MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1838921800

Claim No :

Claimant : CITYCAB PTE LTD

: \$\$1,900.00

DOLLARS ONE THOUSAND AND NINE 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 4 disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHA 9150R Insured Vehicle No. : GBJ 241U

Date of Loss : 16/12/2018 Place of Accident : BLOCK 27 JJ

: BLOCK 27 JALAN BESAR HDB DRIVE WAY

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., 1/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

: NORIS ENGINEERING & AIR-CONDITIONING PTE LTD

Driver Name

: ONG PANG GHEE

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

8.5 1,900.00

1,900.00

Claimant Name: CITYCAB PTE LTD

NRIC No :

Signature

CLAIMS DEPARTMENT COMFORTDELISTO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE SUISES

17-19

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

"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