| 3              |   |                                | ONTEOD          |
|----------------|---|--------------------------------|-----------------|
| Our Ref :      | CT1220 / SHC8101D /KS(st)   |                                | OMFOR           |
| Your Ref:      |   | E                              | NGINEER         |
| Date :         | 18-Jan-2021   | CDGE Taxi Claims Dept          |                 |
|                | TO THE LANGE PER LANGE  | 59 Loyang Drive 4th Floor      | ComfortDelGro   |
|                | ACIFIC INSURANCE PTE LTD  | Singapore 508969               | 205 Braddell Ro |
| AIG Buildin    | ng  | Singapore occord               | _Ma             |
| 78 Shenton V   | Way   | T PREJUDICE                    | Fac             |
| #07-16         | WITHOU  | I PREJUDICE                    | Communic        |
| Singapore 0'   | 79120   |                                | Company         |
| Attn : Moto    | or Claims Department  |                                |                 |
| Dear Sir       |   |                                |                 |
|                | INVOLVING OUR TAXI SHC8101D   | YOUR INSURED SDH11             | 1 <u>28U</u>    |
|                |   | ON 8-Dec-2020                  |                 |
| AND OTHE       |   |                                | woor of         |
| We are the a   | authorised repair workshop for Comfort T  | ransportation Pte Ltd, trie ov | viiei oi        |
| motor Vehicle  | No SHC8101D which was involved in the   | ie captioned accident with yo  | oui             |
| incured vehice | The vehicle owner and the taxi drive  | r concerned have requested     | and             |
| authorized II  | s to assist them in presenting their claim  | s against the party responsit  | ole for         |
| all conlicable | e matters arising from the damage to the  | vehicle.                       |                 |
|                |   |                                | 128U            |
| As the accid   | ent was caused by the negligent act of yo<br>nitting these claim for your consideration | ui ii.eu                       |                 |
|                |   | on bondin or the claim         |                 |
|                | ER'S CLAIM  | \$                             | 1,979.50        |
|                | of Repair days Loss of Rental @ \$ 110.67   | per day \$                     | 332.01          |
| 2 3<br>3 Surve | ey Report Fees (Surveyed by M/s LK  | <b>(</b> )                     |                 |
| 4 GIA          | LTA Search Fees   | Ψ                              | 2.00            |
|                | Police Report Fees  | \$                             |                 |
|                | ng Fee  | \$                             | 0.040.54        |
| 0 10           | .9  | \$                             | 2,313.51        |
| HIRER'S C      | LAIM  | per days \$                    | 240.00          |
| 73             | days Loss of Income @ \$ 80.00  |                                | 2,553.51        |
|                |   | Total Claims : _\$             | 2,000.01        |
| We enclose     | e herewith the following documents to su  | pport the claims: -            |                 |
| a) Origi       | nal repair bill:  |                                |                 |
| b) LTA         | search slip/s of : SDH11  |                                |                 |
| c) GIA         | / Police report/s of : SHC81  |                                |                 |
| d) Lette       | er of authority from owner / hirer / operate  | or                             |                 |
| ( ) [          | 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.

COMFORTDELGRO

Engineering Pte Ltd ad Singapore 579701

> ainline +65 6383 6280 similie +65 6280 9755

> > www.cdge.com.sg

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

320 Ubi Road 3 Singapore 408649

Sungei Kadut 7 Sungei Kadut Way Singapore 728791

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING

i 40 SHC8101D , SDH1128U

ON 08-Dec-20 09:20

ALONG

ALONG KEONG SIAK ROAD

I / We

**CHUA CHEW SOO** 

(Hirer) NRIC No.: SXXXX919J

and/or

(Relief) NRIC No.: SXXXX919J

Taxi Number

SHC8101D

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

08-Dec-2020

Name of Hirer

**CHUA CHEW SOO** 

Hirer NRIC

SXXXX919J

Signature:

Address

715 CLEMENTI WEST STREET 2 #07...

120715

Contact No.

96211031

# RELEASE VOUCHER (AIG Asia Pacific - Express Third Party Claim)

"We/I, <u>COMFORTDELGRO ENGINEERING PTE LTD</u> ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd <u>LKK AUTO CONSULTANTS PTE LTD</u> (name of surveyor) with respect to the amount claimed for <u>S\$2,380.00</u> (Global Sum) for vehicle no. <u>SHC 8101D</u> that was damaged pursuant to the accident which occurred on <u>08/12/2020</u> (date) along <u>KEONG SAIK RD, SINGAPORE</u> (location) involving vehicle no/s <u>SDH 1128U</u>.

This is pursuant to the inspection conducted on <u>08/12/2020 (date)</u> at "the workshop".

We/I confirm that we/I are/am authorized by the owner **COMFORT TRANSPORTATION**PTE LTD ("the third party claimant") of vehicle no. SHC 8101D make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SHC 8101D** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this \_\_\_\_\_\_ (day) of \_\_\_\_\_\_ (month) 20\_21 (year)

Mth

Signed by appointed surveyor

CLAIMS DEPARTMENT
CONFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Signed by "the workshop" (with chop)

"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"

Pieces forward your cheque made payable to:



A member of COMFORTDELGRO

### GST REG. NO. M2-8921817-3

8010004

### 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 Sungel Kadut Way Singapore 72879 501 Yishun Industrial Park A Singapore 70

320 Ubi Road 3 COMPANY 19 REG. NO.: 199506048W

NO/DATE 91538304 24.12.2020

MAKE HYUNDAI

JOB NO. 305437871

MODEL I - 40

ODOMETER READING

DATE OF REG 07.08.2014

KMHLB41UMEU056321

JOB TYPE

Description: 3P 08.12.2020

CONTACT NO: 64193000

AIG ASIA PACIFIC INSURANCE PTE LTD

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

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt 1,850.00 7.000 % Add GST @

Total Invoice amount

1,979.50

Issued by : KATHERINETAN 24.12.2020 11:41:15
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

3225094

#### ComfortDelGro Engineering Pte Ltd A member of COMFORTDELGRO

Head Office: 205 Braddell Road Singapore 579701

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

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT20120136

Date: 24 December 2020



### TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

08/12/2020 @ 09:20 hrs

ALONG

ALONG KEONG SIAK ROAD

INVOLVING

SDH1128U

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 SHC8101D (the "Taxi"). The Taxi was hired to CHUA CHEW SOO IC NO SXXXX919J 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 accident.

Yours faithfully

Philip Chia Manager, Fleet Safety

This is a computer generated letter. No signature is required.

|                      | HOURS OPERATED (TIME) | TO       | 64      | 2090                                    | 18:30   | 20     | 0300     |       | 1         | 1315      |      |      |
|----------------------|-----------------------|----------|---------|---|---------|--------|----------|-------|-----------|-----------|------|------|
|                      | HOURS OPEF            | FROM     | 06.30   | 20%                                     | トタイ     | 26.20  | 1900     | 0630  | 10851     | \         |      |      |
|                      | MILEAGE               | (KM)     | 400     | 245                                     | 1       | 96)    | 239      | 011   | 7         | CM        |      | t    |
|                      | MILEAGE READING       |          | 1000    | 8 2 2 2 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 1 2000  | 10800  | 20 C C C | 22128 | 7         | 7         |      | 1    |
|                      | NAME OF DRIVER        | 11:10    | C MYC O | Mrs ( )                                 | Chir I  | Jane J | Office 8 |       | Decident. |           |      |      |
| Ш                    | - DATE                | K. C. M. | 5/12    | The star                                | 00.1.10 | 7/12   | 8.13.02  | 0     | (10)      |           |      |      |
| RATED (TIM           | 10                    | X261     | 600     | 12/2                                    | 7.8     | 子子     | - E. S.  | 0800  | 10.01     | 6/15      | である  | 0530 |
| HOURS OPERATED (TIME | FROM                  | 23       | 36.30   | 1800                                    | Chari   | 1830   | 11.98    | 1845  | disk      | 1866      | 2090 | 1800 |
| MILEAGE              | (KM)                  | 256      | 120     | 167                                     | 361     | 75     | 20       | 181   | 1,61      | 18 318 JB | 190  | 3711 |
|                      | -LEADING              | 7 7 6    | 3 3 2   | G-                                      | 7) 1 [  | 8      | 000      | 29 0  | t<br>R    | 673       | 200  | 937  |

4.01

INSURER ENQUIRY

# Find insurer

Vehicle reg. no.

SDH1128U

**Date of Accident** 

08/12/2020

Reset

## % RESULT & RECEIPT

| TP Insurer Enquiry  |                            |
|---------------------|----------------------------|
| Insurance           | AIG                        |
| Period of Insurance | 24/09/2020 - 23/09/2021    |
| Requested By        | Huang Xiao Yan (COMFORTDEL |
| Requested Date      | 08/12/2020 11:16           |

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13** 

Total Amount Due (GST Inclusive): \$\$2

**General Insurance Association** 

Records Management Centre GST Registration No: **M400017735** 



### Jasper Chua (LKK Auto)

From: Jasper Chua (LKK Auto)

Sent: Friday, 16 April 2021 11:22 AM

To: COLIN.LCH@GMAIL.COM

Subject: ACCIDENT INVOLVING SDH 1128U AND SHC 8101D ON 08/12/2020

Our Ref: CC4/AIG20013525/T1ba3

LEONG CHENG HONG( BY EMAIL ONLY )

Dear Sir/Madam,

### **ACCIDENT INVOLVING SDH 1128U AND SHC 8101D ON 08/12/2020**

We refer to the above accident where we are acting for AIG Asia Pacific Insurance 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 note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

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.

Best Regards,

Jasper Chua | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2928 | email: jasperchua@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Merimen e-Claims 7/15/2021

# **Print Received Message**

This mail is associated with:

\*SHC8101D (6289616720SG) [SDH1128U]

ΤP

COMFORT TRANSPORTATION PTE LTD Dec 8 2020 9:00AM [LEONG CHENG HONG] ComfortDelGro Engineering Pte Ltd

From AIG Asia Pacific Insurance Pte. Ltd. (Express) (AIG\_SG\_EXPRESS), sent on 23/06/2021 14:36 PM.

То LKK\_HQ

Subject Alert - Adj Mandate Approved (S\$2463.51) - SHC8101D - Claim Handler: MdNoor, Norsiah

Approved:2463.51:Conflicting version. Please request for Video footage