

Our Ref : CC20060251/ SHA9517S /WT/CK(st)
Your Ref :
Date : 7-Jul-2020

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

COMFORTDELGRO ENGINEERING

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

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 SHA9517S YOUR INSURED SKX2827L
AND OTHER _____ ON 23 Jun 2020

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No : SHA9517S 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 : SKX2827L we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 3,495.43
2	<u>4</u> 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 / Transporation Fees	\$ -
Sub Total :		\$ 4,003.68

HIRER'S CLAIM

7	<u>4</u> days Loss of Income @ \$ 80.00 per days	\$ 320.00
Total Claims :		\$ 4,323.68

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

- a) Original repair bill :
- b) LTA search slip/s of : SKX2827L
- c) GIA / Police report/s of : SHA9517S
- d) Letter of authority from owner / hirer / operator
 - () Photocopies of Accident Scene Photos
 - () Certificate of Insurance
 - () PIR
 - (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

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

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 SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA9517S

MAKE
HYUNDAI

MODEL
IONIQ(G2)

DATE OF REG
17.08.2018

CHASSIS CODE
KMHC851CVKU106598

INV. NO/DATE
91512425 29.06.2020

JOB NO.
305406618

ODOMETER READING

DATE/TIME IN
23.06.2020 10:10

Description : 3P 23.06.2020

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	03-01-0104-2061	IONIQV1&3 CAP ASSY-WHEEL HUB	2	346.40	20.00	554.24
0002	04-01-0104-0574	IONIQVC PANEL-FENDER LH#	1	490.70	20.00	392.56
0003	28-01-0103-0007	(I40)FRT DOOR LOGO CCTPL MQQ30 *	1	75.00	0.00	75.00
0004	28-01-9999-2024	APP LOGO REAR DOOR L/R CCPL	1	80.00	0.00	80.00
0005	04-01-0104-0920	IONIQVC MOULDING ASSY-SIDE SILL LH	1	290.00	20.00	232.00
0006	04-01-0104-2467	IONIQVC MOULDING ASSY-W/LINE FRT DOOR LH	1	116.20	20.00	92.96
SUB-TOTAL :						1,426.76

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

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91512425	3,495.43	

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Workshops

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA9517S

INV. NO/DATE
91512425 29.06.2020

MAKE
HYUNDAI

JOB NO.
305406618

MODEL
IONIQ(G2)

ODOMETER READING

DATE OF REG
17.08.2018

DATE/TIME IN
23.06.2020 10:10

CHASSIS CODE
KMHC851CVKU106598

S/No	Part No.	Qty	Unit Price	%Disc	Net
JOB NATURE					
0001	PB		PANEL BEATING	800.00	800.00
0002	23-502		SPRAYPAINT ON AFFECTED AREA	1,000.00	1,000.00
0003	20-00		TUFF COAT ON AFFECTED PARTS.	40.00	40.00
SUB-TOTAL					1,840.00

Items total 3,266.76
Add GST @ 7.000 % 228.67
Invoice amount 3,495.43

Issued by : KATHERINETAN 29.06.2020 15:28:45
Repair type : CFSO/57/57
Payment Type/Term: /Credit 30 days

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CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91512425	3,495.43	

Our Ref: CC20060251



Date: 29 June 2020

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 23/06/2020 @ 09:05 hrs
ALONG UPP EAST COAST RD
INVOLVING SKX2827L

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 **SHA9517S** (the "Taxi"). The Taxi was hired to **CHUA CHING CHYE JOSEPH IC NO SXXXX232D** a registered hirer-operator of **CityCab 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 **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

4

Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name

SKX2827L 23 Jun 2020 / 09:05:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

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SWA 98775