

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
SHA9498M

MAKE
HYUNDAI

MODEL
IONIQ(G3)

DATE OF REG
09.10.2019

CHASSIS CODE
KMHC851CVLU178518

INV. NO/DATE
91594102 09.09.2021

JOB NO.
305484309

ODOMETER READING
DATE/TIME IN
26.08.2021 14:50

Description : 3P 26.08.2021

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	28-01-0104-2028	VEHICLE NUMBER PLATE FRONT	1	55.00	0.00	55.00
0002	28-01-0104-2029	VEHICLE NUMBER PLATE REAR	1	55.00	0.00	55.00
0003	04-01-0104-0572	PANEL ASSY HOOD#	1	2,253.80	20.00	1,803.04
0004	04-01-0104-0578	COVER-FR BUMPER#	1	430.90	20.00	344.72
0005	04-01-0104-2687	MOULDING-FRONT BUMPER CTR UPR	1	368.50	20.00	294.80
0006	04-01-0104-2696	GRILLE ASSY-RADIATOR#	1	1,409.10	20.00	1,127.28
0007	04-01-0104-2701	MOULDING-FRT BPR LICENSE PLATE	1	188.00	20.00	150.40
0008	04-01-0104-0651	HINGE ASSY HOOD LH	1	118.70	20.00	94.96
0009	04-01-0104-0652	HINGE ASSY HOOD RH	1	118.70	20.00	94.96

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMER, AND VEHICLES ARE LOANED TO CUSTOMER ON OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLE'S IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 3 DAYS THEREAFTER. CUSTOMER'S NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE WHICH IS NOT PAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID BY THE DUE DATE OF PAYMENT. AFTER 30 DAYS FROM THE DUE DATE, THE CUSTOMER WILL BE IN 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

Head Office:
205 Braddell Road
Singapore 579701

Please kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91594102	19,814.39	

Workshops

205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 508969
45 Pandan Road Singapore 609286

383 Sin Ming Drive Singapore 575717
7 Sungei Kadut Way Singapore 728791
320 Ubi Road 3 Singapore 408649

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S/No	Part No.		Qty	Unit Price	%Disc	Net
0010	04-01-0104-0604	LATCH ASSY-HOOD	1	127.30	20.00	101.84
0011	04-01-0104-2702	ABSORBER-FRONT BUMPER ENERGY	1	186.90	20.00	149.52
0012	04-01-0104-2685	MOULDING-FRONT BUMPER LH	1	186.90	20.00	149.52
0013	04-01-0104-0653	CAP-FRONT HOOK	1	29.00	20.00	23.20
0014	04-01-0104-2871	BRACKET-FR BUMPER SIDE SUPT LH	1	35.00	20.00	28.00
0015	04-01-0104-2971	BRACKET-FR BUMPER SIDE SUPT RH	1	35.00	20.00	28.00
0016	04-01-0104-3818	BRACKET-FR BUMPER SIDE LH	1	28.00	20.00	22.40
0017	04-01-0104-3918	BRACKET-FR BUMPER SIDE RH	1	28.00	20.00	22.40
0018	04-01-0101-0111	BUMPER COVER CLIP REAR	10	2.20	20.00	17.60
0019	04-01-0104-0634	GRILLE-FRONT BUMPER	1	318.80	20.00	255.04
0020	04-01-0104-3849	FLAP ASSY-ACTIVE AIR UPR LH	1	76.90	20.00	61.52

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST THE THEFT OR COLLUSION DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND WHICH ARE IN THE CARE OF THE COMPANY AT OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 7 DAYS FROM DATE OF DELIVERY. NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE THE WORKSHOPS WILL BE DEEMED TO BE ACCEPTING THE VEHICLE IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DRY TO DRY BASIS IN RESPECT OF ANY AMOUNT DUE AND UNPAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT I.E. AFTER 10 DAYS FROM THE DATE OF DELIVERY PERIOD OF DEFAULT.

PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DISCREPANCY OR UNCORRECTED WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL BE DEEMED TO BE CORRECT AND BINDING.

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S/No	Part No.		Qty	Unit Price	%Disc	Net
0021	04-01-0104-3949	FLAP ASSY-ACTIVE AIR UPR RH	1	76.90	20.00	61.52
0022	04-01-0104-0574	PANEL-FENDER LH#	1	588.80	20.00	471.04
0023	04-01-0104-3813	EMBLEM-BLUE DRIVE LH	1	26.60	20.00	21.28
0024	04-01-0104-2282	COVER-RR BUMPER#	1	459.40	20.00	367.52
0025	04-01-0104-2533	MOULDING ASSY-RR BUMPER CTR	1	451.25	20.00	361.00
0026	04-01-0104-2540	COVER-RR BPR UNDER CTR	1	225.00	20.00	180.00
0027	04-01-0104-2256	PANEL ASSY-TAIL GATE#	1	2,480.40	20.00	1,984.32
0028	04-01-0104-2270	EMBLEM-HYBRID	1	24.30	20.00	19.44
0029	04-01-0104-2271	EMBLEM-IONIQ	1	31.30	20.00	25.04
0030	28-01-0103-0009	REAR BOOT LOGO CCTPL	1	30.00	0.00	30.00
0031	28-01-0103-0010	REAR BOOT TEL NUMBER CCTPL	1	35.00	0.00	35.00

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST THE THEFT OF AND DAMAGE TO THE VEHICLE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHERS' PROPERTIES BELONGING TO CUSTOMERS. ANY VEHICLE LEFT WITH THE COMPANY IS AT THE CUSTOMER'S OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGNIFY ANY DAMAGE WITHIN 24 HOURS OF DELIVERY. NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE, THE VEHICLE WILL BE HELD AS ACCEPTED BY THE CUSTOMER IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS BEGINNING FROM THE DATE OF DELIVERY OF THE VEHICLE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE DATE OF DELIVERY OF THE VEHICLE TO THE COMPANY.

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 IN THE COMPANY WILL TREAT THE INVOICE AS CORRECT AND BINDING.

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S/No	Part No.		Qty	Unit Price	%Disc	Net
0032	28-01-9999-2026	APP LOGO REAR BONNET CCPL	1	30.00	0.00	30.00
0033	04-01-0104-2380	LATCH ASSY-TAIL GATE	1	141.00	20.00	112.80
0034	09-01-9999-0068	REVERSE SENSOR ASSY*	1	180.00	0.00	180.00
0035	04-01-0104-1150	PROTECTOR MAT	1	50.00	0.00	50.00
0036	04-01-0104-2288	BEAM-RR BUMPER	1	394.80	20.00	315.84
0037	04-01-0104-2419	BEAM COMPLETE-FR BUMPER	1	1,075.10	20.00	860.08
0038	04-01-0104-2835	LAMP ASSY-HEAD LH#	1	1,993.65	20.00	1,594.92
0039	04-01-0104-0641	CARRIER ASSY-FRONT END MODULE#	1	949.30	20.00	759.44
0040	16-01-0104-2016	BLOWER ASSY-RADIATOR	1	1,226.60	20.00	981.28
0041	16-01-0104-2076	RADIATOR ASSY-INVERTER	1	884.80	20.00	707.84
0042	16-01-0104-0103	RADIATOR ASSY	1	710.50	20.00	568.40
0043	01-01-0104-0039	CONDENSER ASSY-COOLER	1	663.60	20.00	530.88

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 WILL NOT BE LIABLE FOR ANY LOSS OR DAMAGE TO THE OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 14 DAYS THEREOF IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE THE VEHICLES WILL BE DEEMED TO BE IN GOOD ORDER.

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S/No	Part No.		Qty	Unit Price	%Disc	Net
0044	04-01-0104-2226	LAMP ASSY-LICENSE PLATE	1	85.30	20.00	68.24
0045	04-01-0104-2175	SYMBOL MARK-H	1	24.30	20.00	19.44
0046	20-01-9999-2025	PRESTONE ANTIFREEZE COOLANT PREMIX 50-50	2	22.50	20.00	36.00
SUB-TOTAL				:		15,250.52

JOB NATURE

0001	L	BUMPER COVER CLIP REAR	22.00	17.60
0002	PB	PANEL BEATING SHA9498M	1,750.00	1,750.00
0003	SP	SPRAYPAINT CHARGE	1,250.00	1,250.00
0004	L	REMOVE/ REFIX AIRCON & REFILL GAS	60.00	60.00
0005	L	REMOVE/ REFIX RADIATOR	30.00	30.00
0006	23-01	TOWING FEE	60.00	60.00

0006 23-01 TOWING FEE 60.00 60.00

ComfortDelGro Engineering Pte Ltd

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S/No	Part No.	Qty	Unit Price	%Disc	Net
0007	20-00	TUFF COAT ON AFFECTED PARTS.	60.00		60.00
0008	17-01	CHECK ALL LIGHTING	40.00		40.00
SUB-TOTAL			:		3,267.60

Items total	18,518.12
Add GST @ 7.000 %	1,296.27
Invoice amount	19,814.39

Issued by : KATHERINETAN 09.09.2021 13:53:56
Repair type : CFSO/57/57
Payment Type/Term: /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT AND ACCIDENTS, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR DAMAGE TO VEHICLES OR OTHERS BELONGING TO CUSTOMERS. ALL WORK IS DONE AT OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY AFTER DELIVERY AND SIGNIFY ANY DEFECTS TO THE COMPANY IN WRITING TO THE COMPANY OF ANY DEFECTS IMMEDIATELY. THE SUPPLIER WILL BE RESPONSIBLE TO REPAIR OR REPLACE IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT NOT PAID TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT. ALL OTHERS THAN THE SUPPLIER ARE NOT PERMITTED TO DEFEND THE PERIOD OF DEFAULT.

PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DEFECTS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS AS CORRECT AND BINDING.

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8010012	91594102	19,814.39	

Our Ref: CC0821/SHA9498M/CK(st)
Date: 10.09.2021



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

Attn : Motor Claims Department

Dear Sir/Madam

Without Prejudice

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

ACCIDENT ON 26.08.2021 INVOLVING SHA9498M & SLD4343X ALONG PIE TWDS TUAS

Workshops

We are the authorised repair workshop for CityCab Pte Ltd, the owner of vehicle No SHA9498M, which was involved in the captioned accident with your insured vehicle No SLD4343X.

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

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\$	19,814.39
2. Loss of Rental	8 days x S\$ 125.19	S\$	1,001.52
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	8 days x S\$ 80.00	S\$	640.00
2. Others		S\$	0.00

[E&OE] **Total Claims** S\$ **21,457.91**

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



Our Ref: CC21080413



Date: 09 September 2021

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 26/08/2021 @ 14:50 hrs
ALONG PIE TWDS TUAS
INVOLVING SLD4343X, SKX6852L, SJP9550S

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 **SHA9498M** (the "Taxi"). The Taxi was hired to **TAN SHU KUN IC NO SXXXX301A** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$125.19** per day (inclusive of GST).

Please be advised that the Taxi was insured with **AXA 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.

[illegible]

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING Hyundai Ioniq **SHA9498M** , **SLD4343X** , ... **ON 26-Aug-21 14:50**
ALONG **PIE TWDS TUAS**

I / We **TAN SHU KUN** (Hirer) NRIC No.: **SXXXX301A**

and/or (Relief) NRIC No.: **SXXXX301A**

Taxi Number **SHA9498M**

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 **27-Aug-2021**

Name of Hirer **TAN SHU KUN**
Hirer NRIC **SXXXX301A**

Signature :



Address **451B SENGKANG WEST WAY #10-3...**
792451

Contact No. **93626686**

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLD4343X

Date of Accident

26/08/2021



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance China Taiping Insurance (Sing...

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

Requested By Huang Xiao Yan (COMFORTDEL...

Requested Date 27/08/2021 11:33

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**

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	26/08/2021 18:18 (SGT)
Date of Accident	26/08/2021 14:50 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA9498M
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CITYCAB PTE LTD
Company Reg No	1XXXXX839G
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-93626686
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1580

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419140
Cover Note Number	-

DRIVER

Name of Driver	TAN SHU KUN (CHEN SHUKUN)
NRIC No	SXXXX301A

Date Of Birth	03/04/1981
Occupation	Outdoor
Date Of Driving Pass	27/09/2012
Driving experience	8 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93626686
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	APT BLK 451B SENGKANG WEST WAY #10-373
Address complement	-
Postcode	792451
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE 26082021 AT ABOUT 1450 HOURS VEHICLE A (SHA9498M) WAS TRAVELLING ALONG PIE (TUAS) ON LANE 1 WHEN VEHICLE B (SJP9550S) EXECUTED A EMERGENCY BRAKE DUE TRAFFIC PILE UP AHEAD AND VEHICLE C (SKX6852L) REAR ENDED VEHICLE B. VEHICLE A WAS NOT ABLE TO BRAKE IN TIME AND REAR ENDED VEHICLE C. VEHICLE D (SLD4343X) WHICH ALSO BEHIND VEHICLE A ALSO COULD NOT BRAKE IN TJME AND REAR ENDED VEHICLE A. IT IS A 4 VEHICLE CHAIN COLLISION. DRIVER OF VEHICLE A SUFFERED DULL PAIN IN THE NECK.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE IS NOT SUITABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP9550S
Vehicle Manufacturer	Toyota
Vehicle Model	Vios
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKX6852L
Vehicle Manufacturer	Citroen
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLD4343X
Vehicle Manufacturer	Citroen
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN SHU KUN (CHEN SHUKUN)
Gender	Male

Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

(Phone) +65-93626686
APT BLK 451B SENGKANG WEST WAY #10-373
792451
40
SUFFERED DULL PAIN IN THE NECK
SHA9498M
Yes
No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 5. Any false reporting may be referred to the Police for investigation.
 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
 8. Consent under the Personal Data Protection Act (PDPA)
- I understand, acknowledge, agree and consent that:
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
 (collectively the "Purposes")
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

VEH B
VEH C
VEH A
VEH D

A - SH1498M
B - SJP 9560S
C - SKX 6852L
D - SLD 4343X

PIE (TUAS)

Describe Circumstances of the Accident

ON THE 26082021 AT ABOUT 1450 HOURS VEHICLE A (SHA9498M) WAS TRAVELLING ALONG PIE (TUAS) ON LANE 1 WHEN VEHICLE B (SJP9550S) EXECUTED A EMERGENCY BRAKE DUE TRAFFIC PILE UP AHEAD AND VEHICLE C (SKX6852L) REAR ENDED VEHICLE B. VEHICLE A WAS NOT ABLE TO BRAKE IN TIME AND REAR ENDED VEHICLE C. VEHICLE D (SLD4343X) WHICH ALSO BEHIND VEHICLE A ALSO COULD NOT BRAKE IN TIME AND REAR ENDED VEHICLE A. IT IS A 4 VEHICLE CHAIN COLLISION. DRIVER OF VEHICLE A SUFFERED DULL PAIN IN THE NECK.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

Driver's Signature (if driver is not the policyholder) / Date
& Time

26/08/21 1530

Witnessed by Reporting Centre
Personnel