COMFORTDELGRO

Our Ref	CC19110636/ SHB4724M /KS(st)
Your Ref :	
Date	03.12.19

ENGINEERING

CDGE Taxi Claims Dept ComfortDelGro Engineering Pta Ltid 205 Braddell Road Singapore 579701

59 Loyang Drive 4th Floor Singapore 508969

Mainline +65 6383 6280 Facsimilie +65 6280 9755

www.odge.com.sg

Workshops

Braddell 205 Braddell Road Singapore 579701

Loyang 59 Loyang Drive Singapore 508969

Sin Ming 383 Sin Ming Drive Singapore 575717

Pandan 45 Pendan Road Singapore 609286

320 Up Road 3 Singapore 408649

Senoko 24 Sendin Loop Singapore 758158

Sungei Kadut

Sungei Kadul Way Singapore 728791 Vishun 501 Yishun Industrial Park A Singapore 768732

AIG ASIA PACIFIC INSURANCE PTE LTD

AIG Building

78 Shenton Way #07-16

WITHOUT PREJUDICE

Singapore 079120

Attn: Motor Claims Department (Mr Lee Ming Yao)

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHB4724M YOUR INSURED SBQ8860T AND OTHER ON 25.11.19

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor vehicle no: SHB4724M 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 SBQ8860T we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair				S	2,996.00
2	4 days Loss	of Rental @	\$ 112.67	per day	S	450.68
3	Survey Report Fees	(Surveyed	by M/s LK	K)	\$	
4	LTA Search Fees	1,1110000000000000000000000000000000000	-		\$	-
5	GIA / Police Report Fee	5			\$	7.49
6	Towing Fees				\$	(*)
	950		9	uh Total .	2	3 454 17

days Loss of Income @ \$ 80.00 per day \$ 320.00 7 4 Total Claims: \$ 3,774.17

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

Original repair bill a)

LTA search slip/s of : **SBQ8860T** b) GIA / Police report/s of : SHB4724M (0)

Letter of authority from owner / hirer / operator

() Witness statement/s () Certificate of Insur. (x) Rental Rate letter () Photograph/s of Accident Scene (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.

Yours faithfully Kazali Hj Selahudin

CDGE Taxi Claims Department

Tel: 6214 8736 Fax: 6214 1843 Email: kazali@cdge.com.sg

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

A member of

COMFORTDELGRO









51 UBLAVE 1, #61-25 PAYA UBLINDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 67414108

Our Ref: CC4/AIG19021001/Fea3

31 DEC 2019

CHEUNG TAK MEI HELEN 58 HUA GUAN AVENUE HONG KONG PARK SINGAPORE 589154

Dear Sir/Madam.

ACCIDENT INVOLVING SBQ 8860T AND SHB 4724M ON 25/11/2019

We refer to the above accident where we are acting for AIG Asia Pacific Insurance 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 note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

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. AIG Asia Pacific Insurance Pte Ltd (Motor Claims Dept) LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHB4724M , SBQ8860T

ON 25-Nov-19 14:20

ALONG

TEMASEK BOULEVARD

I / We

TAN BENG HONG

(Hirer) NRIC No.: SXXXX943F

and/or

(Relief) NRIC No.: SXXXX943F

Taxi Number

SHB4724M

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

medical fee and legal costs.

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental,

- 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

26-Nov-2019

Name of Hirer

TAN BENG HONG

Hirer NRIC

SXXXX943F

Signature :

9a- -

Address

330 YISHUN RING ROAD #08-1442

760330

Contact No.

96516920

RELEASE VOUCHER (AIG Asia Pacific - Express Third Party Claim)

"We/I, <u>COMFORTDELGRO ENGINEERING PTE LTD</u> ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd <u>LKK AUTO CONSULTANTS PTE LTD</u> (name of surveyor) with respect to the amount claimed for <u>S\$3,570.00</u> (Global Sum) for vehicle no. <u>SHB 4724M</u> that was damaged pursuant to the accident which occurred on <u>25/11/2019</u> (date) along <u>TEMASEK BOULEVARD</u> (location) involving vehicle no/s <u>SBQ 8860T</u>.

This is pursuant to the inspection conducted on 27/11/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner <u>CITYCAB PTE LTD</u> ("the third party claimant") of vehicle no. <u>SHB 4724M</u> make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SHB 4724M (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

"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"



A member of COMFORIDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

200 Braddell Road Singapore \$75701 Marriino - 65 0303.6250 Facilitie + 65 6250 9755

COMPANY RRG. NO.: 199506048W Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHKNYON WAY, AIG BUILDING #07-16 SINGAPORE 079120

CONTACT NO: 64193000

3225094

VKHCLK NO SHB4724M

NO/DATE 91481390 29.11.2019

HYUNDAT

JOB NO. 305351980

MODRI. I - 40

ODOMETER READING

DATE OF REG 11.01.2017

CHASSIS CODR KMHLB41UMHU098323

JOB TYPE

Description: 3P 25.11.19

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt. Add GST 8 7.000 %

2,800.00 196.00

Total Invoice amount

2,996.00

KATHERINETAN 29.11.2019 13:55:56

Repair Type : CFSO/57/57 Payment Type/Term : /Credit 30 days

ComfortDelGro Engineering Pte Ltd A member of COMFORTDELCHO

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. AMOUNT BANK/CHQ No.

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CC19110636

Date: 29 November 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

25/11/2019 @ 14:20 hrs

ALONG

TEMASEK BOULEVARD

INVOLVING

SBQ8860T

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 SHB4724M (the "Taxi"). The Taxi was hired to TAN BENG HONG IC NO SXXXX943F a registered hirer-operator of CityCab Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$112.67 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.

NAME OF DRIVER MILEAGE READING TRAVELLED (RM) 19 DODGOLD WILEAGE READING TRAVELLED (RM) 19 DODGOLD WILEAGE READING TRAVELLED (RM) 10 DODGOLD WILEAGE READING TRAVELLED (RM)	DATE NAME OF DRIVER MILEAGE READING TRAVELLED IRAN (M) 28-U-19-U-19-U-19-U-19-U-19-U-19-U-19-U-1	DATE NAME OF DRIVER MILEAGE READING TRAVELLED (RM) 36-PL-PG-PRIVER MILEAGE READING TRAVELLED (RM) 38-U-PG-PG-PG-PG-PG-PG-PG-PG-PG-PG-PG-PG-PG-	FRATED (TIME) DATE NAME OF DRIVER NILEAGE HEADING TRAVELLED NAME OF DRIVER NAME OF DRIVER NAME OF DRIVER NAME AGE HEADING TRAVELLED (NAME OF DRIVER) NAME AGE HEADING TRAVELLED (NAME OF DRIVER) NAME AGE HEADING TRAVELLED (NAME OF DRIVER) NAME AGE (NAME AGE (NAME OF DRIVER) NAME AGE (NAME OF DRIVER) (NAME AGE (NAME OF DRIVER) (NAME AGE	HOURS OPERATED (TIME)	FROM TO	1 0%	J DD				
NAME OF DRIVER MILEAGE READING 10 - ACOLOGIA 19 - ACOLOGIA 19 - ACOLOGIA 10 - ACOLOGI	DATE NAME OF DRIVER MILEAGE READING 35-PI-19-PACODON IN MILEAGE READING 36-U-19-PACODON IN MILEAGE READING	DATE NAME OF DRIVER MILEAGE READING 36-PL-TO-PROPORTY IN THE SECOND IN	FRATED (TIME) TO TO TO THE DATE NAME OF DRIVER MILEAGE READING SELL-19 - HACKLON IN		_		[3				
NAME OF DRIVER 19 - HOOLOON LI	DATE NAME OF DRIVER 35-PL-TO-PACOPONI 28-U-TO-PACOPONI 1 DOUGHON 1 DOUGHON 1 DOUGHON 1 DATE NAME OF DRIVER NAME OF DRI	DATE NAME OF DRIVER 25-PI-TO-MOROON IN 28-U-TO DODOON	SHRS (TIME) DATE NAME OF DRIVER SHRS (F) (7.750) 28-11-19 (ACOLOU) 11 (1.90) (2.50) (2.50) (2.50) (3	MILE	Ŗ,	≼	ð				
NAME OF DRIVER 19 - HOOLOON LI	DATE NAME OF DRIVER 25-PL-TO-MONDON 28-U-TO DODON 10-TO DODON 10-TO DODON 10-TO DODON 10-TO DODON 10-TO DODON 10-TO DATE	DATE NAME OF DRIVER 25-PI-TO-MOROON IN 28-U-TO-MOROON IN	SHRS (TIME) TO DATE NAME OF DRIVER SA - PI - TO - ACCOUNT IN SOO OCES OCES OCES OCES OCES OCES OCES	4M		8	30				
19-19-06-0	25-PI-TO-19 DODGIV	25-PI-TO-19 DODGIV	ERATED (TIME) TO TO 7780 O[10 28-11-10-1400] 1800 O[50 28-11-10-140] 1740 O(50 28-11-10-140) O(50 28-11-140) O(50 28-11-10-140) O(50 28	MILEAG	-	2					
55	28-11-10 28-11-19	28-11-10 28-11-19	1780 28-11-10 1800 1800 1800 1800 1800 1800 18	NAME OF DRIVER	- awy	HOON	Modern				
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	**	2000	PRATED (TIME) TO 170 28- O] 1/2 20 28- O[1/2 20 28- J 440 O(5/2 0 J 450 O(5/2 0 O(5	DATE	101-10		M		*		

EAGE READING

Enquire Vehicle Insurance Details

Vehicle No. Incident Daté/Time

Search Status Insurance Company Code Insurance Company Name

54B4724M

SBQ8860T 25 Nov 2019 / 14:20:00 Successful

A04

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Previous

OK