

Our Ref: CT0421/SH 8554Z/CK(st)  
Date: 05.05.2021



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: 199506048W

**ACCIDENT ON 05.04.2021 INVOLVING SH 8554Z & GBJ658B ALONG CLEMENTI AVE 2 SLIP RD  
TWDS AYE**

**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

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of vehicle No SH 8554Z, which was involved in the captioned accident with your insured vehicle No GBJ658B.

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.

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:

**Taxi Owner's Claim :**

1. Cost of Repairs		S\$	963.00
2. Loss of Rental	4 days x S\$ 125.40	S\$	501.60
3. Survey Report Fee		S\$	0.00
4. LTA Search Fee		S\$	7.49
5. GIA / Police Report Fee		S\$	0.00
6. Others		S\$	0.00

**Hirer's Claim :**

1. Loss of Income	4 days x S\$ 80.00	S\$	320.00
2. Others		S\$	0.00

[E&OE]      **Total Claims**      S\$      **1,792.09**

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

[X] Original Repair Bill	[X] Letter of Authority from Owner/Hirer/Operator
[X] GIA/Police Report(s)	[X] Rental Rate Letter
[X] LTA/GIA Search Slip(s)	[X] Downtime/Mileage Record
[ ] Survey Report / Bill	[ ] Witness Statement / Accident Scene Photo(s)
[ ] Driver's IC/DL/VL / Road Tax / Log Card / Certificate of Insurance	
[ ] 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



**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****TOYOTA PRIUS SH8554Z , GBJ658B  
CLEMENTI AVE 2 SLIP RD TWDS AYE****ON 05-Apr-21 21:40**

I / We

**DANIEL LEE YIP WAI**(Hirer) NRIC No.: **SXXXX588Z**

and/or

(Relief) NRIC No.: **SXXXX588Z**

Taxi Number

**SH8554Z**

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

**06-Apr-2021**

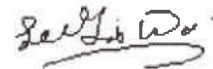
Name of Hirer

**DANIEL LEE YIP WAI**

Hirer NRIC

**SXXXX588Z**

Signature :



Address

**325 CLEMENTI AVENUE 5 #01-141  
120325**

Contact No.

**96315689**

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSNA00121502000

Claim No : SNM21D202005

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,490.00

SINGAPORE DOLLARS ONE THOUSAND FOUR HUNDRED AND NINETY 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. : SH 8554Z

Insured Vehicle No. : GBJ 658B

Date of Loss : 05/04/2021

Place of Accident : CLEMENTI AVE 2

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 : VAN-GO PTE LTD

Driver Name : MUHAMMAD KHAIRUL BIN MAZELAN

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.

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(1) Global Sum	S\$ 1,490.00
	=====
TOTAL . . . . .	S\$ 1,490.00
	=====

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Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No : 1XXXXX821R

Signature :

  
CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

Date :

10/5/21

"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**

8010012

CHINA TAIPING INSURANCE CO (S)PTE LTD  
SPRINGLEAF TOWER

3 ANSON ROAD #16-00  
SINGAPORE 079909

CONTACT NO: 62222366

**VEHICLE NO**  
SH 8554Z

**MAKE**  
TOYOTA

**MODEL**  
PRIUS HYBRID(G4)

**DATE OF REG**  
23.12.2016

**CHASSIS CODE**  
JTDEB3FU503538898

**NO/DATE**  
91558096 30.04.2021

**JOB NO.**  
305462447

**ODOMETER READING**

**JOB TYPE**

Description : 3P 05.04.2021

**Invoice for Lump Sum Repair**

Total Lump Sum Repair Amt	900.00
Add GST @ 7.00 %	63.00
<b>Total Invoice amount</b>	<b>963.00</b>

Issued by : KATHERINETAN 30.04.2021 16:21:45  
Repair Type : CLSO/57/57  
Payment Type/Term : /Credit 30 days

- 1) 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.
- 2) 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.
- 3) 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.
- 4) 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**

Head Office:  
205 Braddell Road  
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

**OFFICE COPY**

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

Our Ref: CT21040083

Date: 30 April 2021



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON	05/04/2021 @ 21:40 hrs
ALONG	CLEMENTI AVE 2 SLIP RD TWDS AYE
INVOLVING	GBJ658B

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 **SH8554Z** (the "Taxi"). The Taxi was hired to **DANIEL LEE YIP WAI IC NO SXXXX588Z** 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.



	MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		FROM	TO
1	237	1418	0031
2	285	1407	0133
3	281	1447	0058
4	317	1404	0119
5	193	1402	2237
6	236	1418	0055
7	344	1403	0154
8	256	1428	0117
9	298	1418	0126
10	260	1426	0121
11	185	1413	2335

[illegible]

## Enquire Vehicle-Related Transaction History

### Transaction History Details

Log Date/Time:	06 Apr 2021 / 15:14:22	Transaction Amount:	\$7.49
Asset Type:	Vehicle		
Asset ID:	GBJ658B		
Transaction Type:	18.32 Insurance Enquiry (GIRO Payment)	Channel:	External Agency
User ID:	ECENGCC0 - GOH CHENG CHUAN ANDREW CORNELIUS	Business Transaction Reference No.:	20210406151422187312

Search Date / Time: 05 Apr 2021 21:40:00

Insurance Company: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Information displayed is correct as at the log date and time.

[Enquire Related Logs](#)

[Back to List](#)

SH85542

**Asher Sng (LKKAuto)**

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**From:** Asher Sng (LKKAuto)  
**Sent:** Monday, 3 May 2021 12:55 PM  
**To:** garyong66@icloud.com  
**Subject:** ACCIDENT INVOLVING GBJ 658B AND SH 8554Z ON 05/04/2021

**Our Ref: CC3/CTI21004510/T1es3**

03 MAY 2021

**VAN-GO PTE LTD**

Dear Sir/Madam,

**ACCIDENT INVOLVING GBJ 658B AND SH 8554Z ON 05/04/2021**

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.

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 call us if you have further queries.

Yours faithfully,

Asher  
*Case Handler*  
DID: 6841 6051  
FAX: 6741 4108  
Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

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