

Our Ref : T 0220 / SH 6008Y /WT/CK(st)
Your Ref :
Date : 26-Feb-2020

COMFORTDELGRO
ENGINEERING

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimilie +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 SH 6008Y YOUR INSURED PA 9335E
AND OTHER _____ ON 4-Feb-2020

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 6008Y 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 PA 9335E we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,728.50
6	<u>3.5</u> days Loss of Rental @ \$ 116.95 per day	\$ 409.33
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 :	\$ 3,145.32

HIRER'S CLAIM

7	<u>3.5</u> days Loss of Income @ \$ 80.00 per days	\$ 280.00
	Total Claims :	\$ 3,425.32

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

- a) Original repair bill
- b) LTA search slip/s of : PA 9335E
- c) GIA / Police report/s of : SH 6008Y
- 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.

A member of

COMFORTDELGRO

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SH6008Y , PA9335E **ON 04-Feb-20 17:25**
ALONG 413A COMMONWEALTH AVENUE WEST

I / We **OH TECK SOON** (Hirer) NRIC No.: **SXXXX529H**

and/or (Relief) NRIC No.: **SXXXX529H**

Taxi Number **SH6008Y**

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 **05-Feb-2020**

Name of Hirer **OH TECK SOON**

Hirer NRIC **SXXXX529H**

Signature :



Address **15 GHIM MOH ROAD #13-29**
270015

Contact No. **84987711**

Workshops

59 Loyang Drive Singapore 508969 24 Senoko Loop Singapore 758156
383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791
45 Pandan Road Singapore 609286 501 Yishun Industrial Park A Singapore 768773
320 Ubi Road 3 Singapore 408649

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 079909

CONTACT NO: 62222366

VEHICLE NO
SH 6008Y

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
29.09.2016

CHASSIS CODE
KMHLB41UMGU093521

NO/DATE
91496502 25.02.2020

JOB NO.
305379352

ODOMETER READING

JOB TYPE

Description : 3P 04.02.2020

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,550.00
Add GST @ 7.000 %		178.50
Total Invoice amount		2,728.50

Issued by : CHEWBEELENG 25.02.2020 13:31:25
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

- 1) WHILE TAKING ALL REASONABLE PRECAUTIONS TO BE TAKEN BY THE COMPANY TO AVOID DAMAGE TO THE VEHICLE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR DAMAGE TO OTHER PROPERTY BELONGING TO THE CUSTOMER OR DAMAGE TO THE VEHICLE CAUSED BY THE CUSTOMER'S OWNERS RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON RECEIVING THE VEHICLE FROM THE COMPANY AND REPORT ANY DAMAGE TO THE COMPANY IN WRITING TO THE COMPANY IF ANY COMPLAINTS CONCERNING THE VEHICLE ARE TO BE FILED. ALL CLAIMS MUST BE FILED WITHIN 30 DAYS OF RECEIVING THE VEHICLE IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS ON THE UNPAID BALANCE OF AMOUNT DUE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE. THE INTEREST WILL BE CHARGED FROM THE DATE OF RECEIVING THE VEHICLE TO THE DATE OF PAYMENT.
- 4) PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIVING THE COMPANY COPY OF THE INVOICE. IF YOU DO NOT AGREE WITH THE AMOUNT, PLEASE CONTACT THE COMPANY WITHIN 14 DAYS OF RECEIVING THE COMPANY COPY OF THE INVOICE. IF YOU DO NOT CONTACT THE COMPANY WITHIN 14 DAYS, YOU WILL BE DEEMED TO AGREE WITH THE AMOUNT AND THE COMPANY WILL BE RESPONSIBLE FOR THE 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.

Our Ref: CT20020083

Date: 25 February 2020



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 04/02/2020 @ 17:25 hrs
ALONG 413A COMMONWEALTH AVENUE WEST
INVOLVING PA9335E

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 **SH6008Y** (the "Taxi"). The Taxi was hired to **OH TECK SOON IC NO SXXXX529H** a registered hirer-operator of **Comfort Transportation 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

PA9335E 04 Feb 2020 / 17:25:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SH60084