

Our Ref: CT0521/SHC1629U/JW(st)  
Date: 15.06.2021

6089 / NP

**COMFORTDELGRO**  
**ENGINEERING**

AIG ASIA PACIFIC INSURANCE PTE LTD  
78 SHENTON WAY.AIG BUILDING #07-16  
Singapore 079120

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Attn : Motor Claims Department

**Without Prejudice**

Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

Dear Sir/Madam

**ACCIDENT ON 22.05.2021 INVOLVING SHC1629U & SGT 838L ALONG KALLANG ED TWDS CITY (LAVENDER ST)**

**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

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of vehicle No SHC1629U, which was involved in the captioned accident with your insured vehicle No SGT 838L.

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\$	3,798.50
2. Loss of Rental	7 days x S\$ 125.40	S\$	877.80
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	7 days x S\$ 80.00	S\$	560.00
2. Others		S\$	0.00

[E&OE] **Total Claims** S\$ **5,238.30**

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
[X] 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

Jim Wong

CDGE Claims Department

DID: 62148374

FAX: 62141843

Email: jimwong@cdge.com.sg

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

A member of

**COMFORTDELGRO**