

Your Ref:

Our Ref:

3 July 2014

India International Insurance Pte Ltd
64 Cecil Street #04/#05
IOB Building
Singapore 049711

Attn: Mr P K Modi

DID: 6383 xxxx
Fax: 6383 7626

Dear Sir/Mdm

ACCIDENT INVOLVING SBS _____
ALONG _____ ON _____

We have settled the above matter as follows:

No	Claimant	Paid to	Amount	GST	Net excl GST
A	Chithra D/o Rethinam Inv 9228433	Ang Mo Kio - Thye Hua Kwan Hospital Ltd	6,336.06	414.51	5,921.55
B	Chithra D/o Rethinam Inv 1211442486J	Tan Tock Seng Hospital Pte Ltd	2,429.93	163.86	2,266.07
C	Debit note W0382497	India International Insurance Pte Ltd	200.00		200.00
D	Debit note W0383534	India International Insurance Pte Ltd	90.00		90.00
E	Debit note W0384415	India International Insurance Pte Ltd	4,000.00		4,000.00
F	Debit note W0387081	India International Insurance Pte Ltd	10,710.00		10,710.00
		Total	23,765.99	578.37	23,187.62
		Policy Excess			15,000.00
		Amount to be reimbursed			8,187.62

Kindly reimburse us \$8,187.62 for payments made by us to claimant above the excess sum.

We attach the relevant documents for your perusal.

Yours faithfully,

Officer
Designation
Claims Department

* Amounts stated are less GST where applicable

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

Please direct all correspondence to Claims Department at 205 Braddell Road, East Wing Level 2, Singapore 579701, facsimile number 6383 7626.