

Our Ref : T 0620 / SHA1837X /KS(st)  
Your Ref: \_\_\_\_\_  
Date : 19-Jun-2020

## COMFORTDELGRO ENGINEERING

**AIG ASIA PACIFIC INSURANCE PTE LTD**  
**AIG Building**

**78 Shenton Way**

**#07-16**

**Singapore 079120**

**Attn : Motor Claims Department**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHA1837X YOUR INSURED SLQ6400H**  
**AND OTHER \_\_\_\_\_ ON 3-Jun-2020**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No SHA1837X 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 : SLQ6400H we are submitting these claim for your consideration on behalf of the claimants.

### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,247.00
2	<u>2</u> days Loss of Rental @ \$ 114.95 per day	\$ 229.90
3	Survey Report Fees ( <i>Surveyed by M/s LKK</i> )	\$ -
4	GIA / LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing Fee	\$ -
		<b>\$ 2,484.39</b>

### HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ 80.00 per days	\$ 160.00
	<b>Total Claims :</b>	<b>\$ 2,644.39</b>

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

- a) Original repair bill :
- b) LTA search slip/s of : SLQ6400H
- c) GIA / Police report/s of : SHA1837X
- d) Letter of authority from owner / hirer / operator
  - ( ) Photograph/s of Accident Scene
  - ( ) Certificate of Insurance
  - ( ) Witness statement/s
  - ( 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.

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Floor  
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: 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

Our Ref: CT20060036

Date: 10 June 2020



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      03/06/2020    @   15:00 hrs  
ALONG                              TOA PAYOH CENTRAL OPEN SPACE CARPARK  
INVOLVING                        SLQ6400H

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 **SHA1837X** (the "Taxi"). The Taxi was hired to **PONG YUH SOO IC NO SXXXX141I** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$114.95** 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.

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**LETTER OF AUTHORISATION**

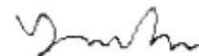
(NAF / PAF)

**ACCIDENT INVOLVING i 40 SHA1837X , SLQ6400H  
ALONG TOA PAYOH CENTRAL OPEN SPACE CARPARK****ON 03-Jun-20 15:00****I / We PONG YUH SOO (Hirer) NRIC No.: SXXXX141I****and/or (Relief) NRIC No.: SXXXX141I****Taxi Number SHA1837X****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 08-Jun-2020****Name of Hirer PONG YUH SOO****Hirer NRIC SXXXX141I**

Signature :

**Address 271 QUEEN STREET #12-206  
180271****Contact No. 92451016**

## Enquire Vehicle Insurance Details

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLQ6400H	03 Jun 2020 / 15:00:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

[Previous](#)

[OK](#)

SUA 1837 X

## TAX INVOICE

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

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

CONTACT NO: 64193000 3225094

Description : 3P 03.062020

VEHICLE NO  
SHA1837X

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
28.04.2016

CHASSIS CODE  
KMHLB41UMGU087854

NO/DATE  
91509660 10.06.2020

JOB NO.  
305403039

ODOMETER READING

JOB TYPE

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,100.00
Add GST @	7.000 %	147.00
Total Invoice amount		2,247.00

Issued by : CHEWBEELENG 10.06.2020 15:32:10  
Repair Type : CLS0/57/57  
Payment Type/Term : /Credit 30 days

PLEASE TAKE ALL REASONABLE PRECAUTIONS AGAINST THEFT. IN THE EVENT OF ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO THE CUSTOMER. CUSTOMERS ARE ADVISED TO DRIVE AND TESTER AT THEIR OWNERS' RISK. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN A RECEIPT WITHIN 7 DAYS FROM DATE OF DELIVERY. CUSTOMERS SHALL SIGN IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE 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 DEFECT OF ANY AMOUNT DUE AND REMAINING BY THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT. 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  
member of COMFORTDELGRO

Office:  
205 Braddell Road  
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

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