

Our Ref : T 0219 / SHD3470R /WT(st)
Your Ref :
Date : 05-Mar-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: 199506041W

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 SHD3470R YOUR INSURED SGU7739M
AND OTHER ON 21.02.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHD3470R** 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 **SGU7739M** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	956.24
6	4 days Loss of Rental @ \$ 115.00 per day	\$	460.00
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 :		\$	1,423.73

HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$	320.00
Total Claims :		\$	1,743.73

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

- a) Original repair bill and photocopies of photographs : 5 pcs.
- b) LTA search slip/s of : SGU7739M
- c) GIA / Police report/s of : SHD3470R
- 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.

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
Industrial Park A
Singapore 768732

Asher Sng (LKKAuto)

From: Asher Sng (LKKAuto)
Sent: Thursday, 5 September 2019 3:01 PM
To: KEITHLEE100877@GMAIL.COM
Subject: ACCIDENT INVOLVING SGU 7739M AND SHD 3470R ON 21/02/2019

Our Ref: CC3/CTI19003566/K1ea3

05 SEPT 2019

SG CAR FOR RENT PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SGU 7739M AND SHD 3470R ON 21/02/2019

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
ALONG****i 40 SHD3470R , SGU 7739M
BRADDELL RD TWDS SLIP RD - CTE AMK****ON 21-Feb-19 20:15**

I / We

HUM KOW POK(Hirer) NRIC No.: **S1469468D**

and/or

AHMAD JUPRI BIN DAR... (Relief) NRIC No.: **S1459182F**

Taxi Number

SHD3470R

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-Feb-2019

Name of Hirer

HUM KOW POK

Hirer NRIC

S1469468D

Signature :



Address

**653 YISHUN AVENUE 4 #09-453
760653**

Contact No.

86660996

Name of Relief

AHMAD JUPRI BIN DAREEM

Relief NRIC

S1459182F

Signature :



Address

**653 YISHUN AVE 4 #06-453
760653**

Contact No.

87665628

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN1710871700

Claim No : SNM19D202891/CHONGBS

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,540.00

DOLLARS ONE THOUSAND FIVE HUNDRED AND FORTY 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

TAN ENG KHOON

Claimant Vehicle No. : SHD 3470R

Insured Vehicle No. : SGU 7739M

Date of Loss : 21/02/2019

Place of Accident : BRADDELL RD TWDS SLIP RD - CTE AMK

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 : SG CAR FOR RENT PTE LTD

Driver Name : YEO AH HENG

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) Global Sum	S\$ 1,540.00
	=====
TOTAL	S\$ 1,540.00
	=====

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :


 CLAIMS DEPARTMENT
 COMFORTDELGRO ENGINEERING PTE LTD
 59 LOYANG DRIVE
 SINGAPORE 508969

Date :

24.2.19

*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: 2

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHD3470R

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
25.08.2016

CHASSIS CODE
KMHLB41UMGU093395

INV. NO/DATE
91428589 27.02.2019

JOB NO.
305271656

ODOMETER READING

DATE/TIME IN
23.02.2019 08:20

Items total		893.68
Add GST @	7.000 %	62.56
Invoice amount		956.24

Issued by : KATHERINETAN 27.02.2019 16:48:56
Repair type : CLSO/57/57
Payment Type/Term: /Credit 30 days

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 N
8010012	91428589	956.24	

Our Ref: CT19020659



Date: 27 February 2019

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	21/02/2019 @ 20:15 hrs
ALONG	BRADDELL RD TWDS SLIP RD - CTE AMK
INVOLVING	SGU 7739M

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 **SHD3470R** (the "Taxi"). The Taxi was hired to **HUM KOW POK IC NO S1469468D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** 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.

READING	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO
621	328	1330	0300
875	254	0635	1850
107	232	2000	0400
243	136	0725	1335
580	337	1430	0500
720	140	0850	1540
117	403	1830	0445
294	177	0630	1345
29	235	1730	0200
102	373	1500	0500
184	182	0645	1520

SHD 3490R

DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		29	1	3		FROM	TO
20/2/19	AJ	29	1	3	273	1750	0500
21/2/19	David Ham	29	1	5	207	0640	1550
21/2/19	AJ	29	1	8	265	2018	0450
22/2/19	David Ham	29	1	9	150	0620	1130
22/2/19	AJ	29	2	2	320	1140	0410
23/2/19	AJ	29	2	3	035	0730	0810
23.2.19	Arndt	19			UN	0820	
26.2.19	Arndt	19			OUT	1015	

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SGU7739M	21 Feb 2019 / 20:15:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

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