



redefining / insurance

CLAIM REF : S8M000L6  
INSURED : MOHAMAD SHARAN BIN MOHAMAD OSMAN

**DISCHARGE VOUCHER**

We, **COMFORTDELGRO ENGINEERING PTE LTD** confirm that by letter of authorisation dated **16/07/2018**, we are authorised to and do hereby give this discharge for ourselves and on behalf of COMFORT TRANSPORTATION PTE LTD and the Hirer, **FOONG CHIN PANG** of vehicle no. **SH 7644D**.

Now we **COMFORTDELGRO ENGINEERING PTE LTD** for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars **ONE THOUSAND NINE HUNDRED THIRTY** only (**\$S1,930.00**) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no **SLV 1677H** arising out of an accident with **SH 7644D** on **16/07/2018**.
- declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SLV 1677H** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of **COMFORTDELGRO ENGINEERING PTE LTD** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SLV 1677H**.

Dated this 03 day of October 2018

Signed by \_\_\_\_\_

(AUTHORISED SIGNATORY)

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

Company Stamp \_\_\_\_\_

Witness : \_\_\_\_\_

Name : \_\_\_\_\_

I/C No : \_\_\_\_\_

Address : \_\_\_\_\_

CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 LOYANG DRIVE  
SINGAPORE 508969

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

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)  
8 Shenton Way, #24-01 AXA Tower, Singapore 068811  
Customer Centre #B1-01  
Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

"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"