MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSNA00154292302 Claim No : SNM24D2O5974/SLJ489D/CO2/LEWLC

Claimant : CHAN JINGZHONG

Amount : S\$4,559.18

SINGAPORE DOLLARS FOUR THOUSAND FIVE HUNDRED FIFTY-NINE AND

CENTS EIGHTEEN ONLY

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SLR6353E Insured Vehicle No. : SLJ489D

: 24/10/2024 Place of Accident : LORNIE HIGHWAY

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

: PHUA KIM PENG Insured Name Driver Name : PHUA KIM PENG

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1)	General Damages	S\$	
	Cost of Repair/ Excess	S\$	3,597.00
	Loss of Use /Rental/ Earning	S\$	900.00
(4)	GIA/ Police Reports/		
	Investigation Results/Search Fees	S\$	2.18
(5)	Medical Reports/Expenses/Fees	S\$	60.00
(6)	Survey Fees/P.T. Fees/Towing	S\$	
(7)	Cost including Disbursement	S\$	
	TOTAL	. s\$	4,559.18
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Claimant Name:

Signature

NRIC No : <u>S8x36060</u>D

Date : <u>14-12-3034</u>