

Our Ref : T 0519 / SHA1437S /WT(st)

Your Ref :

Date : 17-Jun-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: 199506048W

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 SHA1437S YOUR INSURED SJF1610H
AND OTHER 5 VEHICLES ON 28.05.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA1437S 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 SJF1610H we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 4,761.50
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 :		\$ 5,107.00

HIRER'S CLAIM

7	3 days Loss of Income @ \$ 80.00 per days	\$ 240.00
Total Claims :		\$ 5,347.00

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

- a) Original repair bill, survey bill/report & original/ scan photographs : 7 pcs.
- b) LTA search slip/s of : SJF1610H
- c) GIA / Police report/s of : SHA1437S
- 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
Yishun
 Shun Industrial Park A
 Singapore 768732

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING i 40 SHA1437S , SJF1610H , SLM7392L , ... ON 28-May-19 17:25
ALONG AYE TWDS CITY BEFORE JURONG TOWN HALL EXIT**I / We **NG HOCK CHAY** (Hirer) NRIC No.: **S0213286I**and/or **SHAHRUDIN BIN MOHD...** (Relief) NRIC No.: **S8119252I**Taxi Number **SHA1437S**

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 **29-May-2019**Name of Hirer **NG HOCK CHAY**
Hirer NRIC **S0213286I**

Signature :

Address **622 JURONG WEST STREET 61 #04-...
640622**Contact No. **93632039**Name of Relief **SHAHRUDIN BIN MOHD SHAH**
Relief NRIC **S8119252I**

Signature :

Address **197D BOON LAY DRIVE #02-119
644197**Contact No. **90231904**

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
SHA1437S

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
26.11.2015

CHASSIS CODE
KMHLB41UMGU080593

NO/DATE
91448038 07.06.2019

JOB NO.
305299294

ODOMETER READING

JOB TYPE

Description : 3P 28.05.2019

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	4,450.00
Add GST @ 7.000 %	311.50
Total Invoice amount	4,761.50

Issued by : CHEWBEELENG 07.06.2019 08:22:40
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.
- 2) 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.
- 3) 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.
- 4) 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: CT19050792

Date: 06 June 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	28/05/2019 @ 17:25 hrs
ALONG	AYE TWDS CITY BEFORE JURONG TOWN HALL EXIT
INVOLVING	SJF1610H, SLM7392L, SLA1767S, SLM1674M, SJR3470T, SLM6122G

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 **SHA1437S** (the "Taxi"). The Taxi was hired to **NG HOCK CHAY IC NO S0213286I** 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

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Enquire Vehicle Insurer

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

SJF1610H 28 May 2019 / 17:25:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

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[OK](#)

SHA14375