Our Ref: CT1021/SHD7092Y/CK(st)

Date: 12.11.2021

CHINA TAIPING INSURANCE CO (S)PTE L

3 ANSON ROAD #16-00 Singapore 079909

Dear Sir/Madam

Attn: Motor Claims Department Without Prejudice

**ComfortDelGro Engineering Pte Ltd** 59 Loyang Drive Singapore 508969

www.cdge.com.sg

Company Registration No: 199506048W

### ACCIDENT ON 02.10.2021 INVOLVING SHD7092Y & SMV4729K ALONG UPPER SERANGOON RD **TWDS HOUGANG**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of vehicle No SHD7092Y, which was involved in the captioned accident with your insured vehicle No SMV4729K.

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:

Hirer's Claim :			
6. Others		S\$	0.00
5. GIA / Police Report Fee		S\$	2.00
4. LTA Search Fee		S\$	0.00
3. Survey Report Fee		S\$	0.00
2. Loss of Rental	3 days x S\$ 125.40	S\$	376.20
1. Cost of Repairs		S\$	856.00

1. Loss of Income

	[E&OE]	Total Claims	ς¢	1 474 20		
<ol> <li>Loss of Income</li> <li>Others</li> </ol>	3 da	ays x S\$ 80.00	S\$ S\$ 	240.00 0.00		

[E&OE] **Total Claims** 

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
[]	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
[]	Tow Chit / PIR / Hirer's IRAS	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 TOYOTA PRIUS SHD7092Y , SMV4729K ON 02-Oct-21 14:40

**ALONG** 

**UPPER SERANGOON RD TWDS HOUGANG** 

I / We ANG BOON HOCK (Hirer) NRIC No.: SXXXX214B

(Relief) NRIC No.: sXXXX603h and/or koh hai tiang

Taxi Number **SHD7092Y** 

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 04-Oct-2021

Name of Hirer **ANG BOON HOCK** 

Hirer NRIC SXXXX214B Signature:

Address **525 HOUGANG AVENUE 6 #04-175** 

530525

Contact No. 93891242

Name of Relief koh hai tiang

Relief NRIC sXXXX603h Signature:

Address 521 hougang ave 6 #12-43

1953

Contact No. 91199878

last wan whire

### MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSNW00199482100

Claim No : SNM21D205699/C02/SMV4729K/TANKW

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,100.00

SINGAPORE DOLLARS ONE THOUSAND AND ONE HUNDRED 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.: SHD 7092Y Insured Vehicle No. : SMV 4729K

Date of Loss

: 02/10/2021

Place of Accident : UPPER SERANGOON 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

: ABDULLAH BIN ABDUL WAHEE

Driver Name

: ABDULLAH BIN ABDUL WAHEE

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

1,100.00

Date

1,100.00

Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No : 1XXXXX821R

Signature

CLAINS DEPARTMENT COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG 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"

Piease forward your cheque made payable to: COMFORTDELGRO ENGINEERING PTE LTC



### ComfortDelGro Engineering Pte Ltd

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

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

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 SHD7092Y

NO/DATE 91609244 27.10.2021

MAKE TOYOTA JOB NO. 305489375

MODEL PRIUS HYBRID(G4) ODOMETER READING

**DATE OF REG** 11.11.2016

CHASSIS CODE JOB TYPE JTDKB3FU503536925

Description: 3P 02.10.2021

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt 7.000 800.00

Total Invoice amount

856.00

Issued by : KATHERINETAN 27.10.2021 13:34:35 Repair Type : CLSO/57/57 Payment Type/Term : /Credit 30 days

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OF ACCURATE DAMAGE. THE CO. RESPONSIBILITY FOR CARS OR OTHER PROPERTIES RELONGING TO GUSTOMERIC
- NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE VEHICLES WILL THE DEFINED TO HAVE HELD IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY DALES BY RESPIRET OF ANY AMOUNT DUE AND OWNER COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT ILE. AFTER 30 DAYS FROM THE BADGETT FOR
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY JURISDES OF DISCRETANCE WITHIN 14 DAYS OF RECEIPT, IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TILL-

### ComfortDelGro Engineering Pte Ltd

Head Office: 205 Braddell Road Singapore 579701

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

Kindly note that no receipt shall be issued unless requested,

Our Ref: CT21100042

Date: 26 October 2021



### TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

02/10/2021 @ 14:40 hrs

**ALONG** 

UPPER SERANGOON RD TWDS HOUGANG

INVOLVING

SMV4729K

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 SHD7092Y (the "Taxi"). The Taxi was hired to ANG BOON HOCK IC NO SXXXX214B 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 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.

	HOURS OPERATED (TIME)	FROM TO	-1/t) site	1845 DY IX	0 40 1 0 X E	10	4	1000 John	) 5	100			
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HOURS OPERATED (TIME)	FROM TO	07/1/	1	0000									
" MILEAGE TRAVELLED	(KM)	206	202										
GE READING	3	2005	2244			Y							

**INSURER ENQUIRY** 

# Find insurer

Vehicle reg. no.

SMV4729K

**Date of Accident** 

02/10/2021

Reset

## % RESULT & RECEIPT

# TP Insurer Enquiry Insurance China Taiping Insurance (Sing... Period of Insurance 27/09/2021 - 26/09/2022 Requested By Janet Lim Siang Gek (COMFOR... Requested Date 04/10/2021 14:19

**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** 

# Asher Sng (LKKAuto)

From: Asher Sng (LKKAuto)

Sent: Monday, 15 November 2021 11:42 AM

To: AASIMWAFEEQ@GMAIL.COM

Subject: ACCIDENT INVOLVING SMV 4729K AND SHD 7092Y ON 02/10/2021

Our Ref: CC3/CTI21010484/Vea3

15 NOV 2021

### ABDULLAH BIN ABDUL WAHEE

Dear Sir/Madam,

### ACCIDENT INVOLVING SMV 4729K AND SHD 7092Y ON 02/10/2021

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

Email: ashersng@lkkauto.com

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