

Our Ref : T 1020 / SH 9589S /KS(st)  
Your Ref: \_\_\_\_\_  
Date : 21-Oct-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 SH 9589S YOUR INSURED SMH3043K**  
**AND OTHER \_\_\_\_\_ ON 13-Oct-2020**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No SH 9589S 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 : SMH3043K we are submitting these claim for your consideration on behalf of the claimants.

### TAXI OWNER'S CLAIM

1	Cost of Repair	\$	1,444.50
2	<u>3</u> days Loss of Rental @ \$ 114.95 per day	\$	344.85
3	Survey Report Fees ( <i>Surveyed by M/s LKK</i> )	\$	-
4	GIA / LTA Search Fees	\$	2.00
5	GIA / Police Report Fees	\$	-
6	Towing Fee	\$	-
		\$	1,791.35

### HIRER'S CLAIM

7	<u>3</u> days Loss of Income @ \$ 80.00 per days	\$	240.00
	<b>Total Claims :</b>	\$	2,031.35

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

- a) Original repair bill :
- b) LTA search slip/s of : SMH3043K
- c) GIA / Police report/s of : SH 9589S
- d) Letter of authority from owner / hirer / operator
  - ( ) Photograph/s of Accident Scene ( ) Certificate of Insurance
  - ( ) Witness statement/s ( ) PIR ( 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

## TAX INVOICE

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY AIG BUILDING #07-16  
SINGAPORE 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SH 9589S

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
26.05.2016

CHASSIS CODE  
KMHLB41UMGU089924

NO/DATE  
91528831 19.10.2020

JOB NO.  
305427843

ODOMETER READING

JOB TYPE

Description : 3P 13.10.2020

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,350.00
Add GST @ 7.000 %	94.50
Total Invoice amount	1,444.50

Issued by : KATHERINETAN 19.10.2020 15:12:51  
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

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

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

Our Ref: CT20100211

Date: 19 October 2020



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON                      13/10/2020    @   14:40 hrs  
ALONG                              PIE (JURONG)  
INVOLVING                        SMH3043K

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 **SH9589S** (the "Taxi"). The Taxi was hired to **TEO SIEW KHOON IC NO SXXXX784A** 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

Philip Chia  
Manager, Fleet Safety

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SH 9599 S

SA 9689 S					NAME OF DRIVER		MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF DRIVER	MI
DATE	NAME OF DRIVER		MILEAGE READING		FROM	TO								
10/10	7	Fee	536	55	4	0830	1130	79						
10/10		Jeff	536	86	1	1130	0145	307						
11/10	6	Fee	536	92	8	0730	1220	67						
11/10	8	Seah. <sup>24</sup> (62)	537	00	8	1245	1745	80						
11/10	3	Fee	537	03	7	1800	181955	29						
11/10	/	Jeff				off								
12/10	14	Fee	537	20	4	0630	1640	167						
12/10		Jeff	537	44	3	1650	0145	238						
13/10		Fee				0630	1555							
13/10/20	Academy		537	22	x	1505		IN						
			537	22	x	0938		OUT						

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING i 40 SH9589S , SMH3043K  
ALONG PIE (Jurong)****ON 13-Oct-20 14:40**

I / We

**TEO SIEW KHOON**(Hirer) NRIC No.: **SXXXX784A**

and/or

(Relief) NRIC No.: **SXXXX784A**

Taxi Number

**SH9589S**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of earning (Pending successful recovery), 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

**13-Oct-2020**

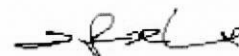
Name of Hirer

**TEO SIEW KHOON**

Hirer NRIC

**SXXXX784A**

Signature :



Address

**890B TAMPINES AVENUE 1 #09-329  
522890**

Contact No.

**91907083**

## Third Party Insurer Enquiry

Our Ref No: GR-20-124300

Date of Request: 13/10/2020

Your Ref No: Online Purchase

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road  
Singapore 579701

Dear Sir/Madam,

Enquiry Date 13/10/2020  
Enquiry By Catherine Por Moy Juan  
TP Vehicle No. SMH3043K  
Accident Date 13/10/2020

### Enquiry Result

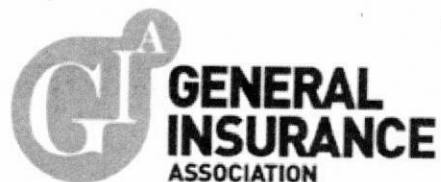
TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SMH3043K	AIG Asia Pacific Insurance Pte. Ltd.	18/01/2020-17/01/2021	65-6419-3000

Thank You.

64 9589H

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-20-124300

Date of Request: 13/10/2020

Your Ref No: Online Purchase

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road  
Singapore 579701

Dear Sir/Madam,

Enquiry Date 13/10/2020  
Enquiry By Catherine Por Moy Juan  
TP Vehicle No. SMH3043K  
Accident Date 13/10/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque