

Your Ref:

Our Ref:

3 July 2014

[Name]  
[Address]  
[Address]  
Singapore [Code]

Claims Control Tel: 6383 7953  
Fax: 6383 7626

Dear

**ACCIDENT INVOLVING SBS** \_\_\_\_\_  
**ALONG** \_\_\_\_\_ **ON** \_\_\_\_\_

We refer to the above matter.

We have investigated into the case and concluded that our Bus Captain did not cause the accident.

[Relate Facts]

We regret to inform you that we are unable to pay the claim.

Yours faithfully,

[Name]  
[Designation]  
Claims Department

Enc

*We are committed to excellence. For our continual improvement, please contact Ms Tracy Tan at [tracytan@sbstransit.com.sg](mailto:tracytan@sbstransit.com.sg) if you have any suggestions or have yet to receive a response to your issue. We welcome your feedback.*