

COMFORTDELGRO ENGINEERING

Our Ref : T 0419 / SHD6818C /WT(st)

Your Ref :

Date : 16-Apr-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: 190265420

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 SHD6818C YOUR INSURED SKW 629K
AND OTHER ON 04.04.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHD6818C** 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 **SKW 629K** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,177.00
6	3 days Loss of Rental @ \$ 112.67 per day	\$ 338.01
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 :		\$ 1,522.50

HIRER'S CLAIM

7	3 days Loss of Income @ \$ 80.00 per days	\$ 240.00
Total Claims :		\$ 1,762.50

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

- a) Original repair bill and photocopies of photographs : 6 pcs.
- b) LTA search slip/s of : SKW 629K
- c) GIA / Police report/s of : SHD6818C
- 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

Defu
6 Defu Avenue 1
Singapore 539537

Yishun
50 Yishun Industrial Park A
Singapore 768732

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Tuesday, 12 November 2019 12:18 PM
To: NGDJONI@GMAIL.COM
Subject: ACCIDENT INVOLVING SKW 629K AND SHD 6818C ON 04/04/2019

Our Ref: CC3/CTI19006158/K1ea3

12 NOV 2019

NG DJONI

Dear Sir/Madam,

ACCIDENT INVOLVING SKW 629K AND SHD 6818C ON 04/04/2019

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 SHD6818C , SKW 629K

ON 04-Apr-19 14:30

HAVELOCK RD TWDS MARINA BLVD NEXT TO (MOM BUILDING)

I / We

LEE CHENG HAI

(Hirer) NRIC No.:

S1666351D

and/or

(Relief) NRIC No.:

Taxi Number

SHD6818C

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

04-Apr-2019

Name of Hirer

LEE CHENG HAI

Hirer NRIC

S1666351D

Signature :



Address

235 ANG MO KIO AVENUE 3 #08-1120
560235

Contact No.

91991623

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN1668918022

Claim No : 5NM19D202890/ONGCK

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,500.00

DOLLARS ONE THOUSAND AND FIVE HUNDRED 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

Claimant Vehicle No. : SHD 6818C

Insured Vehicle No. : SKW 629K

Date of Loss : 04/04/2019

Place of Accident : HAVELOCK RD>MARINA BLVD NEXT TO MOM BUILDING

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 : NG DJONI

Driver Name : NG DJONI

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\$ 1,500.00
	=====
TOTAL	S\$ 1,500.00
	=====

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :



Date :

4/12/19

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
88 LOYANG DRIVE
SINGAPORE 638983

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"

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S) PTE LTD
SPRINGLEAP TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
SHD6818C

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
23.04.2015

CHASSIS CODE
KMHLH41UMFU068770

NO/DATE
91437543 10.04.2019

JOB NO.
305284524

ODOMETER READING

JOB TYPE

Description : 3P 04.04.19

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt.	1,100.00
Add GST @ 7.000 %	77.00
Total Invoice amount	1,177.00

Issued by : KATHERINETAN 10.04.2019 17:14:53
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

WE/WE SHALL BEAR ALL REASONABLE EXPENDITURE AGAINST THEFT OR ACCIDENTAL DAMAGE. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARDS OR OTHER INSTRUMENTS BELONGING TO CUSTOMERS WHOSE VEHICLES ARE DRIVEN AND TESTED AT OURS. CUSTOMERS MUST INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 WORKING DAYS (EXCLUDING PUBLIC HOLIDAYS) ADVISE THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER. INTEREST OF 4% PER ANNUM 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 DATE. 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.

Our Ref: CT19040100

Date: 10 April 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	04/04/2019 @ 14:30 hrs
ALONG	HAVELOCK RD>MARINA BLVD NEXT TO MOM BUILDING
INVOLVING	SKW629K

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 **SHD6818C** (the "Taxi"). The Taxi was hired to **LEE CHENG HAI IC NO S1666351D** a registered hirer-operator of **Comfort Transportation 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.

[illegible]

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name

5KW629K	04 Apr 2019 / 14:30:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
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[Previous](#)

OK

SHD 6818C