

Our Ref : CC19020854/ SHD8555Y /WT(st)Date : 08-Mar-19CDGE Taxi Claims Dept  
59 Loyang Drive 4th Flr  
Singapore 508969ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

**QBE INSURANCE (INT'L) LTD**  
**1 Raffles Quay #29-10**  
**South Tower**  
**Singapore 048583**

Attn : Motor Claims Department

**WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHD8555Y YOUR INSURED**  
**SLC6948T AND OTHER \_\_\_\_\_ ON 28.02.19**We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No :  
SHD8555Y 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 : SLC6948T  
we are submitting these claims for your consideration on behalf of the claimants.**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$ 3,023.64
2	<u>6</u> days Loss of Rental @ <u>\$112.67</u> per day	\$ 676.02
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 :		\$ 3,707.15

**HIRER'S CLAIM**

7	<u>6</u> days Loss of Income @ <u>\$ 80.00</u> per days	\$ 480.00
Total Claims :		\$ 4,187.15

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

- a) Original repair bill and photocopied of photographs 7 pcs.  
b) LTA search slip/s of : 2 VEHICLES  
c) GIA / Police report/s of : SHD8555Y  
d) Letter of authority from owner / hirer / operator  
( ) Witness statement/s ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance  
( X ) Photocopy/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

*William Tan*

CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1842 Email : williamtan@cdge.com.sg

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

A member of

**LETTER OF AUTHORISATION**

(NAF / PAF)


**ACCIDENT INVOLVING i 40 SHD8555Y , SLC6948T  
ALONG ZION ROAD NEAR TIONG BAHRU ROAD****ON 28-Feb-19 16:30**I / We **NG KIM CHUAN** (Hirer) NRIC No.: **S1288249A**and/or **SIM KIM TIAN** (Relief) NRIC No.: **S1588195Z**Taxi Number **SHD8555Y**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

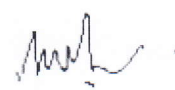
1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
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 **01-Mar-2019**Name of Hirer **NG KIM CHUAN**  
Hirer NRIC **S1288249A**

Signature :

Address **642 YISHUN STREET 61 #03-260  
760642**Contact No. **83683801**Name of Relief **SIM KIM TIAN**  
Relief NRIC **S1588195Z**

Signature :

Address **862 YISHUN AVENUE 4 09-63  
760862**Contact No. **94230506**

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W

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8010056

QBE INSURANCE (INT'L) LTD

1 RAFFLES QUAY SOUTH TOWER #29-10  
SINGAPORE SG 048583

CONTACT NO: 62246633

VEHICLE NO  
SHD8555Y

INV. NO/DATE  
91430480 07.03.2019

MAKE  
HYUNDAI

JOB NO.  
305273708

MODEL  
I-40

ODOMETER READING

DATE OF REG  
15.09.2016

DATE/TIME IN  
01.03.2019 16:55

CHASSIS CODE  
KMHTB41UMGU093716

Description : 3P 28.02.19

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0595	140VC PANEL ASSY-RR DR RH#	1	2,201.11	25.00	1,650.83
0002	28-01-0103-2014	140V3 APP LOGO REAR DOOR L/R CCPL	1	80.00	0.00	80.00
0003	28-01-0103-0007	(140)FRT DOOR LOGO (CCPL) MOQ30 *	1	75.00	0.00	75.00
SUB-TOTAL :						1,805.83

### JOB NATURE

0001	PB	PANEL BEATING		200.00		200.00
0002	SP	SPRAYPAINT CHARGE		600.00		600.00
0003	20-00	TUFF COAT ON AFFECTED PARTS.		20.00		20.00

- 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.
8010056	91430480	3,023.64	

GST REG. NO. M2-8921817-3

## TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 2

8010056

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SINGAPORE SG 048583

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I-40

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DATE OF REG  
15.09.2016

DATE/TIME IN  
01.03.2019 16:55

CHASSIS CODE  
KMHLB41UMGU093716

S/No	Part No.		Qty	Unit Price	%Disc	Net
0004	20-05	RENEW ADVERTISEMENT STICKER-		200.00		200.00
SUB-TOTAL				:		1,020.00

Items total	2,825.83
Add GST @ 7.000 %	197.81
Invoice amount	3,023.64

Issued by : KATHERINETAN 07.03.2019 16:00:49  
Repair type : CFSO/57/57  
Payment Type/Term: /Credit 30 days

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CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010056	91430480	3,023.64	

Our Ref: CC19020854



Date: 07 March 2019

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	28/02/2019 @ 16:30 hrs
ALONG	ZION ROAD NEAR TIONG BAHRU ROAD
INVOLVING	SLC6948T

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHD8555Y** (the "Taxi"). The Taxi was hired to **NG KIM CHUAN IC NO S1288249A** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$112.67** 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.



## Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLC6948T	28 Feb 2019 / 16:30:00	Successful	Q01	QBE INSURANCE (SINGAPORE) PTE LTD

Previous

OK

JHD 22334