

Our Ref : T 1119 / SHC1042L /WT/CK(st)

Your Ref :

Date : 11-Dec-19

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Flr  
Singapore 508969ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

Workshops

Braddell  
205 Braddell Road  
Singapore 579701Loyang  
59 Loyang Drive  
Singapore 508969Sin Ming  
383 Sin Ming Drive  
Singapore 575717Pandan  
45 Pandan Road  
Singapore 609286Ubi  
320 Ubi Road 3  
Singapore 408649Senoko  
24 Senoko Loop  
Singapore 758156Sungei Kadut  
7 Sungei Kadut Way  
Singapore 728791Yishun  
501 Yishun Industrial Park A  
Singapore 768732**CHINA TAIPING INSURANCE CO LTD****3 ANSON ROAD****#16-00 SPRINGLEAF TOWER****SINGAPORE 079909****SUPERCED****Attn : Motor Claims Department****WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC1042L YOUR INSURED SJN5949M  
AND OTHER ON 05.11.19**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHC1042L which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving SJN5949M we are submitting these claims for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair	\$ 7,977.66
6	14 days Loss of Rental @ \$ 125.40 per day	\$ 1,755.60
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 9,740.75

**HIRER'S CLAIM**

7	14 days Loss of Income @ \$ 80.00 per days	\$ 1,120.00
Total Claims :		\$ 10,860.75

We enclose herewith the following documents to support the claims: -

- a) Original repair bill :
- b) LTA search slip/s of : SJN5949M
- c) GIA / Police report/s of : SHC1042L
- d) Letter of authority from owner / hirer / operator
  - ( ) Traffic Compound ( ) Towing/Medical bill/receipts ( ) Certificate of Insurance
  - ( ) Tow Fee ( x ) Downtime/Mileage record ( x ) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said 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 faithfully  
Catherine Koh

CDGE Claims Department

Tel : 6214 8733 Fax : 6214 1843 Email : catherinekoh@cdge.com.sg

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