MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN9032401708

Claim No : SNM18D05093

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,560.00

DOLLARS ONE THOUSAND FIVE HUNDRED SIXTY 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 8192R Insured Vehicle No. : SFZ 9902E

Date of Loss

: 24/10/2018

Place of Accident : JURONG WEST AVENUE 4

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

: KANG CHING HUEI

Driver Name

: KANG CHING HUEI

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) Global Sum

\$\$ 1,560.00

-----1,560.00

CLAIMS DEPARTMENT COMFORTDELGRO ENGINEERING PTE LTD

Claimant Name:

59 LOYANG DRIVE SINGAPORE 508969

NRIC No :

*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. COMPORTDELGRO ENGINEERING PTE LTC