

Our Ref : T 0720 / SH 8573T /WT/CK(st)
Your Ref :
Date : 21-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 SH 8573T YOUR INSURED SMG4393Z
AND OTHER ON 10-Jul-2020

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 8573T 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 : SMG4393Z we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,819.00
6	6 days Loss of Rental @ \$ 114.95 per day	\$ 689.70
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing Fees	\$ -
Sub Total :		\$ 2,516.19

HIRER'S CLAIM

7	6 days Loss of Income @ \$ 80.00 per days	\$ 480.00
Total Claims :		\$ 2,996.19

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

- a) Original repair bill, survey bill/report & original/ scan photographs : 4 pcs.
b) LTA search slip/s of : SMG4393Z
c) GIA / Police report/s of : SH 8573T
d) Letter of authority from owner / hirer / operator
() Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
(X) PIR (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.

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

A member of

COMFORTDELGRO

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SH8573T , SMG4393Z ON 10-Jul-20 22:15
ALONG ALONG JLN BESAR BEFORE WELD RD JUNCTION

I / We **LEONG KOK SUM** (Hirer) NRIC No.: **SXXXX955G**

and/or (Relief) NRIC No.: **SXXXX955G**

Taxi Number **SH8573T**

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 **11-Jul-2020**

Name of Hirer **LEONG KOK SUM**

Hirer NRIC **SXXXX955G**

Signature :



Address **537 BUKIT BATOK STREET 52 #04-...
650537**

Contact No. **91736763**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3079861800

Claim No : SNM20D202464

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,810.00
DOLLARS TWO THOUSAND EIGHT HUNDRED AND TEN 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. : SH 8573T
Insured Vehicle No. : SMG 4393Z

Date of Loss : 10/07/2020
Place of Accident : JLN BESAR BEFORE WELD RD JUNCTION

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 : OCTA METIER PTE LTD
Driver Name : OPPILAMANI TAMILARASAN

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.

(1) Global Sum	S\$ 2,810.00
	=====
TOTAL	S\$ 2,810.00
	=====

Claimant Name : COMFORT TRANSPOTATION PTE LTD

NRIC No : 199303821R

Signature : _____

Date : _____

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

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"

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
SH 8573T

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
12.05.2016

CHASSIS CODE
KMHLB41UMGU087927

NO/DATE
91515317 20.07.2020

JOB NO.
305410353

ODOMETER READING

JOB TYPE

Description : 3P 10.07.2020

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		1,700.00
Add GST @	7.000 %	119.00
Total Invoice amount		1,819.00

Issued by : KATHERINETAN 20.07.2020 11:32:40
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 LEFT TO OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLE IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY, ADVISE 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 DATE OF 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.

Our Ref: CT20070139

Date: 20 July 2020



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 10/07/2020 @ 22:15 hrs
ALONG ALONG JLN BESAR BEFORE WELD RD JUNCTION
INVOLVING SMG4393Z

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 **SH8573T** (the "Taxi"). The Taxi was hired to **LEONG KOK SUM IC NO SXXXX955G** 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 **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.

READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
			FROM	TO
6	33	249.0	6pm	4.30 am
9	12	279	045X	1445
1	36	223.8	7pm	4.30am
4	47	309	045X	1445
7	42	294.2	6pm	4.30 am
0	28	286	045X	1450
3	82	353.7	6pm	6 am
6	87	305.2	6pm	4.30am
0	14	327	0500	1510
5	291	276.8	6pm	4.30 am
5	81	290	0450	1440

DATE	NAME OF DRIVER	MILEAGE READING							MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		6	1	5	9	4	6	FROM		TO	
07/07/20	LEONG K. S.	6	1	5	9	4	6		365.1	6pm	4.30am
08/07/20	LEONG K. S.	6	1	6	1	7	8		232	6pm	4.30am
09/07/20	LEONG K. S.	6	1	6	4	1	8		269.8	6pm	4.30am
09/07/20	LEONG K. S.	6	1	6	6	9	8		280	6pm	4.30am
09/07/20	LEONG K. S.	6	1	6	9	1	3		215.3	9pm	4.30am
10/07/20	LEONG K. S.	6	1	7	0	3	5		122	6pm	4.30am
10/07/20	LEONG K. S.	6	1	7	1	5	2		96.3	6pm	4.30am
10-07-20	Accident	6	1	7	1	5	2		96.3	6pm	4.30am
10-07-20	Repair	6	1	7	1	5	2		96.3	6pm	4.30am

Enquire Vehicle Insurance Details

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

SMG4393Z 10 Jul 2020 / 22:15:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

[Previous](#)

[OK](#)



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 4883
www.police.gov.sg

TAXI BUSINESS

09 SEP 2020

FLEET SAFETY

Our Ref : TP/IP/29699/2020

Date : 31 August 2020

LEONG KOK SUM
BLK 537 BUKIT BATOK STREET 52
#04-593
SINGAPORE 650537

Dear Sir/Madam

**ROAD TRAFFIC ACCIDENT INVOLVING SMG 4393 Z AND SH 8573 T ALONG JALAN BESAR
ON 10.07.2020 AT ABOUT 10.15PM**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver/rider of **SMG 4393 Z** had committed an offence of **Careless Driving Causing Hurt under Section 65(1)(a) of the Road Traffic Act Chapter 276 p/u Section 65(4)(a) of the same Act.** Action has been initiated against the driver/rider for the said offence.
3. If you have any clarification, you may contact the Investigation Officer, Senior Station Inspector Juremah Ahmad at office number: 65476219.
4. Thank you.

Yours faithfully

**HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE**

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ACCIDENT INVOLVING SMG 4393Z AND SH 8573T ON 10/07/2020

Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Tue 9/8/2020 5:13 PM

To: TAMILARASAN@RCY.COM.SG <TAMILARASAN@RCY.COM.SG>

Our Ref: CC3/CTI20007282/T1es3

08 SEPT 2020

OCTA METIER PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SMG 4393Z AND SH 8573T ON 10/07/2020

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
Case Handler
Email: ashersng@lkkauto.com

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

Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.