

Our Ref: CC0522/SHA8079X/KS(st)
Date: 23.06.2022

AXA INSURANCE PTE LTD
8 SHENTON WAY AXA TOWER #24-01
Singapore 068811

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 20.05.2022 INVOLVING SHA8079X & SLU786M ALONG SIMS WAY

We are the authorised repair workshop for CityCab Pte Ltd , the owner of vehicle No SHA8079X, which was involved in the captioned accident with your insured vehicle No SLU786M.

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\$	2,568.00
2. Loss of Rental	5 days x S\$ 126.47	S\$	632.35
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	5 days x S\$ 80.00	S\$	400.00
2. Others		S\$	0.00

[E&OE] **Total Claims** S\$ **3,602.35**

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

<input checked="" type="checkbox"/> Original Repair Bill	<input checked="" type="checkbox"/> Letter of Authority from Owner/Hirer/Operator
<input checked="" type="checkbox"/> GIA/Police Report(s)	<input checked="" type="checkbox"/> Rental Rate Letter
<input checked="" type="checkbox"/> LTA/GIA Search Slip(s)	<input checked="" type="checkbox"/> Downtime/Mileage Record
<input type="checkbox"/> Survey Report / Bill	<input type="checkbox"/> Witness Statement / Accident Scene Photo(s)
<input type="checkbox"/> Driver's IC/DL/VL / Road Tax / Log Card / Certificate of Insurance	
<input type="checkbox"/> 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

Kazali H S

CDGE Claims Department

DID: 62148736

FAX: -

Email: kazali@cdge.com.sg

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

A member of

LETTER OF AUTHORISATION

(NAF / PAF)

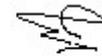
**ACCIDENT INVOLVING TOYOTA PRIUS SHA8079X , SLU786M ON 20-May-22 16:15
ALONG SIMS WAY**I / We **CHEW CHOH CHOON** (Hirer) NRIC No.: **SXXXX073E**and/or (Relief) NRIC No.: **SXXXX073E**Taxi Number **SHA8079X**

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-May-2022**Name of Hirer **CHEW CHOH CHOON**Hirer NRIC **SXXXX073E**

Signature :

Address **72 GEYLANG BAHRU #10-3010
330072**Contact No. **94669433**



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLU 786M (Insd veh)	Model: TOYOTA PRIUS 5DR HATCHBACK (AUTO)
	SHA 8079X (TP veh)	
Date of Accident/ Time:	20/05/2022	

Repair Estimate	: \$		
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	3,270.00	
Payee Name : ComfortDelGro Engineering Pte Ltd			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: <u>27</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

NOTE:

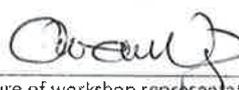
- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are *not received within 7 days* of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

CLAIMS DEPARTMENT
 COMFORTDELGRO ENGINEERING PTE LTD
 59 LOYANG DRIVE
 SINGAPORE 508969

Signature of workshop representative / Workshop stamp: 
 Name of Representative: OLIVIA
 Date: 05.07.2022

Signature of Witness / Workshop stamp (if applicable): 
 Name of Witness: KAZALI
 Date: 05.07.2022

CLAIMS DEPARTMENT
 COMFORTDELGRO ENGINEERING PTE LTD
 59 LOYANG DRIVE
 SINGAPORE 508969


 Signature of AXA's surveyor/representative: 
 Name of AXA's surveyor /Representative:
 Date: 06/07/2022

AXA insurance Pte Ltd (Company Reg. No.: 199903512M)
 8 Shenton Way #24-01 AXA Tower Singapore 068811
 AXA Customer Centre #01-21/22
 Telephone: +65 6880 4888 - axa.com.sg

*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

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO
SHA8079X

MAKE
TOYOTA

MODEL
PRIUS HYBRID(G4A)

DATE OF REG
04.08.2020

CHASSIS CODE
JTDKB3FU203091219

NO/DATE
91743193 13.06.2022

JOB NO.
305516805

ODOMETER READING

JOB TYPE

Description : 3P 20.05.2022

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,400.00
Add GST @	7.000 %	168.00
Total Invoice amount		2,568.00

Issued by : KATHERINETAN 13.06.2022 11:07:42
Repair Type : CFSO/57/57
Payment Type/Term : /Credit 30 days

IN ACCEPTING THIS INVOICE ALL RESPONSIBLE PRECAUTION AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARE OF OTHER INCIDENTS BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TOWED BY OWNERS ONLY.
CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND QUALITY WITHIN 7 DAYS FROM SUCH DELIVERY OR 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 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.
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: CC22050346



Date: 13 June 2022

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 20/05/2022 @ 16:15 hrs
ALONG SIMS WAY
INVOLVING SLU786M

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 **SHA8079X** (the "Taxi"). The Taxi was hired to **CHEW CHOH CHOON IC NO SXXXX073E** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$126.47** 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.

SLU786M

Date of Accident

20/05/2022 

Reset

% RESULT & RECEIPT

4

TP Insurer Enquiry

Insurance AXA Insurance Pte Ltd

Period of Insurance 25/10/2021 - 24/10/2022

Requested By Por Moy Juan (COMFORTDELG...)

Requested Date 21/05/2022 09:28

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**

SNA 8079x

Hsiao Tong (LKKAuto)

From: Hsiao Tong (LKKAuto)
Sent: Tuesday, 31 May 2022 8:38 AM
To: sam.hitechlink@gmail.com
Subject: Claim Notification - ACCIDENT INVOLVING SLU 786M(AXA) AND SHA 8079X ALONG/AT SIMS WAY AFTER EXITING KPE ON 20/05/2022

31 May 2022

Mr Sekar Samson

[By Email only]

Dear Sirs/ Mdm

OUR REF : CC4/ASM22004831/Tpa3// S2M04101

YOUR REF : SLU786M

ACCIDENT INVOLVING SLU 786M(AXA) AND SHA 8079X ALONG/AT SIMS WAY AFTER EXITING KPE ON 20/05/2022

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third-party claim against your policy.

We have received a third-party claim(s) from SHA8079X against your motor insurance policy.

Based on all the available information on hand, we are of the view that liability is not in your favour as it is a head-to-rear collision. We shall proceed to negotiate for an amicable settlement of the third party claim at best to avoid further litigation, which would escalate to even more cost.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third-party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization to confirm that the driver is allowed to drive the vehicle
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third-party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at chewht@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | Email: chewht@lkkauto.com |

HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |

S(408933)