## MOTOR CLAIMS DISCHARGE VOUCHER

Policy No: DMPCSN1629291802 Claim No: SNM18D05540C02

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$400.00

DOLLARS FOUR HUNDRED 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  $\frac{1}{2}$ 

sustained by me/us through an accident involving

TAN ENG KHOON

Claimant Vehicle No. : SHA 3924P Insured Vehicle No. : SBE 1188K

Date of Loss : 26/11/2018

Place of Accident : ORCHARD BOULEVARD TURNING ANGULLIA PARK

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 : TAN ENG KHOON
Driver Name : TAN ENG KHOON

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.

Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

"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 LTC