

000000

INS. CASE OWNER:

CC 3 / CTI1901 5665, KLEB

LKK:  
IDAC:

Surveyor:

KALVIN

DOI:

ASSIGNMENT

3/1/19

Date / Time:

3/1/19

Registered in Merimen:

4/1/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

YA 5559 L

Name of Insured:

TRK SERVICES P/L

Insured Tel No.:

HP:

Excess Sec II : \$5

D.O.A.:

30/8/19

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

WIKIRAJAN PHARMASAJI

Driver Tel No.:

(V/L YES / NO)

Claim No.:

SWM1902041V402/19

Policy No.:

0ML6W1911161900

Make / Model:

ISUZU

Place of Accident:

PAINE LORUS LRESLANT

Of GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability:

% Final ? Yes / No

SH 8213H



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

LOGE  
m



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date/ Time	STAGE	DATE / PIC
SH 8213H - 2	Non-Reporting 1st (1st)	
YA 5559 L - 1	Non-Reporting 1st (2nd)	
	Non-Reporting 1st (Final)	
	Notification 1st (if non-pickup)	
	Call Of:	28/9/19
	After call 1st to OI	
	Documentation Check List: Handler	Typist
	Notification 1st (if non-pickup)	
	After call 1st to OI	
	Authorisation To Act:	
	Release Voucher:	
	Final Repair Bill:	
	Car Rental Invoice:	
	Towing Invoice:	
	LTA / GIA:	
	Medical Bill:	
	PIR:	
	Mandate/Reject Instruction:	
	LOD	
	Payment Breakdown Form:	
	Post-Repair Photos:	
	Others:	

<b>PRELIMINARY ADVICE</b>	Date/Time:	Sent By:	Confirm by: HOK
<b>FINALIZATION</b>	Date/Time:	Confirm with:	Confirm by: HOK
Repair Cost:	45 \$52,100	( 2 days) Reduction:	46 %
<b>FINAL SETTLEMENT</b>	Date/Time: 04-10-19	Confirm with: WILSON	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.:	PAUL
Repair Cost:	W/L 51 \$52,247.00	DID REVERSE IN TP	
Loss of Rental (LOR):	\$5 330.92	( 2 days) x + 105.96	
Loss of Use (LOU):	\$5 -	(5 x days)	
Loss of Income (LOI):	\$5 -	(5 x days)	
LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LO <input type="checkbox"/>	(Tick only one)	
GIA/LTA Search	\$57.99		
Medical:	\$5 -		
Disbursement:	\$5 -	(e.g. Tow/ Independent)	
Legal Cost:	\$5 -		
<b>Total:</b>	\$52,585.41	<b>Global Sum \$5:</b>	
<b>FINAL PAYMENT</b>	Date/Time: 04-10-19	Confirm with: WILSON	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	\$52,585.41	Name 1:	CONFEDERATED ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	\$5	Name 2:	
Payee 3: (Strike if N.A.)	\$5	Name 3:	





Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (665) 62563561 FAX : (665) 62564315

Your ref: To Be Advised  
Our ref: CC3/CTI19015665/K1eb3

Date: 04.09.2019

The Motor Claims Department  
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

**PRELIMINARY ADVICE OF VEHICLE NO.**

**SH8213H**

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 03.09.2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	3,856.48
Revised Estimate Amount	: S\$	2,680.48
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

**Description of Damage:**

The vehicle sustained damages at the  
Front Portion



**Comments/Present Status:**

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG  
Licensed Appraiser

COMFORTDELGRO ENGINEERING PTE LTD

Date: 03.09.2019

REPAIR ESTIMATE

Time: 10:55:44

Page: 1

China Taiping 4S  
Lkk-Kalvin

TS

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010045  
 ADDRESS : COMFORT TRANSPORTATION PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65508755

JOB NO : 305329496  
 REGN NO : SH 8213H  
 MILEAGE : 0000000000  
 MAKE : MERCEDES BENZ  
 MODEL : E220CDI(E5)  
 DATE OF REGN : 18.10.2013  
 DATE/TIME IN : 02.09.2019 14:30  
 ACCIDENT DATE : 30.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

JOB / PARTS DESCRIPTION	QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0001 04-01-0202-0572-A BONNET	1		2,850.60	20.00	2,280.48
0002 04-01-0202-0582-A RADIATOR GRILLE	1		1,220.00	20.00	976.00

SUB-TOTAL : 3,256.48

## JOB NATURE

0000 PB	PANEL BEATING	300.00	20.00
0001 SP	SPRAYPAINT CHARGE	300.00	20.00

SUB-TOTAL : 600.00

MVA NAME & SIGNATURE  
 DATE :

SURVEYOR NAME & SIGNATURE  
 DATE :

AUTHORISED : YES / NO

TOTAL : 3,856.48

- Third Party Insurance
- No illegal works
- Supplemental Insurance and is subject to the relevant insurance company

Acknowledged by Re-insurer

Signature:

Date:

Kalvin Lkk

3/9/19 1100h

2 hrs

1/1

After Repair p Loko

CC31C11190156631K1263

COMFORTDELGRO  
ENGINEERING

Our Job Ref No : 305329496

Date : 05/09/19

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No : SH 8213H

Date of Accident : 30-Aug-19

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

- The repair job shall bill to: CHINA TAIPING --- YQ5559L
- The finalized amount shall be:
  - Spare Parts after List discount
  - Labour Charges
  - Total for Part-By-Part Repair Cost
  - Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20%  
Final Lumpsum Repair cost \$2100.00

- Estimated normal period for repairs: 2 working days.

- We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

- Thank you for your assistance.

We confirm the estimates and  
finalized amountSignature : 

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 9/9/19

## 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		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Date/Time: 02.09.2019 16:16

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305329496

OWNER

IS COMFORT TRANSPORTATION PTE LTD  
OWNER NO. 7010045  
LESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
(R) 65508755 (Q)

JUNT CARD NO.

REGN NO.

SH 8213H

MILEAGE

MAKE

MERCEDES BENZ

FUEL

E. 1/2 F

MODEL

E220CDI (E5)

DATE/TIME IN

02.09.2019 14:30

YR OF MANU

18.10.2013

TARGET DATE

CHASSIS CODE

WDD2120022A759547

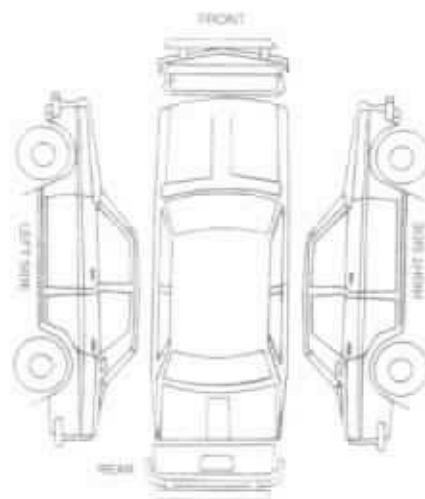
COMPLETION DATE/TIME

### JOB DESCRIPTION

Accident Date: 30.08.2019  
NATURE: 3P 30.08.19

S/NO LABOR CODE

DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

to: SH 8213H

LIMITS

Vehicle No.

SH 8213H

Service Advisor

Signature/Data

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

Date: 03.09.2019

REPAIR ESTIMATE

Time: 10:55:44

Page: 1

China Taiping 4/5  
LKK - Calvin

TS

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010045  
 ADDRESS : COMFORT TRANSPORTATION PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65508755

JOB NO : 305329496  
 REGN NO : SH 8213H  
 MILEAGE : 0000000000  
 MAKE : MERCEDES BENZ  
 MODEL : E220CDI(E5)  
 DATE OF REGN : 18.10.2013  
 DATE/TIME IN : 02.09.2019 14:30  
 ACCIDENT DATE : 30.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0202-0572-A BONNET 1 2,850.60 20.00 2,280.48

0002 04-01-0202-0582-A RADIATOR GRILLE 1 1,220.00 20.00 976.00

SUB-TOTAL : 3,256.48

## JOB NATURE

0000 PB PANEL BEATING

~~300.00~~ 200

0001 SP SPRAYPAINT CHARGE

~~300.00~~ 200

SUB-TOTAL : 600.00

MVA NAME & SIGNATURE  
 DATE :

SURVEYOR NAME & SIGNATURE  
 DATE :

2nd Party Copy: (Unit's hence notify  
 the Reparer of the following:  
 • To reserve the right to stop payment  
 • To replace damaged parts) During repair  
 Date of repair is subject to confirmation  
 and not to be used as a basis for repudiation  
 • No major modification is allowed  
 • Supplementary item(s) must be resurveyed  
 is subject to final approval from insurance co.

Acknowledged by Reparer  
 Signature:  
 Date:

Calvin LKK

3/9/19 1100h

2 by

1/1

After Repr p Loto

## Shu Pei (LKKAUTO)

---

**From:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>  
**Sent:** Wednesday, 4 September 2019 6:56 PM  
**To:** Shu Pei (LKKAUTO); Admin A; Asher Sng (LKKAUTO)  
**Cc:** Admin A; Asher Sng (LKKAUTO)  
**Subject:** RE: Direct Settlement - Accident Involving YQ5559L (SNM19D204124C02/9(ock) and SH8213H (TP : LKK REF - CC3/CTI19015665/K1eb3) on 30.08.2019  
**Attachments:** REPORT OF YQ5559L.pdf

LKK REF - CC3/CTI19015665/K1eb3  
CTPIS REF - SNM19D204124C02/9(ock)

Dear Sirs

Attach herewith Insured's SAS report for your attention and necessary action.

Chin Kiat is in-charge for this claim.

**Best Regards**

Alfred Toh  
Senior Executive  
Claims Department  
China Taiping Insurance (Singapore) Pte. Ltd.  
3 Anson Road #XX-00 Springleaf Tower Singapore 079909  
DID : (65) 6389 6183  
FAX: (65) 6224 7478

W: [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | FB: [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | WeChat: 太平獅城 Taiping SG

*Disclaimer: This e-mail and any files transmitted with it is intended only for the named recipients and may contain confidential information. Any unauthorized disclosure, use or dissemination of this message, either in whole or partial, is prohibited. If you are not the intended recipient, please notify the sender immediately. Please delete the e-mail and any copies of it thereafter.*

**From:** Shu Pei (LKKAUTO) [mailto:shupeil@lkkauto.com]  
**Sent:** Wednesday, 4 September, 2019 5:24 PM  
**To:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>  
**Cc:** Alfred Toh <alfred.toh@sg.cntaiping.com>; Admin A <admin-a@lkkauto.com>; Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>  
**Subject:** Direct Settlement - Accident Involving YQ5559L (SNM19D204124C02/9(ock) and SH8213H (TP : LKK REF - CC3/CTI19015665/K1eb3) on 30.08.2019

**WITHOUT PREJUDICE**

Dear Sir / Madam,

We refer to the above matter.

We have inspected TP vehicle SH 8213H at M/s ComfortDelGro Engineering Pte Ltd (Loyang) on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:



- TP's GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Asher and she can be contacted at DID: 6841 6051.

Thank you

Best Regards,

**Shu Pei** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6366-0055 | email: [shupeil@lkkauto.com](mailto:shupeil@lkkauto.com) | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

This email has been scanned by the Symantec Email Security.cloud service.  
For more information please visit <http://www.symanteccloud.com>

---

CC3 / 0119015665 / 101263

Acher

**COMFORTDELGRO  
ENGINEERING**

Our Ref : T 0819 / SH 8213H / WT(st)

Your Ref :

Date : 12-Sep-19

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Flr  
Singapore 508969ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 118596348W

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

Yishun Industrial Park A  
Singapore 768732**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 SH 8213H YOUR INSURED YQ 5559L  
AND OTHER ON 30.08.19**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SH 8213H** 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 **YQ 5559L** we are submitting these claims for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$ 2,247.00
6	3 days Loss of Rental @ \$ 165.46 per day	\$ 496.38
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	\$ -
<b>Sub Total :</b>		<b>\$ 2,750.87</b>

**HIRER'S CLAIM**

7	0 days Loss of Income @ \$ 80.00 per days	\$ -
<b>Total Claims :</b>		<b>\$ 2,750.87</b>

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

- a) Original repair bill :
- b) LTA search slip/s of : YQ 5559L
- c) GIA / Police report/s of : SH 8213H
- d) Letter of authority from owner / hirer / operator
  - ( ) Traffic Compound ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance
  - ( ) 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

*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.

A member of

**COMFORTDELGRO**

**Asher Sng (LKKAuto)**

---

**From:** Asher Sng (LKKAuto)  
**Sent:** Monday, 23 September 2019 12:04 PM  
**To:** HELEN@TTK-SERVICES.COM  
**Subject:** ACCIDENT INVOLVING YQ 5559L AND SH 8213H ON 30/08/2019

**Our Ref: CC3/CTI19015665/K1eb3**

23 SEPT 2019

**TTK SERVICES PTE LTD**

Dear Sir/Madam,

**ACCIDENT INVOLVING YQ 5559L AND SH 8213H ON 30/08/2019**

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](mailto:ashersng@lkkauto.com)

c.c. *China Taiping Insurance (Singapore) Pte Ltd*  
*(Motor Claims Dept)*

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****MERCEDES E220 SH8213H , YQ5559L  
PRINCE CHARLES RD X ALEXANDRA RD****ON 30-Aug-19 17:00**

I / We

**LO CHIN TEIK**(Hirer) NRIC No.: **S1502762B**

and/or

**LO JIWEI KENNETH**(Relief) NRIC No.: **SXXXX326B**

Taxi Number

**SH8213H**

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

**31-Aug-2019**

Name of Hirer

**LO CHIN TEIK**

Hirer NRIC

**SXXXX762B**

Signature :



Address

**127 TAMPINES STREET 11 #10-448  
521127**

Contact No.

**91835982**

Name of Relief

**LO JIWEI KENNETH**

Relief NRIC

**SXXXX326B**

Signature :



Address

**127 TAMPINES ST 11 #10-448  
521127**

Contact No.

**97712194**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1910261900

Claim No : SNM19D204124C02/9

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,585.41

DOLLARS TWO THOUSAND FIVE HUNDRED EIGHTY FIVE AND CENTS  
FORTY ONE 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. : SH 8213H

Insured Vehicle No. : YQ 5559L

Date of Loss : 30/08/2019

Place of Accident : PRINCE CHARLES RD X ALEXANDRA RD

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 : TTK SERVICES PTE LTD

Driver Name : NATARAJAN DHARMARAJU

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) General Damages	S\$	
(2) Cost of Repair/Expense	S\$	2,247.00
(3) Loss of Use/Rental/Earning	S\$	330.92
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	7.49
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
<b>TOTAL . . . . .</b>	<b>S\$</b>	<b>2,585.41</b>

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
53 LOYANG DRIVE  
SINGAPORE 508999

Date :

4-10-19

"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"

Please forward your cheque made payable to:  
COMFORTDELGRO ENGINEERING PTE LTD

## TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD  
SPRINGLEAF TOWER

3 ANSON ROAD #16-00  
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO  
SH 8213H

MAKE  
MERCEDES BENZ

MODEL  
E220CDI (E5)

DATE OF REG  
18.10.2013

CHASSIS CODE  
WDD2120022A759547

NO/DATE  
91465669 09.09.2019

JOB NO.  
305329496

ODOMETER READING

JOB TYPE

Description : 3P 30.08.19

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	2,100.00
Add GST @ 7.000 %	147.00
<b>Total Invoice amount</b>	<b>2,247.00</b>

Issued by : CHEWBEELENG 09.09.2019 17:08:15  
Repair Type : CLSO/57/57  
Payment Type/Term : /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.

Our Ref: CT19080812



Date: 09 September 2019

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	30/08/2019 @ 17:00 hrs
ALONG	PRINCE CHARLES RD X ALEXANDRA RD
INVOLVING	YQ5559L

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 **SH8213H** (the "Taxi"). The Taxi was hired to **LO CHIN TEIK IC NO SXXXX762B** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$165.46** 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.





**Enquire Vehicle Insurance Details**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
YQ5559L	30 Aug 2019 / 17:00:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) 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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI19015665/K1eb3q2

3 ANSON ROAD #16-00  
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 30-10-2019



Code : CTI

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	YQ 5559L	Veh. Inspected	SH 8213H
Policy No.	DMCVSN1910261900	Coverage (\$)	0.00
Claim No.	SNM19D204124C02/9	Excess (\$)	0.00
Assign From		Assign Date	03/09/2019

**2. Vehicle Particulars & Condition**

Make & Model	MERCEDES BENZ E 220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	WDD2120022A759547	Colour	WHITE
Odometer	735712	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	205/60 R16	WEST LAKE	7 mm
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.
---

**5. General Information**

Accident Date	30/08/2019	Inspection Date	03/09/2019
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.
---

**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	<b>2 Working Days</b>
-------------------------------------	-----------------------



# 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

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 8213H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>REPLACEMENT OF PARTS</b>			
1	BONNET	DENTED	2,850.60	2,850.60
1	RADIATOR GRILLE	SERVICEABLE	1,220.00	-
	LESS 20% DISCOUNT		-814.12	-570.12
			3,256.48	2,280.48
	<b>LABOUR</b>			
	PANEL BEATING.		300.00	200.00
	SPRAYPAINT CHARGE.		300.00	200.00
			600.00	400.00
	<b>GRAND TOTAL</b>		<b>3,856.48</b>	<b>2,680.48</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>2,100.00</b>

Report Ref No. CC3/CT119015665/K1eb3q2

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.