

Our Ref : T 0120 / SHA4543Z /WT/CK(st)

Your Ref :

Date : 21-Jan-2020

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

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**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 SHA4543Z YOUR INSURED SKD5670G
AND OTHER _____ ON 01.01.2020**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA4543Z 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 SKD5670G we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 5,064.95
6	4 days Loss of Rental @ \$ 125.19 per day	\$ 500.76
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 :		\$ 5,573.20

HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$ 320.00
Total Claims :		\$ 5,893.20

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

- a) Original repair bill :
- b) LTA search slip/s of : SKD5670G
- c) GIA / Police report/s of : SHA4543Z
- d) Letter of authority from owner / hirer / operator
 - () Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
 - () Tow Fee (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

Catherine Koh

CDGE Claims Department

Tel : 6214 8733 Fax : 6214 1843 Email : catherinekoh@cdge.com.sg

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING **Hyundai Ioniq SHA4543Z , SKD5670G** **ON 01-Jan-20 00:40**
ALONG **ALONG SHEARES AVE**

I / We **LIU SIWEI** (Hirer) NRIC No.: **SXXXX685Z**

and/or (Relief) NRIC No.: **SXXXX685Z**

Taxi Number **SHA4543Z**

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 **02-Jan-2020**

Name of Hirer **LIU SIWEI**
Hirer NRIC **SXXXX685Z**

Signature :



Address **861A TAMPINES AVE 5 #13-565**
521861

Contact No. **87513385**

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
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8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

Description : 3P 01.01.2020

VEHICLE NO
SHA4543Z

INV. NO/DATE
91490056 17.01.2020

MAKE
HYUNDAI

JOB NO.
305372036

MODEL
IONIQ(G3)

ODOMETER READING

DATE OF REG
22.10.2019

DATE/TIME IN
06.01.2020 09:30

CHASSIS CODE
KMHC851CVLJ186599

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0104-0578	IONIQV4 COVER-FR BUMPER#	1	418.30	20.00	334.64
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP REAR	10	2.20	20.00	17.60
0003	04-01-0104-2686	IONIQV4 MOULDING-FRONT BUMPER RH	1	186.60	20.00	149.28
0004	04-01-0104-4994	IONIQV4 LAMP ASSY-DAY RUNNING LIGHT RH	1	642.50	20.00	514.00
0005	04-01-0104-0641	IONIQ CARRIER ASSY-FRONT END MODULE#	1	949.30	20.00	759.44
0006	04-01-0104-2935	IONIQV4 LAMP ASSY-HEAD RH#	1	2,110.30	20.00	1,688.24
0007	04-01-0104-2687	IONIQV4 MOULDING-FRONT BUMPER CTR UPR	1	188.00	20.00	150.40

- 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.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 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.
- 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 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	91490056	5,064.95	

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
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8010012

CHINA TAIPING INSURANCE CO (S) PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA4543%

MAKE
HYUNDAI

MODEL
IONIQ(G3)

DATE OF REG
22.10.2019

CHASSIS CODE
KMHC851CVLU1186599

INV. NO/DATE
91490056 17.01.2020

JOB NO.
305372036

ODOMETER READING

DATE/TIME IN
06.01.2020 09:30

S/No	Part No.		Qty	Unit Price	%Disc	Net
			SUB-TOTAL		:	3,613.60
JOB NATURE						
0001	PB	PANEL BEATING		640.00		640.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA		400.00		400.00
0003	17-01	WIRING CHARGE		50.00		50.00
0004	20-00	TUFF COAT ON AFFECTED PARTS.		30.00		30.00
			SUB-TOTAL		:	1,120.00

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Head Office:
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Singapore 579701

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ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91490056	5,064.95	

GST REG. NO. M2-8921817-3**TAX INVOICE****COMPANY REG. NO.: 199506048W**

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8010012

CHINA TAIPING INSURANCE CO (S) PTE LTD
SPRINGLEAF TOWER3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA4543Z**MAKE**
HYUNDAI**MODEL**
IONIQ(G3)**DATE OF REG**
22.10.2019**CHASSIS CODE**
KMHC851CVLU186599**INV. NO/DATE**
91490056 17.01.2020**JOB NO.**
305372036**ODOMETER READING****DATE/TIME IN**
06.01.2020 09:30

Items total		4,733.60
Add GST @	7.000 %	331.35
Invoice amount		5,064.95

Issued by : KATHERINETAN 17.01.2020 16:16:39
Repair type : CLSO/57/57
Payment type/Term: /Credit 30 days

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ComfortDelGro Engineering Pte Ltd
A member of **COMFORTDELGRO**Head Office:
205 Braddell Road
Singapore 579701

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CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91490056	5,064.95	

Our Ref: CT20010013

Date: 17 January 2020



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 01/01/2020 @ 00:40 hrs
ALONG ALONG SHEARES AVE
INVOLVING SKD5670G

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 **SHA4543Z** (the "Taxi"). The Taxi was hired to **LIU SIWEI IC NO SXXXX685Z** a registered hirer-operator of **Comfort Transportation 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 **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
Manager, Fleet Safety

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

SHA 145123 Z

DATE	NAME OF DRIVER	MILEAGE READING					MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIM)		DATE	NAME OF DRIVER
								FROM	TO		
02/01	L	0306	49					10205	0202		
03/01/20	CK	0208	76				227	0415	1640		
07/01	L	0310	98					1210	0308		
04/01/20	CK	0312	63				165	0655	1650		
04/01/20	ck	0314	93					1745	0345		
5/1	L	0315	45					1230	1450		
5/1	ck	0317	13					1700	2340		
06/01/20	CK	0318	16				103.0	0420	0920		
06-01-20	ACCIDENT						14	0930	-		
09-01-20	PERMAN						0.7	1100	-		

Enquire Vehicle Insurance Details

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SKD5670G	01 Jan 2020 / 00:40:00	Successful	C01	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK