Our Ref:

Dear Sir/Madam

CT0722/SHA2040X/CK(st)

Date:

14.10.2022

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

Attn : Motor Claims Department

Without Prejudice

OMFORTDELGRO

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 28.07.2022 INVOLVING SHA2040X & SKX2511Y ALONG CROSS ST & ROBINSON

We are the authorised repair workshop for Comfort Transportation Pte Ltd , the owner of vehicle No SHA2040X, which was involved in the captioned accident with your insured vehicle No SKX2511Y.

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:

1. Cost of Repairs		S\$	2,889.00
2. Loss of Rental	4 days x S\$ 114.95	S\$	459.80
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:

	[E&OE]	Total Claims	S\$	3,670.80	
		2	**********		
2. Others			S\$	0.00	
1. Loss of Income	4 da	ys x S\$ 80.00	S\$	320.00	

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
M	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	g Card / Certificate of Insurance
[]	Tow Chit / PIR / Hirer's IF	RAS / Oth	iers:

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: -

Email: catherinekoh@cdge.com.sg

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

A member of





ComfortDelGro Engineering Pte Ltd

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

205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 508969
45 Pandan Road Singapore 609286
383 Sin Ming Drive Singapore 575717
7 Sungei Kadul Way Singapore 728791
320 Ubi Road 3 Singapore 408649 59 Loyang Drive Singapore 508969 45 Pandan Road Singapore 609286

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 SHA2040X

NO/DATE

92386029 29.09.2022

MAKE HYUNDAI JOB NO. 305525234

MODEL I - 40 ODOMETER READING

DATE OF REG 24.11.2016

CHASSIS CODE KMHLB41UMHU096553

JOB TYPE

Description: 3P 28.07.22

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt
7.000

2,700.00

Total Invoice amount

2,889.00

CHEWBEELENG 29.09.2022 16:26:50

Issued by : CHEWBEELENG 29.0 Repair Type : CLSO/57/57 Payment Type/Term : /Credit 30 days

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

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHA2040X , SKX2511Y

ON 28-Jul-22 14:50

ALONG

CROSS ST & ROBINSON RD

I / We LIM YONG SHENG (Hirer) NRIC No.: SXXXX249G

(Relief) NRIC No.: SXXXX249G and/or

Taxi Number **SHA2040X**

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 28-Jul-2022

Name of Hirer **LIM YONG SHENG**

Hirer NRIC SXXXX249G Signature:

Mohnon

Address 138 SIMEI STREET 1 #07-36

520138

Contact No. 96736397 Our Ref: CT22070463

Date: 24 August 2022



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 28/07/2022 @ 14:50 hrs

ALONG CROSS ST and ROBINSON RD

INVOLVING SKX2511Y

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 **SHA2040X** (the "Taxi"). The Taxi was hired to **LIM YONG SHENG IC NO SXXXX249G** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate \$114.95 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.

	The Att All C				
T L	Sindy and a second a second and	MILEAGE	HOURS OPERATED (TIME)	ATED (TIME)	DATE NAME OF DRIVED
מואס	NAME OF URIVER	(KM)	FROM	TO	12.5
02/08/20 m	Cm. Las Grave 727302		0890	7A	Com Your SHENG
CC-80-CO	It cerdon's	2	1015		Core York street
12-80-80	Manage Ma	MO	097)		Cim Youl SHENG
	in Sal stead				Circ. Youl St
	(in you 6 show		e.		Con York SALVE
	Con York shall				The Said Strike
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	Con Tone Meril				CIN YOUR SHENC
•	Un Yord Still				Con York SHEMB
	Con Tool Steed				los Pal- steed
	Ca Two Sukal				Cor Young SHEAR

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SKX2511Y

Date of Accident

28/07/202 🗰

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance China Taiping Insurance (Sing...

Period of Insurance 21/01/2022 - 20/01/2023

Requested By Janet Lim Siang Gek (COMFOR...

Requested Date 28/07/2022 16:51

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**