Our Ref:

Dear Sir/Madam

CC0421/SHC7085Z/CK(st)

Date:

18.06.2021

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

## ACCIDENT ON 21.04.2021 INVOLVING SHC7085Z & SGS3844D ALONG PORTSDOWN AVE

We are the authorised repair workshop for CityCab Pte Ltd , the owner of vehicle No SHC7085Z, which was involved in the captioned accident with your insured vehicle No SGS3844D.

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:

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

Taxi Owner's Claim:	Taxi	Own	er's	Claim	:
---------------------	------	-----	------	-------	---

Taxi Offici 5 claim.			
1. Cost of Repairs		S\$	1,391.00
2. Loss of Rental	4 days x S\$ 110.67	S\$	442.68
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
U. Others		7	

#### Hirer's Claim:

	[E&OE]	Total Claims	S\$	2,161.17	
2. Others			J.	0.00	
2. Ohlans			SŚ	0.00	
1. Loss of Income	4 da	ıys x S\$ 80.00	S\$	320.00	
Till Cr 5 Claim :					

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

[X]	Original Repair Bill	[X]	Letter of Authority from Owner/Hirer/Operator
5 . 5	0 1		•
[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 Ta	x / Log	Card / Certificate of Insurance
r 1	Tow Chit / PIR / Hirer's IRA	S / Othe	ers :

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.



**LETTER OF AUTHORISATION** 

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHC7085Z , SGS3844D

ON 21-Apr-21 12:54

**ALONG** 

**PORTSDOWN AVE** 

I / We

**YEOW KOON SENG** 

(Hirer) NRIC No.:

SXXXX223A

and/or

(Relief) NRIC No.: SXXXX223A

Taxi Number

SHC7085Z

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

21-Apr-2021

Name of Hirer

**YEOW KOON SENG** 

Hirer NRIC

SXXXX223A

Signature:



Address

477A UPPER SERANGOON VIEW #1...

531477

Contact No.

96509298

#### MOTOR CLAIMS DISCHARGE VOUCHER

Policy No: DMHCSNA00002692000 Claim No: SNM21D202337

Claimant : CITYCAB PTE LTD

Amount : S\$1,880.00

SINGAPORE DOLLARS ONE THOUSAND EIGHT HUNDRED AND EIGHTY

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. : SHC 70852 Insured Vehicle No. : SGS 3844D

Date of Loss : 21/04/2021

Place of Accident : PORTSDOWN AVE, SINGAPORE

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 : TOODS PARTNERS PTE LTD
Driver Name : MUHAMMAD KHALID BIN-ABU

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.

Claimant Name: CITYCAB PTE LTD

NRIC No : 1XXXXX839G

Signature

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
SOLOYANG DRIVE
SINGAPORE 508969

"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"

Pionse forward your cheque made payable to:



### ComfortDelGro Engineering Pte Ltd

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

Workshops

205 Braudell Road Singapore 579701 983 Sin Ming Drive Singapore 575717 7 Sunger Kadel Way Singapore 728791 45 Pandan Road Singapore 609286 320 Ubi Road 3 Singapore 408649

COMPANY REG. NO.: 199506048W

Page: 1

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

VEHCLE NO SHC7085Z

**NO/DATE** 91564319 24.05.2021

MAKE HYUNDAI JOB NO. 305464987

MODEL I - 40 ODOMETER READING

DATE OF REG 07.04.2016

CHASSIS CODE

JOB TYPE

KMHLB41UMGU086889

Description: 3P 21.04.2021

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt Add GST 0 7 7.000 % 1,300.00 91.00

Total Invoice amount

1,391.00

KATHERINETAN 24.05.2021 15:09:05 CFSO/57/57 Issued by : KATHERINETAN 24
Repair Type : CFSO/57/57
Payment Type/Term : /Credit 30 days

omfortDelGro Engineering Pte Ltd

ead Office: 5 Braddell Road ngapore 579701

ndly note that no receipt shall be issued unless requested. USTOMER'S COPY

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

Our Ref: CC21040393

Date: 24 May 2021



### TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

21/04/2021 @ 12:54 hrs

ALONG

PORTSDOWN AVE

INVOLVING

SGS3844D

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 SHC7085Z (the "Taxi"). The Taxi was hired to YEOW KOON SENG IC NO SXXXX223A a registered hirer-operator of CityCab 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 **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	HOURS OPERATED (TIME		
		יייורבאמר חבאביייי	(KM)	FROM TO	DALE	NAME OF DRIVER
3/10	7	535068	159-7	8161 5670		
1314	h	535325	6.992	040 1903		
14/04	7	535640	3149	DEL1 19490		
15/		535922	2795	0461740		
91	'n	536224	3047	8461 5490		
	4	536414	190-7	0802 146		
18	3	536516	10/16	0810 1136		
19	N	536834	318.3	7561 4n%		5.
20	7	537193	35809	8年 1010		
7/ 20 1		3	70862	160 191		
12/00/2	y Kuidon	KARAN	- Control	138N		

## **Enquire Vehicle-Related Transaction History**

Transaction History Details

Log Date/Time:

21 Apr 2021 / 16:23:07

Asset Type:

Vehicle

Transaction Amount:

\$7.49

Asset ID:

SGS3844D

Transaction Type:

18.32 Insurance Enquiry (GIRO Payment)

Channel:

External Agency

User ID:

ECENGCCO - GOH CHENG CHUAN

Business Transaction Reference No.:

20210421162307488374

Search Date / Time:

21 Apr 2021 12:54:00

ANDREW CORNELIUS

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

# **Asher Sng (LKKAuto)**

From: Asher Sng (LKKAuto)

**Sent:** Monday, 3 May 2021 2:00 PM **To:** 'TODDSPARTNERS@GMAIL.COM'

Subject: ACCIDENT INVOLVING SGS 3844D AND SHC 7085Z ON 21/04/2021

Our Ref: CC3/CTI21005162/T1ea3

03 MAY 2021

#### TOODS PARTNERS PTE LTD

Dear Sir/Madam.

### ACCIDENT INVOLVING SGS 3844D AND SHC 7085Z ON 21/04/2021

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

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