

Our Ref : CC19100068/ SHD8628X /WT(st)

Your Ref :

Date : 07-Nov-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: 192500488

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
501 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 SHD8628X YOUR INSURED GBJ7619T
AND OTHER ON 04.10.19

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No : SHD8628X 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 : GBJ7619T we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,747.25
2	<u>5</u> days Loss of Rental @ \$ 125.19 per day	\$ 625.95
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 :		\$ 3,380.69

HIRER'S CLAIM

7	<u>5</u> days Loss of Income @ \$ 80.00 per days	\$ 400.00
Total Claims :		\$ 3,780.69

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

- a) Original repair bill :
- b) LTA search slip/s of : GBJ7619T
- c) GIA / Police report/s of : SHD8628X
- d) Letter of authority from owner / hirer / operator
 - () Photocopies of Accident Scene Photos () Certificate of Insurance
 - () PIR (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.



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/CTH19017748/K1ea3

31 OCT 2019

DE SHENG HARDWARE ENGINEERING
5 ANG MO KIO INDUSTRIAL PARK 2A
#02-20 AMK TECH II
SINGAPORE 567760

Dear Sir/Madam,

ACCIDENT INVOLVING GBJ 7619T AND SHD 8628X ON 04/10/2019

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.

Kindly note that we have reviewed this matter and would like to advise that you and/or your authorized driver may not be absolved from blame for this accident.

If you have evidence/information to prove that we should not settle the third party claim, kindly let us have them in writing within the next 10 day, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

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 SHD8628X , GBJ7619T****ON 04-Oct-19 14:20****ALONG JALAN BESAR TOWARDS BENCOOLEN ST BEFORE SAM LEONG RD J...**

I / We

TANG SWEE CHOON(Hirer) NRIC No.: **SXXXX075B**

and/or

(Relief) NRIC No.: **SXXXX075B**

Taxi Number

SHD8628X

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

04-Oct-2019

Name of Hirer

TANG SWEE CHOON

Hirer NRIC

SXXXX075B

Signature :



Address

**542 JELAPANG ROAD #06-42
670542**

Contact No.

90600069

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : Claim No : SNM19D204850

Claimant : CITY CAB PTE LTD

Amount : S\$1,730.00
DOLLARS ONE THOUSAND SEVEN HUNDRED AND THIRTY 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. : SHD 8628X

Insured Vehicle No. : GBJ 7619T

Date of Loss : 04/10/2019

Place of Accident : JALAN BESAR TOWARDS BENCOOLEN ST

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 : DE SHENG HARDWARE ENGINEERING

Driver Name : TAY THIAM HOCK

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\$ 1,730.00
TOTAL	S\$ 1,730.00

Claimant Name : CITY CAB PTE LTD

NRIC No :

Signature : 
Claims Administrator
COMFORTDELGRO ENGINEERING PTE LTD
89 LOYANG DRIVE
SINGAPORE 508881

Date : 13/11/19

"The contents of this document apply to vehicle damage 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

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 1

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHD8628X

MAKE
HYUNDAI

MODEL
IONIQ(G2)

DATE OF REG
04.12.2018

CHASSIS CODE
KMHC851CVKU121799

INV. NO/DATE
91475750 31.10.2019

JOB NO.
305338910

ODOMETER READING

DATE/TIME IN
04.10.2019 15:00

Description : 3P 04.10.2019

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0104-0574	IONIQVC PANEL-FENDER LH#	1	490.70	20.00	392.56
0002	04-01-0104-2815	IONIQV1-3 LAMP ASSY-HEAD LH#	1	1,198.80	20.00	959.04
0003	04-01-0104-3813	IONIQ EMBLEM-BLUE DRIVE LH	1	26.60	20.00	21.28
0004	04-01-0104-2534	IONIQV2&3 COVER-FR BUMPER#	1	418.30	20.00	334.64
SUB-TOTAL			:			1,707.52

JOB NATURE

0001	PB	PANEL BEATING	320.00	320.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	400.00	400.00

WE HEREBY DECLARE THAT ALL INFORMATION PROVIDED IN THIS INVOICE IS TRUE AND CORRECT. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER DAMAGE TO ANYTHING OR TO ANY PERSON OR PROPERTY, INCLUDING THE COMPANY'S OWN PROPERTY, ARISING OUT OF OR FROM THE USE OF THIS INVOICE.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY AFTER DELIVERY AND SIGNALLY WITHIN 24 HOURS AFTER DELIVERY. NOTICE IS GIVEN TO THE COMPANY FOR ANY COMPLAINTS WITHIN THE PERIOD SPECIFIED IN THE INVOICE. NOTICE OF COMPLAINTS MUST BE SUBMITTED TO THE COMPANY WITHIN 24 HOURS OF DELIVERY.

INTEREST ON THE PAYMENT WILL BE CHARGED ON A DAILY BASIS FROM THE DATE OF DELIVERY OF THE INVOICE UNTIL THE DATE OF PAYMENT. THE COMPANY WILL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO ANYTHING OR TO ANY PERSON OR PROPERTY, INCLUDING THE COMPANY'S OWN PROPERTY, ARISING OUT OF OR FROM THE USE OF THIS INVOICE.

PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY LOSS OR DAMAGE TO ANYTHING OR TO ANY PERSON OR PROPERTY, INCLUDING THE COMPANY'S OWN PROPERTY, ARISING OUT OF OR FROM THE USE OF THIS INVOICE. THE COMPANY WILL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO ANYTHING OR TO ANY PERSON OR PROPERTY, INCLUDING THE COMPANY'S OWN PROPERTY, ARISING OUT OF OR FROM THE USE OF THIS INVOICE.

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	91475750	2,747.25	

Our Ref: CC19100068



Date: 10 October 2019

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	04/10/2019 @ 14:20 hrs
ALONG	ALONG JALAN BESAR TOWARDS BENCOOLEN ST BEFORE SAM LEONG RD JUNCTION
INVOLVING	GBJ7619T

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHD8628X** (the "Taxi"). The Taxi was hired to **TANG SWEE CHOON IC NO SXXXX075B** a registered hirer-operator of **CityCab 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.

Enquire Vehicle Insurance Details

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

GBJ7619T 04 Oct 2019 / 14:20:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

[Previous](#)

[OK](#)

SHB 8628 X