

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN1738581700

Claim No : SNM17D07232C02

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$844.98

DOLLARS EIGHT HUNDRED FORTY FOUR AND CENTS NINETY EIGHT 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. : SHC 8684M

Insured Vehicle No. : SJC 8807C

Date of Loss : 21/12/2017

Place of Accident : TPE > AIRPORT B4 EXIT 1 NEARLAMP POST 29

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 : AIRTRANS

Driver Name : ANG MEI MEI (HONG MEI MEI)

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\$	478.93
(3) Loss of Use /Rental/Earning	S\$	385.56
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	7.49
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
		=====
TOTAL	S\$	844.98
		=====

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Claimant Name : _____

NRIC No : _____

Signature :  _____

Date : 12.6.18

"The contents of this document apply to vehicle damages only
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document"

Please forward your cheque made payable to.
COMFORTDELGRO ENGINEERING PTE LTD