



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

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: 02/10/2019

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	GBC 7334B (Insd Veh)	Your Ref. No. : DM16HO02715/WY
	SHD 4923U (TP Veh)	Our Ref. No. : CC3/EQI16024534/K1pa3s2-1
Date of Accident	20/12/2016	

Liability	50%	
Final Repair Cost	: \$ 1,671.92	(W/GST)
Loss of Income	: \$ 100.00	4 days
Rental (If any)	: \$ 263.22	4 days
Others:	: \$ 5.35	
	: \$	
	2,040.49	
Final Settlement Sum	: \$ 2,000.00	(GLOBAL SUM)
Remarks	:	

Payment Instruction: Payee's Breakdown

1)	COMFORTDELGRO ENGINEERING PTE LTD	: \$ 2,000.00
		: \$

NUR SHAQILAH
LKK Auto Consultants Pte Ltd

Our Ref :

T 1216 / SHD 4923U / JW (J)

Date :

11-Jan-17

EQ Insurance Company Limited

5 Maxwell Road

#17-00 Tower Block, MND Complex

Singapore 069110

CDGE Taxi Claims Department

59 Loyang Drive

4th floor

Singapore 508969

Fax : 6214 1843

COMFORTDELGRO
ENGINEERINGComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198604400

Attn : Motor Claims Department

Dear Sir

WITHOUT PREJUDICE

ACCIDENT INVOLVING OUR TAXI

GBC 7334B

OTHER

SHD 4923U

YOUR INSURED

ON 20.12.16

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHD 4923U 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 : GBC 7334B we are submitting this claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

- 1 Cost of Repair
- 2 4 days Loss of Rental @\$ 131.61 per day
- 3 Survey Report Fees (Surveyed by LKK)
- 4 LTA Search Fees
- 5 GIA / Police Report Fees
- 6 Towing / Medical / Transportation Fees

Sub Total :

\$S	3343.84	Senoko
\$S	526.44	24 Senoko Loop
\$S	-	Singapore 758156
\$S	5.35	Sungei Kadut
\$S	-	7 Sungei Kadut Way
\$S	-	Singapore 728791
\$S	-	Defu
\$S	-	6 Defu Avenue 1
\$S	3,875.63	Singapore 539537
\$S	320.00	Yishun
\$S	4,195.63	501 Yishun Industrial Park A
		Singapore 768732

HIRER'S CLAIM

- 1 4 days Loss of Income @\$ 80.00 per days

Total Claims

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

a) Original repair bill.

b) LTA search slip/s of :

c) GIA / Police report/s of :

d) Letter of authority from owner / hirer / operator

- () Photocopies of Accident Scene Photo/s () 3P written an admitted note
() Witness statement/s (x) Rental Rate letter (x) Downtime/Mileage record

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. This condition shall apply even if medical expenses are claimed herewith and part of the settlement reached.

Please note that, for the time being, we are not making this claim via solicitors provided you treat this letter as our intention to file a claim in court according to the provisions of the Non-Injury Motor Accident Litigation ("NIMA") protocol and further, you agree that if negotiations should breakdown and this claim is referred to solicitors you shall not raise any objection that the NIMA protocol has not been complied with. If you disagree with this condition please reply in writing within the next 2 working days failing which we shall proceed to negotiate with you on the basis that you have acquiesced to the said condition by your conduct.

Yours faithfully

Jim Wong

Deputy Manager

CDGE Claims Department

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

A member of

COMFORTDELGRO



LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONG

i 40 SHD4923U , GBC7334B

ON 20-Dec-16 17:45

WOODLANDS AVE 4 NEAR TRIPLE 8 PLAZA B4 JUNCTION OF WOODLANDS ...

I / We

GOVINDARAJU S/O SH... (Hirer) NRIC No.: S0231581E

and/or

(Relief) NRIC No.:

Taxi Number

SHD4923U

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

21-Dec-2016

Name of Hirer

GOVINDARAJU S/O SHUNMUGAM PILLAY

Hirer NRIC

S0231581E

Signature :



Address

180A MARSILING ROAD #16-2212
731180

Contact No.

97594923

TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 1

8010325

EQ INSURANCE COMPANY LIMITED

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

CONTACT NO: 62239433

VEHICLE NO
SHD4923U

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
19.03.2014

CHASSIS CODE
KMHLB41UMEU052829

INV. NO/DATE
91284038 06.01.2017

JOB NO.
304992828

ODOMETER READING

DATE/TIME IN
21.12.2016 15:07

Description : ACC 20.12.2016

S/No Part No.

PART REQUISITION

S/No	Part No.	Qty	Unit Price	%Disc	Net
0001	04-01-0103-0574	1	619.00	20.00	495.20
0002	04-01-0103-0578	1	562.30	20.00	449.84
0003	04-01-0103-0813	1	483.60	20.00	386.88
0004	04-01-0103-0658	1	150.70	20.00	120.56
0005	28-01-0103-0003	1	75.00	0.00	75.00
0006	28-01-0103-2013	1	80.00	0.00	80.00
0007	04-01-0103-0639	1	24.60	20.00	19.68
0008	04-01-0103-0637	1	22.40	20.00	17.92
SUB-TOTAL		:			1,645.08

JOB NATURE

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
05 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	91284038	3,343.04	

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010325

EQ INSURANCE COMPANY LIMITED

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

CONTACT NO: 62239433

VEHICLE NO
SHD4923U

MAKE
HYUNDAI

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I-40

DATE OF REG
19.03.2014

CHASSIS CODE
KMHLB41UMEU052829

INV. NO/DATE
91284038 06.01.2017

JOB NO.
304992828

ODOMETER READING

DATE/TIME IN
21.12.2016 15:07

S/No	Part No.		Qty	Unit Price	%Disc	Net
0001	20-05	RENEW ADVERTISEMENT STICKER-	300.00		300.00	
0002	L	PANEL BEATING	400.00		400.00	
0003	23-502	SPRAYPAINT ON AFFECTED AREA	720.00		720.00	
0004	17-01	CHECK ALL LIGHTING	30.00		30.00	
0005	20-00	TUFF COAT ON AFFECTED PARTS.	30.00		30.00	
SUB-TOTAL			:		1,480.00	

Items total	3,125.08
Add GST @ 7.000 %	218.76
Invoice amount	3,343.84

Issued by : CHEWBEELING 06.01.2017 08:58:41
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.
8010325	91284038	3,343.84	

Our Ref: CT16120887

Date: 06 January 2017



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON
ALONG

INVOLVING

20/12/2016 @ 17:45 hrs
WOODLANDS AVE 4 NEAR TRIPLE 8 PLAZA B4
JUNCTION OF WOODLANDS AVE 7
GBC7334B

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 **SHD4923U** (the "Taxi"). The Taxi was hired to **GOVINDARAJU S/O SHUNMUGAM PILLAY IC NO S0231581E** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$131.61** 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.

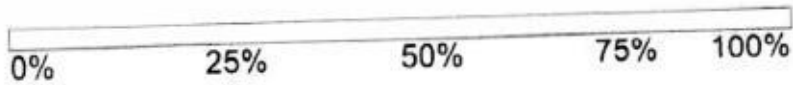
Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Executive, Fleet Safety

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

[illegible]

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GBC7334B	20 Dec 2016 / 17:45:00	Successful	E04	EQ INSURANCE COMPANY LTD

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Best viewed with IE 8.0 SP3 and above, 1024 X 768 resolution

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SHD 4923 U