

Our Ref: PTE/SML5642Y/230324/TP-AL  
Date: 29.05.2023

Lonpac Insurance Berhad  
300 BEACH ROAD #17-04/07  
Singapore 199555

Attn : Motor Claims Department

Dear Sir/Madam

**ACCIDENT ON 24.03.2023 INVOLVING SML5642Y & SMC7333Z ALONG STEVEN ROAD**

We are the authorised repair workshop for the owner of vehicle No, SML5642Y, which was involved in the captioned accident with your insured vehicle No, SMC7333Z.

The vehicle owner has requested and authorised us to assist in presenting his/her claims against the party responsible for all applicable matters arising from the damage of the vehicle.

As the vehicle was caused by the negligent act of your insured driver, we are submitting these claims for your consideration on behalf of the the owner/driver/claimant.

1. Cost of Repairs / Excess		S\$	1,242.00
2. Car Rental	days x S\$ 0.00	S\$	0.00
3. Loss of Use	3 days x S\$ 100.00	S\$	300.00
4. Survey Report Fee		S\$	0.00
5. LTA Search Fee		S\$	0.00
6. GIA / Police Report Fee		S\$	2.00
7. Medical Expenses		S\$	0.00
8. Others [1]		S\$	0.00
9. Others [2]		S\$	0.00

[E&OE] **Total Claims**

S\$ **1,544.00**

www.SPARKcarcare.com

A copy each of the following supporting documents is enclosed:

<input checked="" type="checkbox"/> Original Repair/Excess Bill	<input checked="" type="checkbox"/> Insurance Certificate
<input type="checkbox"/> Survey Report / Bill	<input checked="" type="checkbox"/> Power of Attorney
<input type="checkbox"/> Coloured Photographs	<input type="checkbox"/> Car Rental Bill
<input checked="" type="checkbox"/> GIA/Police Report(s)	<input type="checkbox"/> Medical Bill
<input checked="" type="checkbox"/> GIA/TP Search	<input type="checkbox"/> Witness Statement
<input type="checkbox"/> 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 owner/driver/claimant.

Yours sincerely,

Alice Lau

CDGE Claims Department

DID:62148307

FAX: -

Email:alicelau@cdge.com.sg

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



ComfortDelGro Engineering

ComfortDelGro Engineering Pte Ltd

Corporate Office

205 Braddell Road Singapore 579701

Mainline +65 6383 6280

Facsimile +65 6280 9755

Company Registration No: 199506048W

Car Care Centres

**Braddell**

205 Braddell Road

Singapore 579701

Tel 6383 8110

**Loyang**

59 Loyang Drive

Singapore 508969

Tel 6214 8300

**Pandan**

45 Pandan Road

Singapore 609286

Tel 6338 8778

**Senoko**

24 Senoko Loop

Singapore 758156

Tel 6757 8760

**Sin Ming**

383 Sin Ming Drive

Singapore 575717

Tel 6553 0400

**Sungei Kadut**

7 Sungei Kadut Way

Singapore 728791

Tel 6369 7369

**Ubi**

320 Ubi Road 3

Singapore 408649

Tel 6848 5721

A member of

**COMFORTDELGRO**

Lonpac ref: 22/23/23/VP05/027170 - Accident on 28/03/2023 involving SML5642Y & SMC7333Z  
(against Lonpac) - To check on liability

ENG HUEY NI <hneng@lonpac.com>

Tue 18 Apr 2023 12:06 PM

To: Oi Sun Pin <OiSunPin@cdge.com.sg>

Cc: MT\_Claim\_SG <mt\_claim@lonpac.com>; Alice Lau Lay Koon <alicelau@cdge.com.sg>; Spark Car Care <SparkARC@comfortdelgro.com>; EzLyna (LKKAuto) <ezlyna@lkkauto.com>; Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>

You don't often get email from hneng@lonpac.com. [Learn why this is important](#)

CAUTION : This email originated from an external party outside ComfortDelGro. Do not click on links or open attachment unless you know the sender.

---

Lonpac External - General

LIS \$1152

Lonpac External - General

WITHOUT PREJUDICE

Hi Sun Pin,

For liability clearance, please liase with our appointed surveyor from LKK.

Hi Lyna,

For your follow up, pls.

Thanks

Best Regards

Eng Huey Ni

Asst. Claims Manager | Lonpac Insurance Bhd

300 Beach Road, #17-04/06 The Concourse, Singapore 199555

DID: 6279 9244 | Fax: (65) 6296 2706

---

**From:** Oi Sun Pin <OiSunPin@cdge.com.sg>

**Sent:** Saturday, April 15, 2023 11:07 AM

**To:** CHARMAINE KONG <charmainekong@lonpac.com>

**Cc:** MT\_Claim\_SG <mt\_claim@lonpac.com>; Alice Lau Lay Koon <alicelau@cdge.com.sg>; Spark Car Care <SparkARC@comfortdelgro.com>

**Subject:** Accident on 28/03/2023 involving SML5642Y & SMC7333Z (against Lonpac) - To check on liability

Lonpac External - General

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road, Singapore 579701  
T: +65 6383 8110

Company Reg. No. 199506048W  
GST Reg. No. M2-8921817-3

Customer ID: 8010042  
Customer: LONPAC INSURANCE BERHAD  
THE CONCOURSE  
Address: BEACH ROAD #17-04/07 #300  
SG 199555

### Tax Invoice

Invoice No: 93963482  
Invoice Date: 19.05.2023  
Payment Term: 30 days

Vehicle No.: SML5642Y  
Make/Model: TOYOTA PRIUS/  
Mileage: -  
Job No.: 305551031  
Date/Time In: 12.04.2023 17:51  
Date/Time Out: 15.04.2023 00:00

S/NO	DESCRIPTION	QTY	UNIT PRICE	NET PRICE
01	REAR BUMPER LOWER GARNISH	1	150.00	150.00
02	REAR BUMPER TOW COVER	1	12.00	12.00
03	LUMP SUM REPAIR	1	988.00	988.00

<b>TOTAL AMOUNT</b>	SGD	1,150.00
<b>ADD 8% GST</b>	SGD	92.00
<b>NET AMOUNT PAYABLE</b>	SGD	1,242.00

Invoice No.: 93963482    Net Payable: 1,242.00    Payment Due 18.06.2023

Cheque should be crossed and made payable to 'ComfortDelGro Engineering Pte Ltd'



#### PayNow

1. Open your mobile banking app
2. Select 'Scan and Pay'
3. Key in invoice amount
4. Under transaction description, key in the tax invoice number

#### Bank Account Details

Account: ComfortDelGro Engineering Pte Ltd  
Bank: DBS Bank Ltd  
Account No.: 001-069544-4

#### Terms & Conditions:

- \* Customers shall inspect their vehicles upon collection and advise the company of any complaints before leaving the workshop. Otherwise, the vehicle(s) will be deemed to have been accepted in good order.
- \* Customer shall check this invoice upon receipt and advise the company of any errors or discrepancies before payment is made.
- \* Interest of 1% per month will be charged on a day-to-day basis on the amount due and owing to the company by the payment due date.

INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SMC7333Z

Date of Accident

24/03/2023 📅

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **Lonpac Insurance Bhd**

Period of Insurance ..... **25/07/2022 - 24/07/2023**

Requested By ..... **Huang Xiao Yan (COMFORTDEL...**

Requested Date ..... **05/04/2023 12:14**

**Payment details**

Request Amount: **S\$1.85**

GST Amount: **S\$0.15**

Total Amount Due (GST Inclusive): **S\$2**

**General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**

SML56427

**SKETCH PLAN**

**IMPORTANT NOTICE**

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorized Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation**.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.

**B. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

- (i) processing, handling and/or dealing with my claims, including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(Collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Sketch Plan

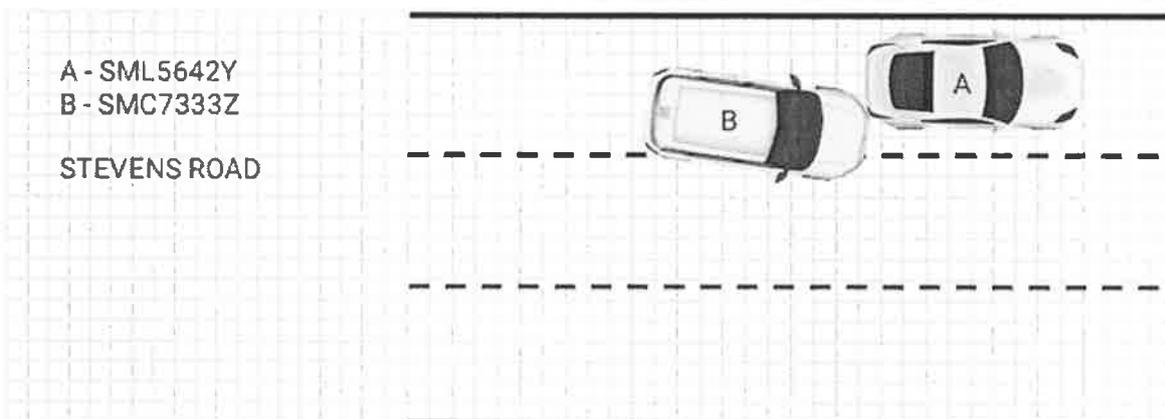
Driver's Signature (If driver is not the policyholder) / Date & Time

24/03/2023 1150HRS

**FLASH ACCIDENT REPORTING OFFICER**  
**FRO SUFIYAN**



Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

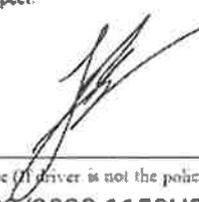
ON 24/03/2023 AT AROUND 0835HRS, I WAS DRIVING VEHICLE A (SML5642Y) ALONG STEVENS ROAD AND WAS INVOLVED IN A MINOR ACCIDENT WITH VEHICLE B (SMC7333Z).

WHILE STATIONARY DUE TO TRAFFIC CONJESTION, VEHICLE B REAR ENDED VEHICLE A. NOBODY WAS INJURED AND NO OTHER VEHICLES INVOLVED.

**Declaration**

I/We declare the foregoing particulars are true in every respect.

\_\_\_\_\_  
Policyholder's Signature / Date &  
Time

  
\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date &  
Time 24/03/2023 1150HRS

**FLASH ACCIDENT  
REPORTING OFFICER  
FRO SUFIYAN**



\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

1877

Leona  
sem out

### Register New Vehicle (Acknowledgement)

#### Vehicle Particulars

Vehicle No.:	SML5642Y	Vehicle Scheme:	Normal
Vehicle Type:	Z10 - Private Hire (Chauffeur) Motor Car		
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	TOYOTA	Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Chassis No.:	JTDKB3FU103081023	Engine No.:	2ZR2C23856
Motor No.:	1NM2C23856	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	4
Engine Capacity:	1798 cc	Power Rating:	53.0 kW
Maximum Power Output:	90.0 kW ( 120 bhp )		
Unladen Weight:	1375 kg	Maximum Laden Weight:	1790 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	27 May 2019	Original Registration Date:	27 May 2019
Manufacturing Year:	2018	Open Market Value:	\$26,605.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$9,623.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$6,605.00 (140%)
Actual ARF Paid:	\$19,247.00		

#### Owner Particulars

Owner Name: COMFORTDELGRO RENT-A-CAR PTE. LTD.  
 Owner ID Type: Company  
 Owner ID: 198105775H  
 Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes  
 Registered Block/House No.: 205  
 Registered Street Name: BRADDELL ROAD  
 Registered Unit No.: -  
 Registered Building Name: -  
 Registered Postal Code: 579701  
 COE No. / Expiry Date: 2019040103000693W / 26 May 2029  
 COE Bid Category: B - Car above 1600cc or 97kW (130bhp)  
 QP Paid: \$36,961.00

#### Transaction Details

Business Transaction Ref. No.: 20190527093817641938  
 Business Transaction Date: 27 May 2019  
 Business Transaction Time: 09:38:17

#### Message

The above vehicle has been successfully registered.  
 Please note that \$47,404.00 will be deducted from your GIRO account.

OK Save as PDF

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

<b>CERTIFICATE NO.:</b> D18MFL0003414_03		<b>COVER:</b> Comprehensive
<b>1. Index Mark and Registration Number of Vehicle</b>	:	SML5642Y
<b>Chassis No</b>	:	JTDKB3FU103081023
<b>2. Name of Policyholder</b>	:	COMFORTDELGRO RENT-A-CAR PTE LTD
<b>3. Effective date of Insurance</b>	:	01 Jul 2022
<b>4. Expiry date of Insurance</b>	:	30 Jun 2023
<b>5. Persons or Classes of Persons entitled to drive*</b>		
Any person who is driving on the Policyholder's order or with his/their permission. The Hirer.		
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle		
<b>6. Limitations as to use*</b>		
Use for the carriage of passengers in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired		
<b>The Policy does not cover</b>		
(1) Use for racing, pace-making, reliability trial, or speed-testing.		
(2) Use for the carriage of goods (other than samples) in connection with any trade or business.		
(3) Use for any purpose in connection with the Motor Trade.		
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		
<b>Windscreen Excess</b>	:	SGD 100.00
<b>Hire Purchase Company</b>	:	N.A
EXCESS : AS PER POLICY SCHEDULE.		
POLICY DOES NOT COVER ANY DRIVER WHO IS BELOW 22 YEARS OLD OR WITH LESS THAN 1½ YEARS DRIVING EXPERIENCE. THIS EXCLUSION SHALL NOT APPLY TO EMPLOYEES OF COMFORTDELGRO RENT-A-CAR PTE. LTD.		
PRIVATE HIRE SERVICE (USE FOR HIRE & REWARD) - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE ONLY		
FOR SOCIAL, DOMESTIC & LEISURE PURPOSES ONLY - GEOGRAPHICAL AREA: WITHIN SINGAPORE, WEST MALAYSIA AND THAT PART OF THAILAND WITHIN 50 MILES OF THE BORDER BETWEEN THAILAND AND WEST MALAYSIA.		
I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).		
<b>Agent/Broker</b>	:	B000018/COMFORTDELGRO INSURANCE BROKERS PTE LTD
<b>Date of Issue</b>	:	23/06/2022 17:00:47
<b>MZ406 - Hire Car (U/G)</b>		<b>For India International Insurance Pte Ltd</b>
		
		Authorised Signatory

# COMFORTDELGRO ENGINEERING PTE LTD

A member of COMFORTDELGRO

## POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SML 58424 and (Third Party's Vehicle No.)  
SML 7333 Z on 24/3/13 along Stevens Road

Policy Nos: 018MFL000341403

BY THIS POWER OF ATTORNEY, \*I/We, ComfortDelGro Rent A Car Pte Ltd \*NRIC/Passport  
No. \_\_\_\_\_ (Address)\* \_\_\_\_\_

\_\_\_\_\_ a company

incorporate in Singapore and having its registered office at (Address)\* \_\_\_\_\_

\_\_\_\_\_ owner of Vehicle Registered No. SML 58424

\_\_\_\_\_ hereby irrevocably appoint ComfortDelGro Engineering Pte Ltd (CDGE), a  
company incorporated in Singapore and having its registered office at \_\_\_\_\_

its agents or any person authorized by CDGE to be \*my/our Attorney and in \*my/our name(s) and on \*my/our behalf  
to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which \*I/we may have against the other \*party/parties to the Accident and under the insurance \*policy/policies taken up by such \*party/parties or alternatively under Insurance Policy No. \_\_\_\_\_ taken up by \*me/us in respect of the cost of repairs, loss of use and at all other costs and expenses, etc. suffered by \*me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on \*my/our behalf as \*my/our Attorney **shall in his absolute discretion, deem fit.**
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of ComfortDelGro Engineering Pte Ltd, CDGE and to give a valid receipt and discharge therefor.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of CDGE.**

\*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on \*my/our behalf by the Attorney, its agents or any person authorized by CDGE in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by \*me/us in \*my/our own proper person(s) and \*I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

\*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

\*I/We further confirm that the acceptance by CDGE of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

\*IN WITNESS WHEREOF. \*I/We have hereunto to set \*my/our hand and seal this day \_\_\_\_\_ of the month of \_\_\_\_\_, Year Two Thousand ----- (20\_\_\_)

Signed, Sealed & Delivered By

Customers Name:  
NRIC No.:  
Co's rubber Stamp

delete as appropriate.

File