

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****Hyundai Ioniq SHC2507G , SLF9819Y  
FINLAYSON GREEN TOWARDS RAFFLES QUAY****ON 02-Apr-19 12:30**

I / We

**YONG HOI YUEN**(Hirer) NRIC No.: **S1153084B**

and/or

(Relief) NRIC No.:

Taxi Number

**SHC2507G**

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

**02-Apr-2019**

Name of Hirer

**YONG HOI YUEN**

Hirer NRIC

**S1153084B**

Signature :



Address

**121A KIM TIAN PLACE #21-70  
161121**

Contact No.

**94378279**



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLF 9819Y (Insd veh)	Model: Hyundai Ionic (1580cc)
	SHC 2507G(TP veh)	
Date of Accident/ Time:	02/04/2019	

Repair Estimate	: \$	4,057.53	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	1,100.00	

Payee Name : ComfortDelGro Engineering Pte Ltd

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: <del>Yes</del> No BOLA Scenario No: <u>NIL</u>
	BOLA Liability: _____ (%)	Assessed Liability (*): <u>50</u> (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.		

Remarks:

#### NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTEASOR IN ANY MANNER WHATSOEVER.
3. AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

Signature of workshop representative / Workshop stamp	Signature of Witness / Workshop stamp (if applicable)
Name of Representative:	Name of Witness:
Date:	Date:
	
Signature of AXA's surveyor/representative:	
Name of AXA's surveyor /Representative:	
Date:	
	
	
	Please forward your cheque made payable to: COMFORTDELGRO ENGINEERING PTE LTD

"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"

Our Ref: CT19040041

Date: 05 April 2019



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      02/04/2019    @ 12:30 hrs  
ALONG                              FINLAYSON GREEN TOWARDS RAFFLES QUAY  
INVOLVING                      SLF9819Y

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 **SHC2507G** (the "Taxi"). The Taxi was hired to **YONG HOI YUEN IC NO S1153084B** 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 **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.

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## Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLF9819Y	02 Apr 2019 / 12:30:00	Successful	A12	AXA INSURANCE PTE LTD

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SNC 25076