

INS. CASE OWNER:

Voc

CC 4 / ASM 1900 bbb / MPAS

IDAC:

Surveyor:

Ank

DOI:

ASSIGNMENT

18/4/19

Date / Time:

18/4/19

Registered in Meramen:

18/4/19

Pre-assign / CCU / FTE

Insured Vehicle No.:

SFZ 3639E

Claim No.:

Samoikoc

Name of Insured:

Wong Kay Thong

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II : SS

D.O.A.:

11/4/19 (Thurs)

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHE 1854K

INSRS:

WSP:

Tel:

Liability:

RMKS:

Whiteway

INSRS:

WSP:

Tel:

Liability:

RMKS:

INSRS:

WSP:

Tel:

Liability:

RMKS:

INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medinal Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

29/4/19 - OI reversed into parking (H & Grace)
when TP taxi

15/6/19 - DS form sent

21/6/19 - File -> MC to close

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(days)

Reduction:

%

FINAL SETTLEMENT

Date/Time:

Confirm with William

Email ☐ Call ☐

Final Liability:

%

(60)

(Agreed / Assessed)

BOLA S/N No. : 24

Email ☐ Call ☐

Repair Cost:

w/lat \$1284.00

Loss of Rental (LOR):

\$422.24

(4 days)

X \$106.81

Loss of Use (LOU):

\$50

(\$ x 4 days)

Loss of Income (LOI):

\$50

(\$ x 4 days)

LOR only ☐LOU only ☐LOR + LOU ☐LOR + LOI ☐

(Tick only one)

HA/LTA Search

\$249

Medical:

\$-

Disbursement:

\$-

(e.g. Tow/ Independent)

Legal Cost:

\$-

Total:

\$1918.73

Global Sum SS: 1918.73

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

\$1918.73

Name 1:

Cmfu Adelgo Engineering Pte Ltd.

Payee 2: (Strike if N.A.)

\$-

Name 2:

Payee 3: (Strike if N.A.)

\$-

Name 3:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Vth: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC 1854K Yr Regn: 26 Apr 2012

Type: M. Car / M. Cycle / Bus / Van / Lorry / T@ / Prime Mover /

Truck / Trailer or

Make: Honda - Ende cc: 1991

Colour: Blue A/C: Insd / Std / NI / NA

Sp. Reading: 249057 T/Radio: Insd / Std / NI / NA

Eng/No: _____

C/No: KMH6T41VMCA823498

Gen. Cond: Good / Car / Poor / Burnt

Steering: Insd / Jammed / Leaked / Burnt or

Brake: Insd / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size: F: 245/60R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OUTSU / PIR / SUMI /

TOYO / YOKO or Wentha

Front: _____ Rear: _____

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 11/4/19 D.O.I. 15/4/19

Survey held at CDHE (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Front

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>215 \$ 12w CRD 656.72/359</u>
	<u>AXA</u>
	<u>42</u>

Date/Time, File Pass to: ☐ : Prel. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: _____

Lump Sum / Bldg: _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS \$

Photos

Other

TOTAL

REPAIR ESTIMATE*

VEHICLE NO : SHC 1854K

DATE 12/4/2019 16:31

Liquor

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover			\$ 538.80
	Front Bumper Bracket Top (RH)			\$ 22.40
	Front Bumper Protector (RH)			\$ 29.20
	Front Bumper Bracket (RH)			\$ 20.10
	Headlamp (RH)			\$ 797.90
	SUB TOTAL			\$ 1,408.40
	LESS 20%			\$ 281.68
	DISCOUNTED TOTAL			\$ 1,126.72
	Labour Charge			200
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 300.00
	Wiring Charge			\$ 30.00
	TOTAL LABOUR			\$ 730.00
	ESTIMATE TOTAL			\$ 1,856.72
<p> <i>Ka Lin 14/4/19</i> <i>15/4/19 1545h.</i> <i>20/5</i> <i>4/5</i> <i>At the Repair shop</i> </p>				
<p> This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company. </p>				

COMFORTDELGRO

Date/Time: 12.04.2019 16:00

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO. 305286914

OWNER
COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755

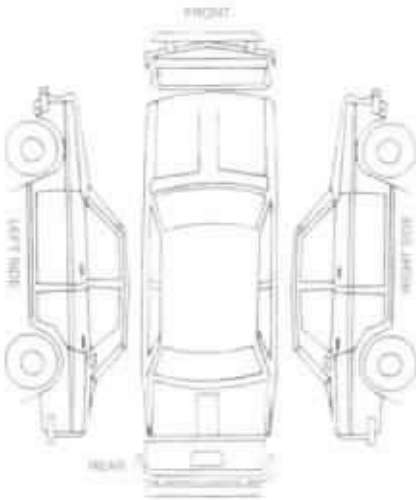
REGH NO.	SHC1854K	MILEAGE
MAKE	HYUNDAI	FUEL
MODEL	SONATA	DATE/TIME IN
YR OF MANU.	26.04.2012	TARGET DATE
CHASSIS CODE	KMHET41VMCA823498	COMPLETION DATE/TIME

JUNT CARD NO.

JOB DESCRIPTION

Accident Date: 11.04.2019
NATURE: 3P 11.04.19/ SHORT TERM

S/NO LABOR CODE DESCRIPTION



KEY & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Redemption Slip

Exit Pass

Vehicle No. SHC1854K JU AXA

Vehicle No. SHC1854K

I Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

Our Job Ref No 305286914
Date : 17/04/2019

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

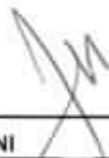
FINALIZATION FORM


To : LKK Fax :
Attn : KALVIN
: SHC1854K Date of Accident : 11/04/19

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: AXA --- SFZ3639E
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount _____
 - (b) Labour Charges ### _____
 - Total for Part-By-Part Repair Cost** _____
 - (c) Lumpsum Repair (if applicable) N _____
 - Total for Lumpsum repair cost after Less: 20% \$1,200.00
 - Final Lumpsum Repair cost** _____
3. Estimated normal period for repairs: 2 working days
4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : KALVIN
Date : 22/4/19

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Final Amount Subject to Insurance Approval

REPAIR ESTIMATE*

VEHICLE NO : SHC 1854K

DATE 12/4/2019 16:31

Ligum

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover — <i>cut</i>			\$ 538.80
	Front Bumper Bracket Top (RH) <i>Xone</i>			\$ 22.40
	Front Bumper Protector (RH) <i>Xone</i>			\$ 29.20
	Front Bumper Bracket (RH) <i>Xone</i>			\$ 20.10
	Headlamp (RH) — <i>hanged</i>			\$ 797.90
	SUB TOTAL			\$ 1,408.40
	LESS 20%			\$ 281.68
	DISCOUNTED TOTAL			\$ 1,126.72
	Labour Charge			200
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 300.00 200
	Wiring Charge			\$ 30.00 30
	TOTAL LABOUR			\$ 730.00
	ESTIMATE TOTAL			\$ 1,856.72
<p><i>Ka Lu 14/4/19</i></p> <p><i>15/4/19 1545h.</i></p> <p><i>2 By 5</i></p> <p><i>4/5</i></p> <p><i>Atte Rpm pth</i></p>				
<p>This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.</p>				

79 sun
plus



Hsiao Tong (LKKAUTO)

From: William Tan Thoo Seng <williamtan@cdge.com.sg>
Sent: Monday, 10 June 2019 8:36 AM
To: Hsiao Tong (LKKAUTO)
Subject: Re: Your Ref: T 0419/ SHC 1854K / WT(st) *Our Ref: CC4/ASM19006667/K1pa3 [ACCIDENT INVOLVING SFZ 3639E(AXA) AND SHC 1854K ON 11/04/2019]

Without Prejudice.

Dear Hsiao Tong

Strictly for purpose of an amicable settlement, we accept your global offer. Kindly forward your D.V.

Thank you.

Best Regards
William Tan
Claims Department | ComfortDelgro Engineering Pte Ltd
Off : 62148737 | Fax : 62141843

From: Hsiao Tong (LKKAUTO) <chewht@lkkauto.com>
Sent: Saturday, 8 June 2019 2:22 PM
To: William Tan Thoo Seng; Catherine Koh Mui Gek
Subject: Your Ref: T 0419/ SHC 1854K / WT(st) *Our Ref: CC4/ASM19006667/K1pa3 [ACCIDENT INVOLVING SFZ 3639E(AXA) AND SHC 1854K ON 11/04/2019]

Your Ref: **T 0419/ SHC 1854K / WT(st)**
Our Ref: CC4/ASM19006667/K1pa3

Without Prejudice

Dear Sirs/Mdm,

ACCIDENT INVOLVING SFZ 3639E(AXA) AND SHC 1854K ON 11/04/2019

We refer to the above matter.

We propose settlement at a global sum of **\$1,900.00(all-in)**.

Please confirm acceptance.

"Please note that our proposal and correspondence with you is strictly on a without prejudice basis and should not be construed as an admission of liability on our part and/or that of our policyholder and/or the authorised driver. The terms of our without prejudice engagement should not be disclosed in any other related matter(s) in respect of this accident nor should it be binding in any other related claims."

Best Regards,
Hsiao Tong, Chew | Case Handler
LKK Auto Consultants Pte Ltd
Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

Our Ref : T 0419/ SHC1854K /WT(st)

Your Ref :

Date : 24-Apr-19

AXA Insurance Pte Ltd
8 Shenton Way
#24-01, AXA Tower
Singapore 068811

Attn : Motor Claims Department

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 9758

www.cdge.com.sg

Company Registration No: 198000000

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
Yishun Industrial Park A
Singapore 768732

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC1854K YOUR INSURED SFZ3639E
AND OTHER ON 11.04.19**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : **SHC1854K** 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 : **SFZ3639E** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair		\$ 1,284.00
2	5 days Loss of Rental @	\$ 106.81 per day	\$ 534.05
3	Survey Report Fees	(Surveyed by M/s LKK)	\$ -
4	GIA / LTA Search Fee		\$ 7.49
5	GIA / Police Report Fees		\$ -
6	Towing Fees		\$ -
Sub Total :			\$ 1,825.54

HIRER'S CLAIM

7	5 days Loss of Income @	\$ 80.00 per days	\$ 400.00
Total Claims:			\$ 2,225.54

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 : SFZ3639E
- c) GIA / Police report/s of : SHC1854K
- d) Letter of authority from owner / hirer / operator
 - (X) Photocopies of Accident Scene Photo/s () Towing receipts
 - () Witness statement/s (x) Rental Rate letter (x) Downtime/Mileage record

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.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

09 MAY 2019

GOH KAY THONG
BLK 12 RIVERVALE LINK
#17-22
SINGAPORE 545045

Dear Sir/ Mdm

OUR REF : CC4/ASM19006667/K1pa3

YOUR REF : SFZ 3639E

ACCIDENT INVOLVING SFZ 3639E AND SHC 1854K ALONG/AT CARPARK ALONG FARLEIGH AVE ON 11/04/2019

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SHC 1854K against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your driver's favour as your vehicle reversing out from parking lot and collided with third party who driving straight. Under Motor Accident Guide, Vehicle reversing in/out or moving in/out of parking lot should exercise greater caution. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 10 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at chewht@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely



Chew Hsiao Tong
Case Handler
DID: 6742 3197
FAX: 6741 4108
EMAIL: chewht@lkkauto.com

Cc *AXA Insurance Pte Ltd*
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGSONATA SHC1854K , SFZ3639E
SERANGOON GARDEN CIRCUS

ON 11-Apr-19 17:10

I / We

FAN MEI SIONG

(Hirer) NRIC No.: S1249040B

and/or

(Relief) NRIC No.:

Taxi Number

SHC1854K

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

12-Apr-2019

Name of Hirer

FAN MEI SIONG

Hirer NRIC

S1249040B

Signature :



Address

633 YISHUN STREET 61 #10-24
760633

Contact No.

90616023



HT

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SFZ 3639E (Insd veh)	Model: Hyundai Sonata (1991cc)
	SHC 1854K (TP veh)	
Date of Accident/ Time:	11/04/2019	

Repair Estimate	: \$	1,986.69	
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)	: \$	1,900.00	

Payee Name : COMFORTDELGRO ENGINEERING PTE LTD

Is Third Party Workshop GIA Registered? [x] YES [] NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: <u>24</u>
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.		
Remarks:		

NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 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.
- 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.

<p>Signature of workshop representative / Workshop stamp Name of Representative: _____ Date: _____</p> <p><i>17-6-19</i></p> <p>LKK</p> <p>COMFORTDELGRO ENGINEERING PTE LTD 25 LONKING DRIVE SINGAPORE 508553</p> <p><i>AUC</i></p> <p>Signature of AXA's surveyor/representative: Name of AXA's surveyor/Representative: _____ Date: <i>24/6/2019</i></p>	<p>Signature of Witness / Workshop stamp (if applicable) Name of Witness: _____ Date: <i>24-6-19</i></p> <p>COMFORTDELGRO ENGINEERING PTE LTD 25 LONKING DRIVE SINGAPORE 508553</p>
--	--

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

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO
SHC1854K

MAKE
HYUNDAI

MODEL
SONATA

DATE OF REG
26.04.2012

CHASSIS CODE
KMHKT41VMCA823498

NO/DATE
91439392 22.04.2019

JOB NO.
305286914

ODOMETER READING

JOB TYPE

Description : 3P 11.04.19

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt.	1,200.00
Add GST @ 7.000 %	84.00
Total Invoice amount.	1,284.00

Issued by : KATHERINETAN 22.04.2019 15:22:36
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

1. VEHICLE TRAFFIC IS RETURNABLE AND CONDITIONS APPLY. THE TRUST OR CONFIDENTIALITY OF THE COMPANY ACCEPTS A RESPONSIBILITY FOR LOSS OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DAMAGED AND TRAFFIC IS RETURNED TO THE COMPANY.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 15 DAYS FROM SUCH DELIVERY OR WITHIN 45 DAYS OF THE COMPANY OF ANY COMPLAINTS. OTHERWISE THE VEHICLE WILL BE RETURNED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY DEBIT OR PAYMENT DUE AND DUE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT OR AFTER 30 DAYS FROM THE INVOICE FOR THE PERIOD OF DEFAYT.

4. PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCY WITHIN 15 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND ORIGINAL.

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: CT19040341

Date: 22 April 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 11/04/2019 @ 17:10 hrs
ALONG SERANGOON GARDEN CIRCUS
INVOLVING SFZ3639E

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 **SHC1854K** (the "Taxi"). The Taxi was hired to **FAN MEI SIONG IC NO S1249040B** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$106.81** 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.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SFZ3639E	11 Apr 2019 / 17:10:00	Successful	A12	AXA INSURANCE PTE LTD

Previous OK

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM19006667/K1pa3q2

8 SHENTON WAY #24-01

Date : 05-07-2019

AXA TOWERSINGAPORE 068811



ATTN:VALE OH

Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SFZ 3639E	Veh. Inspected	SHC 1854K
Policy No.	VPA/P2078101	Coverage (\$)	0.00
Claim No.	S9M01K0C	Excess (\$)	0.00
Assign From		Assign Date	15/04/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KMHET41VMCA823498	Colour	BLUE
Odometer	249057	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	215/60 R16	WEST LAKE	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	11/04/2019	Inspection Date	15/04/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1854K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FRONT BUMPER COVER (CONSISTENT)	CUT	538.80	538.80
1	FRONT BUMPER BRACKET TOP (RH) (CONSISTENT)	SERVICEABLE	22.40	-
1	FRONT BUMPER PROTECTOR (RH) (CONSISTENT)	TO REPAIR SEE LABOUR	29.20	-
1	FRONT BUMPER BRACKET (RH) (CONSISTENT)	SERVICEABLE	20.10	-
1	HEADLAMP (RH) (CONSISTENT)	GRAZED	797.90	797.90
	LESS 20% DISCOUNT		-281.68	-267.34
			1,126.72	1,069.36
	<u>LABOUR</u>			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT BUMPER PROTECTOR (RH) .		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.		30.00	30.00
			730.00	430.00
GRAND TOTAL			1,856.72	1,499.36
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,200.00

Report Ref No. CC4/ASM19006667/K1pa3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 EMAIL FROM WORKSHOP (THIRD PARTY PRO)msg	Letters and Correspondence	Workshop	KADRI Muteen	15 April 2019
 CIA REPORT OF SHC1854K (TP) PDF	Reports & Statement	GIA Report	KADRI Muteen	15 April 2019
 P2078101_MB_00001_1.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of insurance	OH Vale	15 April 2019
 P2078101_CI_00001_1.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of insurance	OH Vale	15 April 2019