

COMFORTDELGRO ENGINEERING

Our Ref : T 1019 / SH 6650S /WT(st)

Your Ref :

Date : 15-Oct-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: 198602489

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 6650S YOUR INSURED PC 5720C
AND OTHER ON 10.10.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SH 6650S** 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 **PC 5720C** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,605.00
6	2 days Loss of Rental @ \$ 165.46 per day	\$ 330.92
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 :		\$ 1,943.41

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 2,103.41

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

- a) Original repair bill :
- b) LTA search slip/s of : PC 5720C
- c) GIA / Police report/s of : SH 6650S
- 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.

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 725791

Yishun
Yishun Industrial Park A
Singapore 756732



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/CTI19018055/K1ea3

31 OCT 2019

RNR CONVEYANCE
317 OUTRAM ROAD
#B1-39 CONCORDE SHOPPING CENTRE
SINGAPORE 169075

Dear Sir/Madam,

ACCIDENT INVOLVING PC 5720S AND SH 6650S ON 10/10/2019

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.

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****MERCEDES E220 SH6650S , PC5720S
BOSS HOTEL****ON 10-Oct-19 02:20**

I / We

EVELYN LAM SOCK HA(Hirer) NRIC No.: **SXXXX931J**

and/or

ONG HOE SENG(Relief) NRIC No.: **SXXXX536Z**

Taxi Number

SH6650S

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

10-Oct-2019

Name of Hirer

EVELYN LAM SOCK HA

Hirer NRIC

SXXXX931J

Signature :



Address

**10D BEDOK SOUTH AVENUE 2 #12-...
463010**

Contact No.

94888951

Name of Relief

ONG HOE SENG

Relief NRIC

SXXXX536Z

Signature :



Address

**186B GEYLANG RD -
389254**

Contact No.

98664950

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMB1SN1919641900

Claim No : SNM19D204848

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,040.00
DOLLARS TWO THOUSAND 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 6650S

Insured Vehicle No. : PC 5720S

Date of Loss : 10/10/2019

Place of Accident : BOSS HOTEL

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 : RNR CONVEYANCE

Driver Name : DESPAL SINGH S/O BUTA SINGH

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\$ 2,040.00

TOTAL	S\$ 2,040.00

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :


CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
58 LLOYD DRIVE
SINGAPORE 508988

Date :



"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

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

ComfortDelGro Engineering Pte Ltd

225 Brassey Road Singapore 370704
Mobile + 65 (383) 8280 Facsimile + 65 (329) 9768
Website

93 Linyang Drive Singapore 606888
 303 Sri Mang Drive Singapore 575717
 45 Pandan Road Singapore 606286
 302 Lta Road Singapore 438648
 24 Serangoon Lane Singapore 758126
 7 Suiwei Kadal Way Singapore 726791
 501 Yohar Industrial Park A Singapore 706773

COMPANY REG. NO.: 199506048W
Page: 1

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTK LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VKHCJ.K NO
SH 66508

NO/DATK
91472467 14.10.2019

MAK
MERCEDES BENZ

JOB NO.
305340530

MODKI,
K220CDI (K5)

DICHOMETER READING:

DATE OF RIGG
30.09.2013

CHASSIS CODE JOB TYPE
WDD2120022A757675

Description : 3P 10.10.19

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt.		1,500.00
Add GST @ 7.000 %		105.00
Total Invoice amount		1,605.00

Issued by : KATHERINKFAN 14.10.2019 12:06:44
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

Payment Type/Term : /Credit 30 days

1000

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

[illegible]

Our Ref: CT19100219

Date: 14 October 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 10/10/2019 @ 02:20 hrs
ALONG BOSS HOTEL
INVOLVING PC5720S

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 **SH6650S** (the "Taxi"). The Taxi was hired to **EVELYN LAM SOCK HA IC NO SXXXX931J** 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 **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.

HOURS OPERATED (TIME)	
FROM	TO
11/7/11	11/11/11

DATE	NAME OF DRIVER	MILEAGE READING						MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		9	7	4	2	1	4		FROM	TO
06/10/19	Only 83+34	9	7	4	2	1	4	312	1530	0310
7/10/19	only	9	7	4	4	6	1	247	3.30	14.50
7/10/19	only	9	7	4	7	6	2	301	1500	1245
8/10/19	only	9	7	4	9	3	3	171	3.30	11.15
8/10/19	only	9	7	5	3	1	6	383	1450	0305
6/10/19	only	9	7	5	5	9	4	278	4.30	14.30
6/10/19	only	9	7	5	9	4	2	348	1500	0325
10/10/19	only	9	7	6	1	1	8	172	4.45	12.55
10/10/19	only									
10-10-19	Accident	14-10-19						14	1240	-
11-10-19	Repair	14-10-19						14	1600	-

SA 6650 S

Enquire Vehicle Insurance Details

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

PC5720S 10 Oct 2019 / 02:20:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

[Previous](#)

[OK](#)

SH 66505