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Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1710-238

Your Ref : SGX1030Y

Date : 03.April 2018

AXA INSURANCE S PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHD9924J AND SGX1030Y ON 24/10/17 11:40 AM ALONG THOMSON PLAZA

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	7,543.50
2.	Loss of Rental for ____ days @ \$_____ per day	\$	154.78
3.	Loss of Income for ____ days @ \$_____ per day	\$	100.00
4.	LTA Search Fee	\$	5.35
5.	Survey Fee	\$	0.00
	Total	\$	7,803.63

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Certificate of Insurance

Original final repair bill

Rental rate and mileage records

Authorization To Act

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)