

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

To: M/s EQ INSURANCE COMPANY LTD

Date: 02/01/2020

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	GBF 9392D (Insd Veh) Your Ref. No. : DM19HO02443-JG		DM19HO02443-JG	
venicie No.	SHA 1713U	(TP Veh)	Our Ref. No. :	CC3/EQI19015380/K1gb3s2
Date of Accident	29/8/2019			

	100%	
: \$	7,490.00	(W/GST)
: \$	250.00	5 days
: \$	563.35	5 days
: \$	7.49	
: \$		
	8,310.84	
: \$	8,310.00	(GLOBAL SUM)
:		
	: \$: \$: \$: \$ 7,490.00 : \$ 250.00 : \$ 563.35 : \$ 7.49 : \$

Pay	yment Instruction: Payee's Breakdown		
1)	COMFORTDELGRO ENGINEERING PTE LTD	: \$	8,310.00
		: \$	

NUR SHAQILAH LKK Auto Consultants Pte Ltd 7

Vivian

COMFORTDELGRO ENGINEERING

Our Ref

T 0819 / SHA1713U /JW(st)

Your ref : Date

10-Sep-19

CDGE Taxi Claims Dept

59 Loyang Drive 4th Flr

Total Claims: \$

Singapore 508969

ComfortDelGro Engineering Pte Ltd 205 Braddell Road Singapore 579701

> Mainline +65 6383 6280 Facsimilie +65 6280 9755

> > www.cdge.com.sg

Company Repetration 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

320 Ubi Road 3 Singapore 408649

Senoko 24 Senoko Loop Singapore 758156

Sungel Kadut 7 Sungel Kadut Way Singapore 728791

Yishun hun Industrial Park A Singapore 768732

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

Singapore 069110

Attn: Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA1713U YOUR INSURED GBF9392D ON 29.08.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No: SHA1713U 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 **GBF9392D** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	7,490.00
2	5 days Loss of Rental @ \$ 112.67 per day	\$	563.35
3	Survey Report Fees (Surveyed by M/s LKK)	\$	-
4	LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transporation Fees	\$	-
	Sub Total	: \$	8,060.84
н	RER'S CLAIM		.894e037674378
7	5 days Loss of Income @ \$ 80.00 per day	\$	400.00

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

a) Original repair bill:

b) LTA search slip/s of :

GBF9392D

c) GIA / Police report/s of :

SHA1713U

d) Letter of authority from owner / hirer / operator

() Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance

() Photograph/s of Accident Scene (x) Downtime/Mileage record

(x) Rental Rate letter

8,460.84

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.

A member of











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

Our Ref: CC3/EQI19015380/K1gb3

31 OCTOBER 2019

MOJITO VENTURES PTE LTD 2 GAMBAS CRESCENT #01-31 SINGAPORE 757046

Dear Sir/Madam,

ACCIDENT INVOLVING GBF 9392D AND SHA 1713U ON 29/08/2019

We refer to the above accident. We are the Appointed Surveyor and Loss Adjuster Company by your Motor Insurer (EQ INSURANCE COMPANY LIMITED) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

This is to inform you that we received a Third Party Claim from SHA 1713U.

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 note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries. (NO ACTION IS REQUIRED)

Yours faithfully,

CECILIA CHONG

Case Handler

DID: 6749 4274 FAX: 6741 4108

EMAIL: ceciliachong@lkkauto.com

c.c. EQ INSURANCE COMPANY LIMITED (Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA1713U , GBF9392D , UNKNOWN

ON 29-Aug-19 01:45

ALONG

NEW BRIDGE RD TWDS VICTORIS ST

I / We

YEO ENG SENG

(Hirer) NRIC No.:

S1173193G

and/or

PANG KOK KAY

(Relief) NRIC No.: SXXXX270G

Taxi Number

SHA1713U

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-Aug-2019

Name of Hirer

YEO ENG SENG

Hirer NRIC

SXXXX193G

Signature:

Address

12 FARRER PARK ROAD #18-19

210012

Contact No.

91836496

Name of Relief

PANG KOK KAY

Relief NRIC

SXXXX270G

Signature :



Address

50 DORSET ROAD 12-134

210050

Contact No.

97924445

COMFORTDELGRO ENGINEERING

A member of ComfortDeLGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6260 Facsimile + 65 6280 9755

Workshops
59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Roed Singapore 603288
300 Ubi Road 3 Singapore 408749
REG. NO.: 199506048W

Page: 1

NO/DATE 91464397 03.09.2019

JOB NO. 305328651

MODEL ODOMETER READING DATE OF REG 17.03.2016

CHASSIS CODE KMHLB41UMGU085591 JOB TYPE

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00 SINGAPORE 069110

CONTACT NO: 62239433

Description: 3P 29.08.19/C

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt Add GST @ 7.000 %

Total Invoice amount

MAKE

I - 40

HYUNDAI

7,490.00

Issued by Repair Type : Payment Type/Term : CHEWBEELENG 03.09.2019 14:11:54 CLSO/57/57 /Credit 30 days

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.
	Y		

Our Ref: CT19080736

Date: 03 September 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

29/08/2019 @ 01:45 hrs

ALONG

NEW BRIDGE RD TWDS VICTORIS ST

INVOLVING

GBF9392D, FENCING

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 SHA1713U (the "Taxi"). The Taxi was hired to YEO ENG SENG IC NO SXXXX193G 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 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 Manager, Fleet Safety

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

th 171211	MILEAGE READING THEAGE HOURS OPERATED (TIME) S. YISO S. 8 2 3 8 6 373 (504 063 1514 S. YISO S. 8 2 5 1 8 132 (517 0202 C. (dent) Repair L. V.	
PERATED (T	28.08 FE 28.08 ES 28.08 ES 29 SS 29	

ï

Enquire Vehicle Insurance Details

Vehicle No. Inciden

Search Status

Insurance Company Code

Insurance Company Name

GBF9392D

29 Aug 2019 / 01:45:00

Successful

E04

EQ INSURANCE COMPANY LTD

Previous

ОК

SHAPBY