

Our Ref: CT0523/SH 6652L/KS(st)  
Date: 13.07.2023

ALLIANZ INSURANCE SINGAPORE PTE LTD  
79 ROBINSON ROAD #09-01  
Singapore 068897

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 09.05.2023 INVOLVING SH 6652L & SMD 762J ALONG SHEARES AVE**

We are the authorised repair workshop for Comfort Transportation Pte Ltd , the owner of vehicle No SH 6652L, which was involved in the captioned accident with your insured vehicle No SMD 762J.

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\$	3,416.09
2. Loss of Rental	5 days x S\$ 127.66	S\$	638.30
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]	<b>Total Claims</b>	<b>S\$</b>	<b>4,456.39</b>
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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

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

**COMFORTDELGRO**

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING  
ALONG****TOYOTA PRIUS SH6652L , SMD762J  
SHEARES AVE****ON 09-May-23 09:40**

I / We

**CHNG JOO SUM**

(Hirer) NRIC No.:

**SXXXX458C**

and/or

(Relief) NRIC No.:

**SXXXX458C**

Taxi Number

**SH6652L**

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

**09-May-2023**

Name of Hirer

**CHNG JOO SUM**

Hirer NRIC

**SXXXX458C**

Signature :



Address

**250 BANGKIT ROAD #05-358  
670250**

Contact No.

**98211775**

GST REG. NO. M2-8921817-3

**TAX INVOICE**

COMPANY REG. NO.: 199506048W  
Page: 1

8010002

Company ALLIANZ INSURANCE SINGAPORE PTE LTD

79 ROBINSON ROAD #09-01  
SINGAPORE SG 068897

CONTACT NO: 63953857

VEHICLE NO  
SH 6652L

MAKE  
TOYOTA

MODEL  
PRIUS HYBRID(G4A)

DATE OF REG  
28.07.2022

CHASSIS CODE  
JTDKB3FU603096875

INV. NO/DATE  
94277618 05.07.2023

JOB NO.  
305554295

ODOMETER READING

DATE/TIME IN  
09.05.2023 11:25

Description : 3P 09.05.2023/C

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0302-2534	COVER FRONT BUMPER#	1	591.75	25.00	443.81
0002	04-01-0302-2267	BUMPER PIECE	10	2.20	25.00	16.50
0003	04-01-0302-2752	COVER FRONT BUMPER HOLE RH	1	28.38	25.00	21.28
0004	04-01-0302-2747	UNIT HEADLAMP RH#	1	2,735.28	25.00	2,051.46
SUB-TOTAL			:			2,533.05

**JOB NATURE**

0001	PB	PANEL BEATING-SH 6652L-TP	350.00	350.00
0002	SP	SPRAYPAINT CHARGE	250.00	250.00
0003	17-01	CHECK ALL LIGHTING	30.00	30.00

WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OF OR DAMAGE TO OTHER PROPERTY BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED BY OWNERS ONLY.

CUSTOMERS SHALL INSPECT THE VEHICLE IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE 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 DUE DATE FOR PAYMENT OF RECEIPT).

PLEASE EXAMINE THE 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.
8010002	94277618	3,416.09	

Kindly note that no receipt shall be issued unless requested.

**CUSTOMER'S COPY**

GST REG. NO. M2-8921817-3

**TAX INVOICE**

COMPANY REG. NO.: 199506048W  
Page: 2

8010002

Company ALLIANZ INSURANCE SINGAPORE PTE LTD

79 ROBINSON ROAD #09-01  
SINGAPORE SG 068897

CONTACT NO: 63953857

**VEHICLE NO**  
SH 6652L

**MAKE**  
TOYOTA

**MODEL**  
PRIUS HYBRID(G4A)

**DATE OF REG**  
28.07.2022

**CHASSIS CODE**  
JTDKB3FU603096875

**INV. NO/DATE**  
94277618 05.07.2023

**JOB NO.**  
305554295

**ODOMETER READING**

**DATE/TIME IN**  
09.05.2023 11:25

S/No	Part No.	Qty	Unit Price	%Disc	Net
SUB-TOTAL					630.00

Items total	3,163.05
Add GST @ 8.000 %	253.04
Invoice amount	3,416.09

Issued by : CHEWBEELENG 05.07.2023 09:12:33  
Repair type : CLS0/57/57  
Payment Type/Term: /Credit 30 days

1) WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARE OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED OWNERS' RISK  
2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE VEHICLES 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 DEFAYT  
4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCY WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd

Head Office:  
205 Braddell Road  
Singapore 579701

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010002	94277618	3,416.09	

Kindly note that no receipt shall be issued unless requested.

**CUSTOMER'S COPY**

Our Ref: CT23050120

Date: 04 July 2023



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      09/05/2023    @   09:40 hrs  
ALONG                                SHEARES AVE  
INVOLVING                         SMD762J

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 **SH6652L** (the "Taxi"). The Taxi was hired to **CHNG JOO SUM IC NO SXXXX458C** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$127.66** per day (inclusive of GST).

Please be advised that the Taxi was insured with **HSBC Life (Singapore) 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

Fleet Insurance Team  
Asset Management

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


## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SMD762J

Date of Accident

09/05/2023 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... Allianz Insurance Singapore P...

Period of Insurance ..... 01/08/2022 - 31/07/2023

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

Requested Date ..... 09/05/2023 12:41

## 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**

SH 6652 L



