

Our Ref : CC19120262/ SHA 469G /KS(st)
Your Ref :
Date : 8-Jan-2020

COMFORTDELGRO
ENGINEERING

AIG ASIA PACIFIC INSURANCE PTE LTD
AIG Building
78 Shenton Way
#07-16
Singapore 079120

CDGE Taxi Claims Dept **ComfortDelGro Engineering Pte Ltd**
205 Braddell Road Singapore 579701
59 Loyang Drive 4th Floor
Singapore 508969

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

WITHOUT PREJUDICE

Attn : Motor Claims Department

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA 469G YOUR INSURED
GBF4448K AND OTHER ON 11.12.19

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor vehicle no: SHA 469G 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 GBF4448K we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 6,313.00
2	6 days Loss of Rental @ \$ 116.95 per day	\$ 701.70
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing Fees	\$ -
Sub Total :		\$ 7,022.19

HIRER'S CLAIM

7	6 days Loss of Income @ \$ 80.00 per day	\$ 480.00
Total Claims :		\$ 7,502.19

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

- a) Original repair bill :
- b) LTA search slip/s of : GBF4448K
- c) GIA / Police report/s of : SHA 469G
- d) 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

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

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING i 40 SHA469G , GBF4448K
ALONG ALONG SERANGOON NORTH AVE 4****ON 11-Dec-19 15:15****I / We SUHAIRI BIN SAMURI (Hirer) NRIC No.: SXXXX997H****and/or (Relief) NRIC No.: SXXXX997H****Taxi Number SHA469G**

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 11-Dec-2019**Name of Hirer SUHAIRI BIN SAMURI****Hirer NRIC SXXXX997H**

Signature :

**Address 534 ANG MO KIO AVENUE 10 #02-...
560534****Contact No. 90028258**

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

"We/I, **COMFORTDELGRO ENGINEERING PTE LTD** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$3,550.00**(Global Sum) for vehicle no. **SHA469G** that was damaged pursuant to the accident which occurred on **11/12/2019** (date) along **60 SERANGOON RD AVENUE 4** involving vehicle no/s **GBF4448K**.

This is pursuant to the inspection conducted on **12/12/2019** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **CITYCAB PTE LTD**(the third party claimant") of vehicle no. **SHA469G** 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 **SHA469G** (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.

Dated this 30th (day) of September (month) 2020 (year)



Signed by appointed surveyor

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
89 LOYANG DRIVE
SINGAPORE 508969

Signed by "the workshop" (with chop)

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

GST REG. NO. M2-8921817-3**TAX INVOICE**

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

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

CONTACT NO: 64193000 3225094

VEHICLE NO
SHA 469G**MAKE**
HYUNDAI**MODEL**
I-40**DATE OF REG**
25.08.2016**CHASSIS CODE**
KMHLB41UMGU092356**NO/DATE**
91486829 30.12.2019**JOB NO.**
305366574**ODOMETER READING**
_____**JOB TYPE**

Description : 3P 11.12.2019 (C)

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	5,900.00
Add GST @ 7.000 %	413.00
Total Invoice amount	6,313.00

Issued by : CHEWBEELENG 30.12.2019 17:09:16
Repair Type : CFSO/57/57
Payment Type/Term : /Credit 30 days

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY OR NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte LtdA 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.**

Our Ref: CC19120262



Date: 20 December 2019

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 11/12/2019 @ 15:15 hrs
ALONG ALONG SERANGOON NORTH AVE 4
INVOLVING GBF4448K

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 **SHA0469G** (the "Taxi"). The Taxi was hired to **SUHAIRI BIN SAMURI IC NO SXXXX997H** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$116.95** 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
GBF4448K	11 Dec 2019 / 15:15:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

[Previous](#)

[OK](#)

51A 4-696

[illegible][illegible]

Khanchna (LKK Auto)

From: Khanchna (LKK Auto)
Sent: Tuesday, April 7, 2020 3:09 PM
To: kathryn.adriano@daimler.com
Cc: Admin A
Subject: ACCIDENT INVOLVING GBF4448K & SHA469G ON 11/12/2019 ALONG/AT SERANGOON ROAD

Our Ref: CC4/AIG19021983/Fkb3

DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD
[POLICY HOLDER]

Dear Sir/Madam,

ACCIDENT INVOLVING GBF4448K & SHA469G ON 11/12/2019 ALONG/AT SERANGOON ROAD

We refer to the above subject matter.

We write to inform you that we are the loss adjuster appointed by your motor insurer, **AIG Asia Pacific Insurance Pte Ltd** to deal with the third party claim against your policy.

We have received a claim against your motor insurance policy.

Both parties involved have given conflict of version. Based on the circumstances of accident and both parties damage profile, there is no conclusive evidence to substantiate either's parties version. Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

If you have evidence/information to proof that we should not settle the third party claim, kindly let us have them in writing within the next **10 days** i.e. by **16/04/2020**, 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 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.

Best Regards,

Khanchna | Case Handler

LKK Auto Consultants Pte Ltd

DID: **6841 2360** | email: Khanchna@lkkauto.com | Fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)