

Our Ref : T 0419 / SH 6203A /JW(st)
Your ref : _____
Date : 08-May-19

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

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: 199506048W

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
501 Yishun Industrial Park A
Singapore 768732

Attn : **Motor Claims Department**

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SH 6203A YOUR INSURED GY 8152C
AND OTHER _____ ON 23.04.19**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 6203A 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 GY 8152C we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

- 1 Cost of Repair
- 2 3 days Loss of Rental @ \$ 128.40 per day
- 3 Survey Report Fees (Surveyed by M/s LKK)
- 4 LTA Search Fees
- 5 GIA / Police Report Fees
- 6 Towing / Medical / Transportation Fees

\$	321.00
\$	385.20
\$	-
\$	7.49
\$	-
\$	-
Sub Total :	\$ 713.69

HIRER'S CLAIM

- 7 3 days Loss of Income @ \$ 80.00 per day

\$ 240.00

Total Claims: \$ 953.69

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

- a) Original repair bill and photocopies of photographs : 7 pcs.
- b) LTA search slip/s of : GY 8152C
- c) GIA / Police report/s of : SH 6203A
- d) Letter of authority from owner / hirer / operator
 - () Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
 - (X) Photograph/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

Jim Wong

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

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

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****Hyundai Ioniq SH6203A , GY8152C****ON 23-Apr-19 19:15****ALONG AMOY ST TOWARDS CROSS ST AT BOON TAT ST T-JUNCTION**

I / We

HOH CHIN HUAT(Hirer) NRIC No.: **S7040784A**

and/or

(Relief) NRIC No.:

Taxi Number

SH6203A

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

24-Apr-2019

Name of Hirer

HOH CHIN HUAT

Hirer NRIC

S7040784A

Signature :



Address

**111 EDGEFIELD PLAINS #09-402
820111**

Contact No.

92992556

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 1

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE SG 069110

CONTACT NO: 62239433

Description : 3P 23.04.19

S/No Part No.

PART REQUISITION

JOB NATURE

0001 PB

PANEL BEATING

100.00

100.00

0002 SP

SPRAYPAINT CHARGE

200.00

200.00

SUB-TOTAL

:

300.00

Items total

300.00

Add GST @

7.000 %

21.00

Invoice amount

321.00

- 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.
8010325	91441250	321.00	

Workshops59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Ubi Road 3 Singapore 40864924 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

GST REG. NO. M2-8921817-3

TAX INVOICECOMPANY REG. NO.: 199506048W
Page: 2

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO
SH 6203AMAKE
HYUNDAIMODEL
IONIQ(G2)DATE OF REG
05.07.2018CHASSIS CODE
KMHC851CVJU103405INV. NO/DATE
91441250 30.04.2019JOB NO.
305290086

ODOMETER READING

DATE/TIME IN
24.04.2019 12:30Issued by : KATHERINETAN 30.04.2019 14:36:38
Repair type : CLSO/57/57
Payment Type/Term: /Credit 30 days

- 1) 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.
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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.
8010325	91441250	321.00	

Our Ref: CT19040670

Date: 30 April 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	23/04/2019 @ 19:15 hrs
ALONG	ALONG AMOY ST TWDS CROSS ST AT BOON TAT ST
	T-JUNCT
INVOLVING	GY8152C

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 **SH6203A** (the "Taxi"). The Taxi was hired to **HOH CHIN HUAT IC NO S7040784A** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$128.40** 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.

SH 6203A

203A
MILEAGE READING

NAME OF DRIVER

DATE _____

HOURS OPERATED (TIMI)

TO

MILEAGE
TRAVELLED
(KM)MILEAGE
TRAVELLED
(KM)

HOURS OPERATED (TIME)

FROM

TO

FROM	TO
------	----

FROM	TO
------	----

23/4/11

24/4

Accident
repair

the

26/4

24

75

1230

1430

1430

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GY8152C	23 Apr 2019 / 19:15:00	Successful	E04	EQ INSURANCE COMPANY LTD

Previous

OK

