

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN1508411803

Claim No : SNM19D200139C02/5

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$847.99

DOLLARS EIGHT HUNDRED FORTY SEVEN AND CENTS NINETY NINE 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 5736C

Insured Vehicle No. : SKR 3755K

Date of Loss : 25/12/2018

Place of Accident : GOLDEN MILE COMPLEX TAXI STAND TO BEACH 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 : SWEE SENG LEASING PTE LTD

Driver Name : LIN JUNDA

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) General Damages	S\$	
(2) Cost of Repair/ Excess	S\$	428.00
(3) Loss of Use /Rental/ Earning	S\$	412.50
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	7.49
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
TOTAL		847.99

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :


CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Date :

5.8.19

"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 LTD