Our Ref :

CT0121/ SHA4949L /CK(st)

Your Ref:

Dear Sir

Date

19-Feb-2021

CDGE Taxi Claims Dept 59 Loyang Drive 4th Flr

Singapore 508969

CHINA TAIPING INSURANCE CO LTD

3 ANSON ROAD

#16-00 SPRINGLEAF TOWER

SINGAPORE 079909

Attn: Motor Claims Department

WITHOUT PREJUDICE

ComfortDelGro Engineering Pte Ltd 205 Braddell Road Singapore 579701

> Mainline +65 6383 6280 Facsimilie +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

320 Ubi Road 3 Singapore 408649

Sungei Kadut 7 Sungei Kadut Way Singapore 728791

ACCIDENT INVOLVING OUR TAXI SHA4949L YOUR INSURED SMQ5781C ON 24-Jan-2021

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No: SHA4949L 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 : **SMQ5781C** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	1,444.50
6	2 days Loss of Rental @ \$ 125.40 per day	\$	250.80
0	Survey Report Fees (Surveyed by M/s LKK)	\$	-
3	The state of the s	\$	2.00
4	LTA Search Fees	Ψ	2.00
5	GIA / Police Report Fees	\$	()
6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$	-
b	Towing Fees Sub Total:	\$	1,697.30

HIRER'S CLAIM

7 2 days Loss of Income @ \$ 80.00 per days \$ 160.00

Total Claims: \$ 1,857.30

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

a) Original repair bill:

b) LTA search slip/s of:

SMQ5781C

c) GIA / Police report/s of :

SHA4949L

d) Letter of authority from owner / hirer / operator

() Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance

() 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.



LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING TOYOTA PRIUS SHA4949L , SMQ5781C , ... ON 24-Jan-21 16:00

ALONG

CHOA CHU KANG WAY

I / We

SEAH JUI LENG

(Hirer) NRIC No .:

SXXXX157D

and/or

KOH CHIN THIAM

(Relief) NRIC No.: SXXXX416C

Taxi Number

SHA4949L

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

25-Jan-2021

Name of Hirer

SEAH JUI LENG

Hirer NRIC

SXXXX157D

Signature:

Address

271 PASIR RIS STREET 21 #05-458

510271

Contact No.

93620489

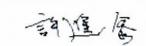
Name of Relief

KOH CHIN THIAM

Relief NRIC

SXXXX416C

Signature:



Address

334A ANCHRVALE CRESCENT 07-110

541334

Contact No.



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 Singe OMPANY REG. NO.: 199506048W

Page: 1

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD SPRINGLEAF TOWER

3 ANSON ROAD #16-00 SINGAPORE 079909

CONTACT NO: 62222366

Description: 3P 24.01.2021

VEHCLE NO SHA4949L

NO/DATE

91546091 15.02.2021

MAKE TOYOTA

JOB NO. 305450077

MODEL PRIUS HYBRID (G4) ODOMETER READING

DATE OF REG 10.08.2017

CHASSIS CODE JTDKB3FU803563178

JOB TYPE

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt 7.000 %

Total Invoice amount

1,444.50

KATHERINETAN 15.02.2021 16:29:17

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

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:

CT21010431

Date: 15 February 2021



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

24/01/2021

@ 16:00 hrs

ALONG

CHOA CHU KANG WAY

INVOLVING

SMQ5781C, GBJ8834G

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 SHA4949L (the "Taxi"). The Taxi was hired to SEAH JUI LENG IC NO SXXXX157D a registered hirer-operator of Comfort Transportation Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$125.40 per day (inclusive of GST).

Please be advised that the Taxi was insured with AXA Insurance Singapore 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.

	NO	10101	
DATE	NAME OF DRIVER	CANCERECTIVE	MILEAGE TRAVELLED (KM)
Knja	Deen	49369	87
191186	Helderif	5	3
26/11/21	Oppair	3	Imo
500			
	7	7 27	
100 100		7	-5
フルーソン			
3 47	3	7	
	トラフ		7.07

INSURER ENQUIRY

Find

insurer Vehicle reg. no.

SMQ5781C

Date of Accident

24/01/2021

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance China Taiping Insurance

Period of Insurance ________25/11/2020 - 24/11/2021

Requested By ______Por Moy Juan (COMFORTDELG...

Requested Date _______25/01/2021 14:30

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**

SUAY949L