DISCHARGE RECEIPT

CLAIM REFERENCE

: D24007461MFCT/CTPL/CL

ACCIDENT DATE

: 24/08/2024

ACCIDENT LOCATION

: JALAN TOA PAYOH

INSURED

: COMFORT TRANSPORTATION PTE LTD

INSURED DRIVER

: KUA HUI LAM

INSURED VEHICLE

: SHA3292D

INVOLVED PARTY

: SLN8665M

SETTLEMENT SUM

: \$5,100.00

I/We, the undernoted CLAIMANT being the person/entity entitled to receive the compensation in relation to the accident, hereby agree to accept the SETTLEMENT SUM as full and final settlement of all claims for damages, costs & disbursements arising out of the ACCIDENT, and I/WE also agree that the said settlement sum:

- 1. is paid without admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and/or its INSURED DRIVER in respect of the said loss and for damage whether now or hereafter to become manifest,
- is accepted by me/us to the intent that the said MS First Capital Insurance Limited and /or its INSURED and/or its INSURED DRIVER be absolutely and finally discharged from all claims whatsoever which I/WE now or hereafter may have ansing out of or connected with or traceable to the said accident.

I/WE acknowledge that this DISCHARGE RECEIPT is not to be construed as an admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and /or its INSURED DRIVER and it shall not be used as evidence in any claims or actions which may be made against them or any of them.

CLAIMANT:

Deng

Shu

MIM

Signature and Date:

CITY AUTO PTE LTD

WITNESS: Vrom Ca

Law

Blk | Sin Ming Road Signature and Date : #01-58/30 Sin Ming Ind Est Fisher State | Fax: 6453 7944