

Our Ref: CT1022/SH 8872E/CK(st)  
Date: 22.11.2022



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

Attn : Motor Claims Department

**Without Prejudice**

Dear Sir/Madam

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 15.10.2022 INVOLVING SH 8872E & SKX5209B ALONG UPPER JURONG RD & ENTRY OF SAFTI MILIT**

**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

**Ubi**  
320 Ubi Road 3  
Singapore 408649

**Sungei Kadut**  
7 Sungei Kadut Way  
Singapore 728791

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of vehicle No SH 8872E, which was involved in the captioned accident with your insured vehicle No SKX5209B.

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\$ | 909.50 |
| 2. Loss of Rental          | 2 days x S\$ 125.40 | S\$ | 250.80 |
| 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 :**

|                   |                    |     |        |
|-------------------|--------------------|-----|--------|
| 1. Loss of Income | 2 days x S\$ 80.00 | S\$ | 160.00 |
| 2. Others         |                    | S\$ | 0.00   |

[E&OE] **Total Claims** S\$ **1,322.30**

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: -

Email: catherinekoh@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 SH8872E , SKX5209B ON 15-Oct-22 06:20**  
**ALONG UPPER JURONG RD & ENTRY OF SAFTI MILITARY INSTITUTE**

I / We **CHIO BOON CHUAN** (Hirer) NRIC No.: **SXXXX679I**

and/or (Relief) NRIC No.: **SXXXX679I**

Taxi Number **SH8872E**

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 **15-Oct-2022**

Name of Hirer **CHIO BOON CHUAN**

Hirer NRIC **SXXXX679I**

Signature :



Address **210A BUKIT BATOK STREET 21 #15...  
651210**

Contact No. **90664778**

**Workshops**

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

VEHICLE NO  
SH 8872E

NO/DATE  
92709910 16.11.2022

MAKE  
TOYOTA

JOB NO.  
305533357

MODEL  
PRIUS HYBRID(G4)

ODOMETER READING

DATE OF REG  
19.09.2016

CHASSIS CODE  
JTDKB3FU303530735

JOB TYPE

Description : 3P 15.10.2022

**Invoice for Lump Sum Repair**

|                             |               |
|-----------------------------|---------------|
| Total Lump Sum Repair Amt   | 850.00        |
| Add GST @ 7.000 %           | 59.50         |
| <b>Total Invoice amount</b> | <b>909.50</b> |

Issued by : CHEWBEELENG 16.11.2022 15:28:07  
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**

Our Ref: CT22100228

Date: 16 November 2022



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

|             |   |
|-------------|---|
| ACCIDENT ON | 15/10/2022 @ 06:20 hrs                                |
| ALONG       | UPPER JURONG RD and ENTRY OF SAFTI MILITARY INSTITUTE |
| INVOLVING   | SKX5209B  |

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 **SH8872E** (the "Taxi"). The Taxi was hired to **CHIO BOON CHUAN IC NO SXXXX679I** 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.




INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SKX5209B

Date of Accident

15/10/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **China Taiping Insurance (Sing...**

Period of Insurance ..... **17/12/2021 - 16/12/2022**

Requested By ..... **Por Moy Juan (COMFORTDELG...**

Requested Date ..... **15/10/2022 09:22**

**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**

S21 8f72 E