

Our Ref : T 0720 / SHC1150H /KS(st)
Your Ref: _____
Date : 21-Jul-2020

COMFORTDELGRO ENGINEERING

AIG ASIA PACIFIC INSURANCE PTE LTD
AIG Building

78 Shenton Way

#07-16

Singapore 079120

WITHOUT PREJUDICE

Attn : Motor Claims Department (Ms Norsiah)

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHC1150H YOUR INSURED SMR8822T
AND OTHER _____ ON 16-Jul-2020

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No SHC1150H 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 : SMR8822T we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	973.56
2	2 days Loss of Rental @ \$ 125.40 per day	\$	250.80
3	Survey Report Fees (<i>Surveyed by M/s LKK</i>)	\$	-
4	GIA / LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing Fee	\$	-
		\$	1,231.85

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$	160.00
	Total Claims :	\$	1,391.85

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

- a) Original repair bill :
- b) LTA search slip/s of : SMR8822T
- c) GIA / Police report/s of : SHC1150H
- d) Letter of authority from owner / hirer / operator
 - () Photograph/s of Accident Scene () Certificate of Insurance
 - () Witness statement/s () PIR (x) Downtime/Mileage record

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

Kazali Hj Selahudin

CDGE Taxi Claims Department

Tel : 6214 8736 Fax : 6214 1843 Email : kazali@cdge.com.sg

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

CDGE Taxi Claims Dept
59 Loyang Drive 4th Floor
Singapore 508969

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimilie +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

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

A member of

COMFORTDELGRO

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING TOYOTA PRIUS SHC1150H , SNR8822T ON 16-Jul-20 06:40
ALONG ALONG LOYANG AVE ROAG

I / We **TAN CHONG BOON** (Hirer) NRIC No.: **SXXXX375B**

and/or (Relief) NRIC No.: **SXXXX375B**

Taxi Number **SHC1150H**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, 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 **16-Jul-2020**

Name of Hirer **TAN CHONG BOON**

Hirer NRIC **SXXXX375B**

Signature :



Address **658A PUNGGOL EAST #17-705**
821658

Contact No. **91259823**