| Our Ref : | T 1020 / SHA4535Y /KS(st) | | COMFORTDELGRO |
|---|---|--|--|
| Your Ref: | | | ENGINEERING |
| Date : | 1-Nov-2020 | CDGE Taxi Claims Dept | |
| AIG ASIA PA | CIFIC INSURANCE PTE LTD | 59 Loyang Drive 4th Floo Singapore 508969 | ComfortDelGro Engineering Pte Ltd 205 Braddell Road Singapore 579701 |
| 78 Shenton Wa | , | ogapara assass | Mainline +65 6383 6280 Facsimilie +65 6280 9755 |
| | • | PREJUDICE | www.cdge.com.sg |
| #07-16 | | TILLOCDICE | Company Registration No: 199506048W |
| Singapore 079 | | | Workshops |
| Attn: Motor Dear Sir | Claims Department | | Braddell 205 Braddell Road Singapore 579701 |
| ACCIDENT IN | VOLVING OUR TAXI SHA4535Y YO | OUR INSURED <u>SMR57</u> ON <u>17-Oct-2020</u> | 00G Loyang 59 Loyang Drive Singapore 508969 |
| | horised repair workshop for Comfort Tra SHA4535Y which was involved in the | | |
| insured vehicle authorized us to | The vehicle owner and the taxi driver concerns assist them in presenting their claims an atters arising from the damage to the vehicle. | oncerned have requested against the party respons | d and Pandan 45 Pandan Road |
| | | | Singapore 408649 Sungei Kadut 7 Sungei Kadut Way Singapore 728791 1,487.30 |
| 2 4 | days Loss of Rental @ \$ 110.67 pe | er day \$ | 442.68 |
| | Report Fees (Surveyed by M/s LKK) | \$ | - |
| | A Search Fees | \$ | 2.00 |
| | lice Report Fees | \$ | |
| 6 Towing F | -ee | \$ | 1,931.98 |
| HIRER'S CLA | IM | Ψ | 1,901.00 |
| 7 4 | days Loss of Income @ \$ 80.00 pe | er days\$ | 320.00 |
| · · | | Total Claims : \$ | 2,251.98 |
| a) Original b) LTA sea c) GIA / Po d) Letter of | the matter and let us hear from you on the matter and let us hear from you on the let. | G) Certificate of Insurance Mileage record the settlement of the said | |
| Please note that to any personal | at it is a condition of any settlement reac Il injury claim (if any) of the taxi driver. | hed that it shall be withou | ut prejudice |

Yours faithfully Kazali Hj Selahudin

CDGE Taxi Claims Department

Tel: 6214 8736 Fax: 6214 1843 Email: kazali@cdge.com.sg

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COMFORTDELGRO



A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

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

Workshops

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286 24 Senoko Loop Singapore 758156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 7687

320 Ubi Road 3 Singapore 408649 REG. NO.: 199506048W Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

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

CONTACT NO: 64193000

3225094

VEHCLE NO SHA4535Y

NO/DATE 91530083 27.10.2020

MAKE HYUNDAI

305428493

MODEL I - 40

ODOMETER READING

DATE OF REG 26.03.2015

CHASSIS CODE

JOB TYPE KMHLB41UMFU065930

Description: 3P 17.10.2020

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt Add GST @ 7.000 %

1,390.00

Total Invoice amount

1,487.30

Issued by : CHEWBEELENG 27.

Repair Type : CLSO/57/57

Payment Type/Term : /Credit 30 days CHEWBEELENG 27.10.2020 14:02:46

ComfortDelGro Engineering Pte Ltd

A member of **COMFORT**DELGRO

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: CT20100266

Date: 27 October 2020



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

17/10/2020 @ 08:00 hrs

ALONG

NORTH BUONA VISTA RD X HOLLAND DR

INVOLVING

SMR5700G

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 SHA4535Y (the "Taxi"). The Taxi was hired to CHUA KIAN TIONG IC NO SXXXX106J 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 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

Yours faithfully

Philip Chia Manager, Fleet Safety

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| | HOURS OPERATED (TIME) FROM TO 4653 1529 1640 2624 0612 1523 1640 0026 0601 0845 | 3845 |
|------------|--|------------|
| | MILEAGE TRAVELLED (KM) O1 5 18 9 170 170 | Chur. |
| | MILEAGE READING MILEAGE READING A 4 8 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | 1) Coodway |
| 3714 45357 | MAME OF DRIVER KT GHWA KT GHWA KT GHWA KT GHWA KT GHWA | Appair |
| | 12.10. | 30.10 |
| Ĭ | 6609 1530 1700 2318 6609 1521 1700 0029 1700 0029 1809 1835 | 1640 1304 |
| FAGE | ELANMEN = Montes | 00 |

•

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA4535Y , SMR5700G

ON 17-Oct-20 08:00

ALONG

NORTH BUONA VISTA RD X HOLLAND DR

I / We

CHUA KIAN TIONG

(Hirer) NRIC No.:

SXXXX106J

and/or

(Relief) NRIC No.: SXXXX106J

- Renton link

Taxi Number

SHA4535Y

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

17-Oct-2020

Name of Hirer

CHUA KIAN TIONG

Hirer NRIC

SXXXX106J

Signature :

Address

842C TAMPINES STREET 82 #04-44

523842

Contact No.

97705274



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

Third Party Insurer Enquiry

Our Ref No:

GR-20-126229

Date of Request:

17/10/2020

Your Ref No:

Online Purchase

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Dear Sir/Madam,

Enquiry Date

17/10/2020

Enquiry By

Janet Lim Siang Gek

TP Vehicle No.

SMR5700G

Accident Date

17/10/2020

Enquiry Result

| TP Vehicle No. | Insurer | | |
|----------------|--------------------------------------|-----------------------|-------------------------------|
| 01455555 | AIG Asia Pacific Insurance Pte. Ltd. | Period of Insurance | Insurer Tel. No. 65-6419-3000 |
| | | 14/01/2020-13/01/2021 | |

Thank You.

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

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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-20-126229

Date of Request:

17/10/2020

Your Ref No:

Online Purchase

ComfortDelGro Engineering Pte Ltd 205 Braddell Road

Singapore 579701

Dear Sir/Madam,

Enquiry Date

17/10/2020

Enquiry By

Janet Lim Siang Gek

TP Vehicle No.

SMR5700G

Accident Date

17/10/2020

| DESCRIPTION | | |
|----------------------------------|--------------|------|
| TP Insurer Enquiry | AMOUNT (S\$) | |
| GST Amount | (00) | |
| Total Amount Due (GST Inclusive) | | 1.87 |
| | | 0.13 |
| Thank You. | | 2.00 |

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For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque