

COMFORTDELGRO
ENGINEERING

Our Ref : T 0919 / SH 6298B /WT(st)

Your Ref :

Date : 10-Oct-19

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 578701Marline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198003449R

Workshops

Braddell
205 Braddell Road
Singapore 578701Loyang
59 Loyang Drive
Singapore 508969Sin Ming
383 Sin Ming Drive
Singapore 575717Pandan
45 Pandan Road
Singapore 609286Ubi
320 Ubi Road 3
Singapore 408649Senoko
24 Senoko Loop
Singapore 758158Sungei Kadut
7 Sungei Kadut Way
Singapore 728791Yishun
Industrial Park A
Singapore 768732CHINA 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 6298B YOUR INSURED SLX 969L
AND OTHER _____ ON 18.09.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 6298B 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 SLX 969L we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,696.87
6	3 days Loss of Rental @ \$ 125.19 per day	\$ 375.57
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 :		\$ 2,079.93

HIRER'S CLAIM

7	3 days Loss of Income @ \$ 80.00 per days	\$ 240.00
Total Claims :		\$ 2,319.93

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

- a) Original repair bill :
- b) LTA search slip/s of : SLX 969L
- c) GIA / Police report/s of : SH 6298B
- 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

ISO 9001
ISO 14001



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC3/CTI19016635/K1ea3

03 MAR 2020

LIM KOK ENG
23 GAMBIR WALK
SINGAPORE 538981

Dear Sir/Madam,

ACCIDENT INVOLVING SLX 969L AND SH 6298B ON 18/09/2019

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

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

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****Hyundai Ioniq SH6298B , SLX969L
BRADDELL RD TWDS UPP SERANGOON RD****ON 18-Sep-19 13:50**

I / We

YAP BOUN KEE(Hirer) NRIC No.: **S0119284A**

and/or

GOH KOON SENG(Relief) NRIC No.: **SXXXX393I**

Taxi Number

SH6298B

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

18-Sep-2019

Name of Hirer

YAP BOUN KEE

Hirer NRIC

SXXXX284A

Signature :



Address

**29 KOVAN ROAD #17-31
548189**

Contact No.

97971435

Name of Relief

GOH KOON SENG

Relief NRIC

SXXXX393I

Signature :



Address

**51 LENGKOK BAHRU 08-275
510051**

Contact No.

98319645

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3017431900

Claim No : SNM19D204441

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,140.00

DOLLARS TWO THOUSAND ONE HUNDRED AND FORTY 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 6298B

Insured Vehicle No. : SLX 969L

Date of Loss : 18/09/2019

Place of Accident : BRADDELL RD TWDS UPP SERANGOON 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 : LIM KOK ENG

Driver Name : LIM JIAN HONG

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) Global Sum	S\$ 2,140.00
TOTAL	S\$ 2,140.00

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
50 LORONG DRIVE
SINGAPORE 547691

Date :

17/3/2020

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 scope and application of this document*

GST REG. NO. M2-8921817-3

TAX INVOICE

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

VEHICLE NO
SH 6298B

MAKE
HYUNDAI

MODEL
IGNIO

DATE OF REG
31.01.2017

CHASSIS CODE
RMHC851CVHU014985

INV. NO/DATE
91470083 30.09.2019

JOB NO.
305334478

ODOMETER READING

DATE/TIME IN
18.09.2019 15:10

Qty	Unit Price	@Disc	Net
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ComfortDelGro Engineering Pte Ltd

A member of COMFORTelco

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.
8010012	91470083	1,696.87	

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SH 6298B

MAKE
HYUNDAI

MODEL
IONIQ

DATE OF REG
31.01.2017

CHASSIS CODE
K0HC851CVHJ014985

INV. NO/DATE
91470083 30.09.2019

JOB NO.
305334478

ODOMETER READING

DATE/TIME IN
18.09.2019 15:10

S/No	Part No.	Qty	Unit Price	%Disc	Net
JOB NATURE					
0001	PB	PANEL BEATING	320.00		320.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	200.00		200.00
0003	L	REMOVE/REFIX REVERSE SENSOR	30.00		30.00
SUB-TOTAL					550.00

Items total	1,585.86
Add GST @ 7.000 %	111.01
Invoice amount	1,696.87

Issued by : CHENWHEELING 01.10.2019 14:35:56
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.
8010012	91470083	1,696.87	

Our Ref: CT19090434

Date: 01 October 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 18/09/2019 @ 13:50 hrs
ALONG BRADDELL RD TWDS UPP SERANGOON RD
INVOLVING SLX969L

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 **SH6298B** (the "Taxi"). The Taxi was hired to **YAP BOUN KEE IC NO SXXXX284A** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.19** 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
Manager, Fleet Safety

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

Sat 6298B

HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
FROM	TO						FROM	TO
6300	215	15/9	B. 10.4.19	369	992	295	3.20A	10.20
2300	9.55	16/9	B. 10.4.19	370	026	34	4.15A	5.15A
3300	5.10A	16/9	K S G.R.	370	205	179	6.25a	20.50
6350	20.50	16/9	B. 10.4.19	370	421	216	2.35K	10.30
2200	10.15	17/9	B. 10.4.19	370	462	41	4.20A	5.20A
3300	5.30A	17/9	K S G.R.	370	634	172	6.30a	22.20
6350	20.5	11/9	B. 10.4.19	370	805	171	2.40A	9.20A
2000	9.40	18/9	B. 10.4.19	370	862	59	3.20A	5.40A
3300	5.10A	18/9	K S G.R.	371	029	170	6.25	22.50
6350	220	18.09.19	ACCIDENT			170	15.10	-
2400	10.00	20.09.19	PAPER IN			0017	-	1800

Enquire Vehicle Insurance Details

Vehicle No	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLX969L	18 Sep 2019 / 13:50:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous OK

SM 6298B