CHUNNI MOTOR WORK PTF LTD

Our Ref : SHC 2123 E (260119) Your Ref : CC4/III19001885/Dpb3

Date: 23-05-2019

M/s LKK Auto Consultants Pte Ltd 51 Ubi Avenue #01-25 Paya Ubi Industrial Park Singapore 408933

WITHOUT PREJUDICE

Attention: Carior Chan

Case Handler

Dear Sir/Madam

ACCIDENT INVOLVING SHC 2123 E & SHA 6022 Y ALONG BUKIT TIMAH ROAD ON 26-01-2019

Your email of 22 May 2019 refers.

Strictly on a without prejudice basis and without any admission of liability, we confirm settlement for our client's property damage claim (Cost of repair and the loss of income and rental during the period of repair) at \$14,631.00.

Please note that the settlement reached is strictly for the aforesaid property damage claim only and is without prejudice to the relief driver of SHC 2123 E, Tan Ah Lek's rights to claim damage for his injury against your insured, if any.

As requested, we return the attached Discharge Voucher duly executed together with the original LOD for your onward transmission.

Kindly expedite to process payment and forward us your cheque for the settlement sum of \$14,631.00 made in favour of M/s Chunni Motor Work Pte Ltd as soon as possible.

Thank you.

Your faithfully

For Chunni Motor Work Pte Ltd

Claims Department

Enc



India International Insurance Pte Ltd

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER |||-Direct Settlement (PODS)

India Ref: Claimant I	TP / MCT19010794 Ref: SHC 2123E		
of Surveyor) use/rental), Son _26/01/2	UNNI MOTOR WORK PTE LTD ("the works ointed Surveyor of India International Insurance Pte with respect to the amount claimed for S\$1. S\$ (search fee), vehicle no. SHC 2123E the search fee) (date) atBUKIT TIMAH RD (NEAR OLD HOLD is pursuant to the inspection conducted on29/01/20	Ltd LKK AUTO CO 3,375.00 (repair nat was damaged pur LAND RD) (location) in	ONSULTANTS PTE LTD (name cost), S\$ 1,256.00 (loss of suant to the accident which occurred applying vehicle no SHA 6022Y/insured
claimant") of	that we/l are/am authorized by the ownerCO vehicle no.SHC 2123E to make the claim as set out n his/her behalf in a manner that we/l deem fit. We t".	in the above paragrap	oh and we/I have full authority to settle
they will or h	confirm that we/l will indemnify India International	party claimant" after	the above said agreement lodges a
of use pursua	against the former for any loss and expenses suff int to the damage to $\underline{\sf SHC\ 2123E}$ (vehicle no.) as a	ered pertaining to cos result of the accident.	st of repairs and/or rental and/or loss
We/I confirm pursuant to the basis.	that the agreement reached above is in full and ne accident and that further this settlement is reach	final settlement of all ed on a without preju	I claims of "the third party claimant" dice and without admission of liability
This agreemer dispute arising	nt is subject to the application of Singapore law and out of the same.	the Singapore Courts	have exclusive jurisdiction over any
We/I authoriz	re you to pay the total amount of S\$ 14,631.00 to	CHUNNI MOTOR \	NORK PTE LTD
Dated this	3 day of		
CLAIMANT:	Missan	WITNESS:	
Signature:	Signed by "the workshop" (with chop)	Signature:	Signed by appointed Surveyor
Name:		Name:	LKK AUTO CONSULTANTS PTE LTD
NRIC:	Churrini Motor Work Pte Ltd 86: 18 Ang Mo Kio Industrial Park 2A	NRIC:	
Address:	ANK Autopoint #03-19 ————————————————————————————————————	Address:	51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
	Tel: 6542-7162 Fax: 6542-6039 Co. Reg. Ne: 200623110D		Singapore 408933
Nationality:		Nationality:	
Occupation:		Occupation:	Company of the Compan
			THE PROPERTY OF THE PARTY OF TH

"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."

Your Ref: SHA 6022Y Our Ref : SHC 2123E Phang Kok Wah c/o CHUNNI MOTOR WORK PTE LTD Blk 10 Ang Mo Kio Industrial Park 2A Date: 05/03/19 #03-19 AMK AutoPoint Singapore 568047 The Motor Claims Department India % LKK Anto Conjultants Pte Ltd WITHOUT PREJUDICE Dear Sir / Madam. RE: ACCIDENT INVOLVING SHC 2123E / SHA 6022Y On 26.01.2019 ALONG Bukit Timah Rd (Near Old Holland Rd) I am the owner/hirer of motor vehicle/taxi, SHC 2123E , which was involved in the above-mentioned accident. The motor vehicle/taxi was surveyed by your appointed appraiser at the premises of M/S CHUNNI MOTOR WORK PTE LTD. The accident was caused by your insured's negligent driving and or management of his vehicle. Therefore, I am claiming damages and losses sustained by me against you in connection with the accident based on the appraiser's recommendation. Our claim is as follows:

1) Cost of Repair	S\$ 13,375.00
2) Loss of Rental	SS 936.00 (\$117x 8 DAY)
3) Loss of Income	S\$ 320,00 (\$40x 8 PAG)
4) GIA Report Fee	S\$
5) LTA Search Fee	S\$
6) Survey Report Fee	S\$
	S\$ 14,631.00

We enclose herewith the following relevant supporting documents :

- a) Authorisation Letter
- b) Final repair bill(s)
- c) LTA Search
- d) GIA report(s)
- e) Insurance Certificate

Kindly look into the matter and revert as soon as possible. Thank you.

Yours faithfully

CHUNNI MOTOR WORK PTE LTD

TAX INVOICE

I HANG KOK WALL	VEI HOLL IVO	DATE 28.02.2019
#00-33	Wir di CE	INVOICE NO 9404
	WODEL	ACC DATE/TIME 26.01.2019 @ 20:45 HRS

Cost of Repair \$ 12,500.00

Sub-total \$ 12,500.00

Add: 7 % - **GST** \$ 875.00

Total \$ 13,375.00

(SINGAPORE DOLLARS: THIRTEEN THOUSAND THREE HUNDRED AND SEVENTY FIVE ONLY)

LETTER OF AUTHORITY

To Whom It May Concern:

ACCIDENT INVOLVING SHC 2123E / SHA 6022Y						
ALONG Bukit Timah Rd (Near Old Holland Rd) ON 26.01.2019						
I, Phang Kok Wah , NRIC NO. S 1646283G of						
Blk 113 Rivervale Walk #08-39 Singapore 540113						
Owner/hirer of motor vehicle Registration No SHC 2123E ,insured by						
India International Insurance Pte Ltd under Policy No. MCOM 0015						
do hereby authorize M/s Chunni Motor Work Pte Ltd as my authorized representative to write,						
negotiate and settle claim on my behalf in my claim against the owner and/or Motor Vehicle						
Registration No. SHA 6022Y in respect of the above mentioned accident. I also						
hereby authorize that the agreed settlement sum (cost of repair, loss of use, earnings and rental,						
Survey report fee, LTA fee & GIA report fee) be made in favour of my representative, M/s						
Chunni Motor Work Pte Ltd and that the said payment be forwarded to them as full and final						
discharge of my claim.						
Dated: 26.01.2019						
Dated: 26.01.2019						
Signature:						

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

7. By the lodgement of this report to the insurers, you hereby consaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/01/2019 15:20
Date Of Accident	26/01/2019 20:45
Exact Location Of Accident	BUKIT TIMAH RD (NEAR OLD HOLLAND RD)
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC2123E
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	IONIQ HYBRID
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD

Name of Insurance Company THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

YES Fleet Policy

D-18088936MFSH Policy Number

Cover Note Number

Driver

TAN AH LEK Name of Driver S0184546B NRIC No 26/04/1948 Date Of Birth OUTDOOR Occupation 26/07/1967 Date Of Driving Pass

51 YEARS AND 6 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-90051734 Mobile Number

Fax Number

Contact Number

NOEMAIL **EMail Address**

BLK 142 RIVERVALE CRESCENT Address

#15-16

Postcode 540142

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - TAXI DRIVER

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle) 2 involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

GENDER: : MALE

Passenger 2

NAME:

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

3

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHA6022Y

Vehicle Make/Model/Colour

COMFORT TAXI

Details Of Properties

Vehicle Category

TAXI

Name of Driver

HO CHOON KEONG

NRIC/Passport Number

S1725227E

Contact Number

96393657

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

RH FRONT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> Policyholder's Signature Date & Time:

(If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 2045 2019 about Vehicle taxi II mah voad Malt Oh extreme lane. While Strang word Jane: 100 at that time

at that time

DECLARATION

COM We declare the foregoing particulars are true in every respect.

CO. REG. NO. 199303821R

27/1/19 9.55 cm

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

MILEAGE TIME) MILEAGE READING TRAVELLED NAME OF DRIVER DATE (KM) 0075 Tan 140 6 tru re 7 5 1 30 26-01-19 Worlship In Longer wateship out 02-02-19 SHC DI33 E

HOURS OPERATED (TIME)

TO

330

09-00

FROM

0600

DO 45

Our Ref: CT19010822

Date: 29 January 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

26/01/2019 @ 20:45 hrs

ALONG

BUKIT TIMAH RD (NEAR OLD HOLLAND RD)

INVOLVING

SHA6022Y

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 SHC2123E (the "Taxi"). The Taxi was hired to PHANG KOK WAH IC NO S1646283G a registered hirer-operator of Comfort Transportation Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$117.00 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.