

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN1828191800 Claim No : SNM18D05865C02/8
Claimant : COMFORT TRANSPORTATION PTE LTD
Amount : S\$2,077.87
DOLLARS TWO THOUSAND SEVENTY SEVEN AND CENTS EIGHTY SEVEN 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. : SHA 5383L
Insured Vehicle No. : SKN 648C
Date of Loss : 01/12/2018
Place of Accident : ORANGE GROVE RD TOWARDS ORCHARD RD

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 : G6 AUTOMOBILE
Driver Name : TAN WEI LONG, EDDIE

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.

Table with 2 columns: Description and Amount. Rows include General Damages, Cost of Repair, Loss of Use/Rental/Earning, GIA/Police Reports, Investigation Results/Search Fees, Medical Reports/Expenses, Survey Fees/Towing Fee/Disbursement, and Cost including Disbursement. Total amount is S\$ 2,077.87.

Claimant Name: COMFORT TRANSPORTATION PTE LTD NRIC No :

Signature : [Handwritten Signature]
CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 530859

Date : 1-7-19

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

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.