

Our Ref: CC1121/SHB3101S/JW(st)
Date: 02.12.2021

QBE INSURANCE (INT'L) LTD
1 RAFFLES QUAY SOUTH TOWER #29-10
Singapore 048583

Attn : Motor Claims Department

Without Prejudice

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969

www.cdge.com.sg

Company Registration No: 199506048W

Dear Sir/Madam

ACCIDENT ON 15.11.2021 INVOLVING SHB3101S & WC 5159E ALONG BARTLEY RD

We are the authorised repair workshop for CityCab Pte Ltd, the owner of vehicle No SHB3101S, which was involved in the captioned accident with your insured vehicle No WC 5159E.

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\$	1,872.50
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\$	0.00
5. GIA / Police Report Fee		S\$	2.00
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\$	2,637.18
--------	---------------------	------------	-----------------

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
<input checked="" type="checkbox"/> 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

Jim Wong

CDGE Claims Department

DID: 62148374

FAX: 62141843

Email: jimwong@cdge.com.sg

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

A member of

COMFORTDELGRO

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING i 40 SHB3101S , WC5159E
ALONG BARTLEY RD****ON 15-Nov-21 19:15**I / We **CHIU CHYE HOO** (Hirer) NRIC No.: **SXXXX577Z**and/or (Relief) NRIC No.: **SXXXX577Z**Taxi Number **SHB3101S**

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 **16-Nov-2021**Name of Hirer **CHIU CHYE HOO**Hirer NRIC **SXXXX577Z**

Signature :

Address **193 EDGEFIELD PLAINS #11-216
820193**Contact No. **97343385**

GST REG. NO. M2-8921817-3

TAX INVOICE

8010056

QBE INSURANCE (INT'L)LTD

1 RAFFLES QUAY SOUTH TOWER #29-10
SINGAPORE 048583

CONTACT NO: 62246633

VEHICLE NO
SHB3101S

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
11.06.2015

CHASSIS CODE
KMHLB41UMGU074951

NO/DATE
91618726 25.11.2021

JOB NO.
305494604

ODOMETER READING

JOB TYPE

Description : 3P.15.11.2021

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,750.00
Add GST @ 7.000 %	122.50
Total Invoice amount	1,872.50

Issued by : CHEWBEELENG 25.11.2021 13:39:10
Repair Type : CFSO/57/57
Payment Type/Term : /Credit 30 days

1) 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 DRIVEN AND TESTED AT OWNERS' RISK.
2) CUSTOMERS SHALL INSPECT THEIR VEHICLE IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY, NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE 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

ACCOUNT No.

INVOICE No.

AMOUNT

BANK/CHQ No

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CC21110220



Date: 24 November 2021

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 15/11/2021 @ 19:15 hrs
ALONG BARTLEY RD
INVOLVING WC5159E

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 **SHB3101S** (the "Taxi"). The Taxi was hired to **CHIU CHYE HOO IC NO SXXXX577Z** 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 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.


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

WC5159E

Date of Accident

15/11/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance QBE Insurance (Singapore) Pt...
Period of Insurance 22/11/2020 - 21/11/2021
Requested By Huang Xiao Yan (COMFORTDEL...
Requested Date 16/11/2021 10:56

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**