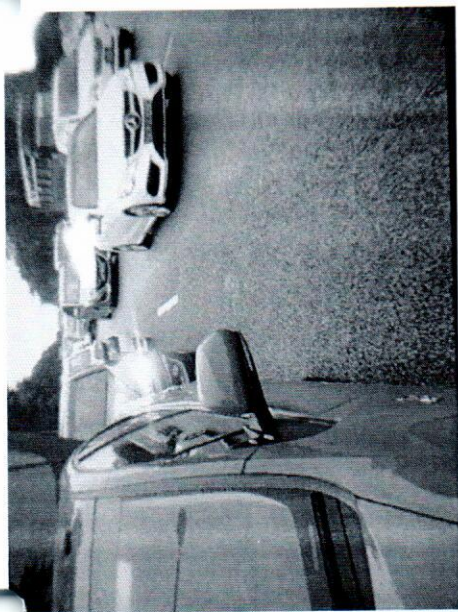
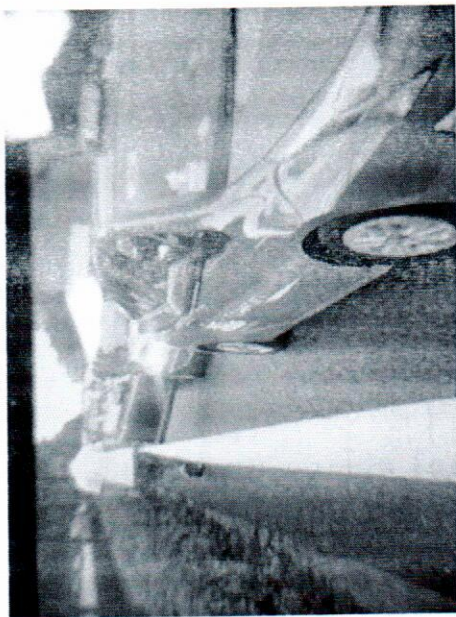
Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

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

| MILEAGE READING | | | MILEAGE TRAVELLED (KM) | HOURS OPERATED (TIME) | | DATE | NAME OF DRIVER | MILEAGE READING | | MILEAGE TRAVELLED (KM) | HOURS OPERATED (TIME) | |
|-----------------|----|---|------------------------|-----------------------|-------|-----------------|----------------|-----------------|----|------------------------|-----------------------|-------|
| | | | | | | | | | | | FROM | TO |
| 39 | 04 | 2 | 399 | 6.50 | 22.30 | 18 January 2019 | 305261375 | 14 | 00 | shop | 13:30 | 14:30 |
| 39 | 45 | 4 | 412 | 6.40 | 22.40 | 22 January 2019 | | Out | 00 | shop | | |
| 39 | 89 | 3 | 439 | 6.50 | 23.00 | | | | | | | |
| 40 | 27 | 7 | 384 | 6.30 | 22.55 | | | | | | | |
| 40 | 65 | 6 | 379 | 6.55 | 23.15 | | | | | | | |
| 40 | 87 | 3 | 217 | 11.50 | 21.25 | | | | | | | |
| 41 | 12 | 7 | 254 | 10.00 | 20.20 | | | | | | | |
| 41 | 45 | 2 | 325 | 6.40 | 22.10 | | | | | | | |
| 41 | 84 | 8 | 395 | 6.35 | 23.00 | | | | | | | |
| 42 | 24 | 6 | 398 | 7.10 | 22.30 | | | | | | | |
| 42 | 60 | 4 | 358 | 6.50 | 22.30 | | | | | | | |



| Enquire Vehicle Insurer | | | | |
|-------------------------|------------------------|---------------|------------------------|------------------------|
| Vehicle No. | Incident Date/Time | Search Status | Insurance Company Code | Insurance Company Name |
| SKT3911R | 17 Jan 2019 / 18:20:00 | Successful | A12 | AXA INSURANCE PTE LTD |

Previous OK