

Our Ref: CC0321/SHA 903U/CK(st)
Date: 09.04.2021



CHINA TAIPING INSURANCE CO (S)PTE L
3 ANSON ROAD #16-00
Singapore 079909

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Attn : Motor Claims Department

Without Prejudice

Mainline +65 6383 6280
Facsimile +65 6280 9755

Dear Sir/Madam

www.cdge.com.sg

Company Registration No: 199508048W

ACCIDENT ON 12.03.2021 INVOLVING SHA 903U & SLG5845S ALONG LORNIE UNDERPASS

Workshops

We are the authorised repair workshop for CityCab Pte Ltd, the owner of vehicle No SHA 903U, which was involved in the captioned accident with your insured vehicle No SLG5845S.

Braddell
205 Braddell Road
Singapore 579701

The vehicle owner and the taxi hirer/driver concerned have requested and authorised us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage of the vehicle.

Loyang
59 Loyang Drive
Singapore 508969

As the accident was caused by the negligent act of your insured driver, we are submitting these claims for your consideration on behalf of the claimants:

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

Taxi Owner's Claim :

1. Cost of Repairs		S\$	2,008.78
2. Loss of Rental	5 days x S\$ 130.54	S\$	652.70
3. Survey Report Fee		S\$	0.00
4. LTA Search Fee		S\$	0.00
5. GIA / Police Report Fee		S\$	2.00
6. Others		S\$	0.00

Hirer's Claim :

1. Loss of Income	5 days x S\$ 80.00	S\$	400.00
2. Others		S\$	0.00

[E&OE] **Total Claims** S\$ **3,063.48**

A copy each of the following supporting documents marked [X] is enclosed:

<input checked="" type="checkbox"/> [X] Original Repair Bill	<input checked="" type="checkbox"/> [X] Letter of Authority from Owner/Hirer/Operator
<input checked="" type="checkbox"/> [X] GIA/Police Report(s)	<input checked="" type="checkbox"/> [X] Rental Rate Letter
<input checked="" type="checkbox"/> [X] LTA/GIA Search Slip(s)	<input checked="" type="checkbox"/> [X] Downtime/Mileage Record
<input type="checkbox"/> [] Survey Report / Bill	<input type="checkbox"/> [] Witness Statement / Accident Scene Photo(s)
<input type="checkbox"/> [] Driver's IC/DL/VL / Road Tax / Log Card / Certificate of Insurance	
<input type="checkbox"/> [] Tow Chit / PIR / Hirer's IRAS / Others :	

Kindly look into the matter and let us hear from you on the settlement of our clients' 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 sincerely

Catherine Koh

CDGE Claims Department

DID: 62148733

FAX: 62141843

Email: catherinekoh@cdge.com.sg

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

A member of

COMFORTDELGRO

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING TOYOTA PRIUS SHA903U , SLG5845S , Y... ON 12-Mar-21 15:45
ALONG LORNE UNDERPASS**

I / We **FOONG KEONG FATT** (Hirer) NRIC No.: **SXXXX088Z**

and/or (Relief) NRIC No.: **SXXXX088Z**

Taxi Number **SHA903U**

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-Mar-2021**

Name of Hirer **FOONG KEONG FATT**

Hirer NRIC **SXXXX088Z**

Signature :



Address **195 KIM KEAT AVENUE #11-378
310195**

Contact No. **87006033**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSNW00009172000

Claim No : SNM21D201454

Claimant : CITYCAB PTE LTD

Amount : S\$2,730.00

DOLLARS TWO THOUSAND SEVEN HUNDRED AND THIRTY 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. : SHA 903U

Insured Vehicle No. : SLG 5845S

Date of Loss : 12/03/2021

Place of Accident : LORNIE RD

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 : TAN YEW WEI

Driver Name : TAN YEW WEI

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\$ 2,730.00
	=====
TOTAL	S\$ 2,730.00
	=====

Claimant Name : CITYCAB PTE LTD

NRIC No : 1XXXXX839G

Signature :


CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Date :

4/5/21

"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"

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 1

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA 903U

MAKE
TOYOTA

MODEL
PRIUS HYBRID(G4A)

DATE OF REG
14.01.2020

CHASSIS CODE
JTDKB3FU303090452

INV. NO/DATE
91553395 07.04.2021

JOB NO.
305459238

ODOMETER READING

DATE/TIME IN
13.03.2021 09:40

Description : 3P 12.03.2021

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0302-2712	COVER REAR BUMPER	1	499.90	25.00	374.92
0002	04-01-0302-2288	REINFORCEMENT SUB-ASSY REAR BUMPER	1	318.80	25.00	239.10
0003	04-01-0302-2267	BUMPER PIECE	10	2.20	25.00	16.50
0004	04-01-0302-2713	GUARD REAR BUMPER CENTER	1	552.60	25.00	414.45
0005	04-01-0302-2715	COVER RR BUMPER -TOW HOOK COVER	1	82.70	25.00	62.02
0006	04-01-0302-1150	BUMPER PROTECTOR MAT	1	50.00	0.00	50.00
0007	09-01-0302-2133	ANTENNA ELECTRICAL KEY	1	40.50	25.00	30.37
SUB-TOTAL			:			1,187.36

JOB NATURE

- WHILE 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 OWNED AND INSURED BY OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN A RECEIPT WITHIN 7 DAYS FROM SUCH DELIVERY. NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, WITHIN 7 DAYS, THE VEHICLE WILL BE DEEMED TO HAVE BEEN IN EXCELLENT IN GOOD ORDER.
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE BUT NOT PAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT, I.E. AFTER 30 DAYS FROM THE INVOICE DATE, 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

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91553395	2,008.78	

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SHA 903U

INV. NO/DATE
91553395 07.04.2021

MAKE
TOYOTA

JOB NO.
305459238

MODEL
PRIUS HYBRID(G4A)

ODOMETER READING

DATE OF REG
14.01.2020

DATE/TIME IN
13.03.2021 09:40

CHASSIS CODE
JTDKB3FU303090452

S/No	Part No.		Qty	Unit Price	%Disc	Net
0001	20-05	REAR BUMPER ADVERTISEMENT LOGO		50.00		50.00
0002	L	PANEL BEATING		350.00		350.00
0003	23-502	SPRAYPAINT ON AFFECTED AREA		250.00		250.00
0004	L	REMOVE/REFIX REVERSE SENSOR		40.00		40.00
SUB-TOTAL			:			690.00

Items total	1,877.36
Add GST @ 7.000 %	131.42
Invoice amount	2,008.78

Issued by : KATHERINETAN 07.04.2021 16:16:22
Repair type : CFSO/57/57
Payment Type/Term: /Credit 30 days

1) WHILST THE COMPANY ACCEPTS THE THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 3 DAYS FROM SUCH DELIVERY ADVISE THE COMPANY OF ANY COMPLAINTS (OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER).
3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY PAYMENT 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) IN THE PERIOD OF DEFAULT.
4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY SIGNING OR INK/STAMP/REMARKS 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

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91553395	2,008.78	

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CC21030213



Date: 07 April 2021

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 12/03/2021 @ 15:45 hrs
ALONG LORNIE UNDERPASS
INVOLVING SLG5845S, YP3238G

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA0903U** (the "Taxi"). The Taxi was hired to **FOONG KEONG FATT IC NO SXXXX088Z** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$130.54** 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.

DATE	NAME OF DRIVER	MILEAGE READING				MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)		DATE	NAME OF
							FROM	TO		
08/03/21	K P Teo	1	8	0	8	291	1855	0605		
09/03/21	Kee Seng	1	8	1	1	261	0640	1730		
09/03/21	K P Teo	1	8	1	3	230	1905	0555		
10/03/21	Derek Fong	1	8	1	5	244	0730	1750		
10/03/21	K P Teo	1	8	1	8	248	1930	0540		
11/03/21	Derek Fong	1	8	2	0	233	0720	1600		
11/03/21	K P Teo	1	8	2	3	269	1800	0555		
12/03/21	Derek Fong	1	8	2	6	275	0715	2215		
12/03/21	K P Teo	1	8	2	8	244	2250	0625		
13/03/21	Accident ?					Loyang	0940	—		
17/03/21	Repair					—	—	1130		


INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

SLG5845S

Date of Accident

12/03/2021 

Reset

% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **China Taiping Insurance**

Period of Insurance **17/12/2020 - 16/12/2021**

Requested By **Por Moy Juan (COMFORTDELG...**

Requested Date **13/03/2021 10:37**

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

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

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

5 MAR 9034

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Wednesday, 14 April 2021 4:48 PM
To: yewwei90@gmail.com
Subject: ACCIDENT INVOLVING SLG 5845S AND SHA 903U / OTHERS ON 12/03/2021

Our Ref: CC3/CTI21003674/Ges3

14 APR 2021

TAN YEW WEI

Dear Sir/Madam,

ACCIDENT INVOLVING SLG 5845S AND SHA 903U / OTHERS ON 12/03/2021

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.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant

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
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

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