

Our Ref : T 0720 / SHC8736Y /WT/CK(st)  
Your Ref :  
Date : 17-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

## 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 SHC8736Y YOUR INSURED SLQ3705Z**  
**AND OTHER \_\_\_\_\_ ON 7-Jul-2020**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC8736Y 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 : SLQ3705Z we are submitting these claims for your consideration on behalf of the claimants.

### TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,016.50
6	<u>2</u> days Loss of Rental @ \$ 110.67 per day	\$ 221.34
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing Fees	\$ -
<b>Sub Total :</b>		<b>\$ 1,245.33</b>

### HIRER'S CLAIM

7	<u>2</u> days Loss of Income @ \$ 80.00 per days	\$ 160.00
<b>Total Claims :</b>		<b>\$ 1,405.33</b>

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

- a) Original repair bill :
- b) LTA search slip/s of : SLQ3705Z
- c) GIA / Police report/s of : SHC8736Y
- d) Letter of authority from owner / hirer / operator  
( ) Traffic Compound ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance  
( ) Tow Fee ( x ) Rental Rate letter ( 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  
*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 SHC8736Y , SLQ3705Z  
ALONG KALLANG AVE X KALLANG RD****ON 07-Jul-20 09:40**I / We **ANG BOONG LIAK DAN...** (Hirer) NRIC No.: **SXXXX861Z**and/or (Relief) NRIC No.: **SXXXX861Z**Taxi Number **SHC8736Y**

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 **07-Jul-2020**Name of Hirer **ANG BOONG LIAK DANIEL**Hirer NRIC **SXXXX861Z**

Signature :

Address **169 BEDOK SOUTH AVENUE 3 #10-...  
460169**Contact No. **96723875**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSNW00077662000

Claim No : SNM20D202392

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,340.00  
DOLLARS ONE THOUSAND THREE HUNDRED AND FORTY ONLY.

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHC 8736Y  
Insured Vehicle No. : SLQ 3705Z

Date of Loss : 07/07/2020  
Place of Accident : KALLANG AVE X KALLANG RD

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : HUANG WEIXUAN  
Driver Name : MELVYN TOH KWANG LENG (ZHUO GUANGLONG)

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

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(1) Global Sum	S\$	1,340.00
		=====
TOTAL . . . . .	S\$	<b>1,340.00</b>
		=====

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Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No : 199303821R

Signature :   
CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

Date : 6/10/2020

Please forward your cheque made payable to:  
COMFORTDELGRO ENGINEERING PTE LTD

"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"

# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701  
Mainline + 65 6383 6280 Facsimile + 65 6280 9755

### 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 768732  
320 Ubi Road 3 Singapore 408649

COMPANY REG. NO.: 199506048W  
Page: 1

## TAX INVOICE

8010012  
CHINA TAIPING INSURANCE CO (S)PTE LTD  
SPRINGLEAF TOWER  
3 ANSON ROAD #16-00  
SINGAPORE 079909  
CONTACT NO: 62222366

VEHICLE NO  
SHC8736Y  
NO/DATE  
91514579 14.07.2020  
MAKE  
HYUNDAI  
JOB NO.  
305409755  
MODEL  
I-40  
ODOMETER READING  
\_\_\_\_\_  
DATE OF REG  
21.01.2016  
CHASSIS CODE      JOB TYPE  
KMHLB41UMGU083313

Description : 3P 07.07.2020

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		950.00
Add GST @ 7.000 %		66.50
<b>Total Invoice amount</b>		<b>1,016.50</b>

Issued by : KATHERINETAN 14.07.2020 14:30:27  
Repair Type : CLSO/57/57  
Payment Type/Term : /Credit 30 days

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.

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT20070096

Date: 14 July 2020



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON 07/07/2020 @ 09:40 hrs  
ALONG KALLANG AVE X KALLANG RD  
INVOLVING SLQ3705Z

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 **SHC8736Y** (the "Taxi"). The Taxi was hired to **ANG BOONG LIAK DANIEL IC NO SXXXX861Z** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$110.67** 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.

DATE	NAME OF DRIVER	MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (H)		DATE	NAME OF DRIVER
		FROM	TO		FROM	TO		
06/07/20	Daniel	6758	43	308	7:00	5:00		
07/07/20	Daniel	6759	86	148	7:00	5:00		
8/7	Accident			SA	0815	-		
9/7	Repair			Out	-	1600		

SHC 8736 Y

*[Handwritten signature]*

## Enquire Vehicle Insurance Details

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

SLQ3705Z 07 Jul 2020/09:40:00 Successful

C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Previous

OK

SHC8736Y



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

**Our Ref: CC3/CTI20007170/T1es3**

01 OCT 2020

**HUANG WEIXUAN**  
BLK 989B JURONG WEST ST 93  
#15-711  
SINGAPORE 642989

Dear Sir/Madam,

**ACCIDENT INVOLVING SLQ 3705Z AND SHC 8736Y ON 07/07/2020**

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

*asher*

Asher  
Case Handler  
Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

c.c. *China Taiping Insurance (Singapore) Pte Ltd*  
*(Motor Claims Dept)*