

VIC

BUS/05/17/7044/KC

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN1615391701

Claim No : SNM17D03224C02/7(cbs)

Claimant : SMRT BUSES LTD

Amount : S\$3,076.19

SINGAPORE DOLLARS THREE THOUSAND SEVENTY SIX AND CENTS
NINETEEN 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. : SMB 1429B ✓

Insured Vehicle No. : SFN 77J ✓

Date of Loss : 30/05/2017 ✓

Place of Accident : JUNCTION OF OUTRAM ROAD AND TIONG BAHRU ROAD

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

Insured Name : MDM HO SIEW LIN

Driver Name : MDM HO SIEW LIN

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\$	
(2) Cost of Repair/Excess	S\$	2,796.19 ✓
(3) Loss of Use/Rental/	S\$	275.00 ✓
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	5.00 ✓
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
TOTAL	S\$	3,076.19 ✓

Claimant Name :

SMRT Buses Ltd



VIC No :

1982022920

Signature :

Date :

10.03.2020

AUTHORISATION TO ACT

I/We, **SMRT BUSES LTD** ("the third party claimant") of **60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705**(address), owner of **SMB 1429B** (vehicle no.) hereby authorize **SMRT AUTOMOTIVE SERVICES PTE LTD** ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. **SMB 1429B** that was damaged pursuant to the accident which occurred on **30/05/2017** (date) along **JUNCTION OF OUTRAM ROAD AND TIONG BAHRU ROAD** (location) involving vehicle no/s **SFN 77J** ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the claimant, **SMRT BUSES LTD**.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 10 (day) of 03 (month) 2020 (year)


Signed by "the third party claimant"
(with chop if applicable)


Signed by "the workshop"
(with chop)