

Our Ref: CT0822/SHC1151E/KS(st)  
Date: 13.10.2022

LONPAC INSURANCE BERHAD  
300 BEACH ROAD #17-04/07  
Singapore 199555

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Attn : Motor Claims Department

**Without Prejudice**

Mainline +65 6383 6280  
Facsimile +65 6280 9755

Dear Sir/Madam

www.cdge.com.sg

Company Registration No: 199506048W

**ACCIDENT ON 09.08.2022 INVOLVING SHC1151E & YP 9162B ALONG KPE TWDS BARTLEY RD EAST**

**Workshops**

We are the authorised repair workshop for Comfort Transportation Pte Ltd , the owner of vehicle No SHC1151E, which was involved in the captioned accident with your insured vehicle No YP 9162B.

**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

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.

**Ubi**  
320 Ubi Road 3  
Singapore 408649

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:

**Sungei Kadut**  
7 Sungei Kadut Way  
Singapore 728791

**Taxi Owner's Claim :**

1. Cost of Repairs		S\$	1,605.00
2. Loss of Rental	3 days x S\$ 125.40	S\$	376.20
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	3 days x S\$ 80.00	S\$	240.00
2. Others		S\$	0.00

[E&OE] **Total Claims** S\$ **2,223.20**

A copy each of the following supporting documents marked [X] is enclosed:

- |                                     |  |                                     |   |
|-------------------------------------|--|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Original Repair Bill   | <input checked="" type="checkbox"/> | Letter of Authority from Owner/Hirer/Operator |
| <input checked="" type="checkbox"/> | GIA/Police Report(s)   | <input checked="" type="checkbox"/> | Rental Rate Letter                            |
| <input checked="" type="checkbox"/> | LTA/GIA Search Slip(s)   | <input checked="" type="checkbox"/> | Downtime/Mileage Record                       |
| <input type="checkbox"/>            | Survey Report / Bill   | <input type="checkbox"/>            | Witness Statement / Accident Scene Photo(s)   |
| <input type="checkbox"/>            | Driver's IC/DL/VL / Road Tax / Log Card / Certificate of Insurance |                                     |   |
| <input type="checkbox"/>            | 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