

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMB1SN1825921800

Claim No : SNM19D200634C02/1

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,246.37

DOLLARS ONE THOUSAND TWO HUNDRED FORTY SIX AND CENTS THIRTY
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. : SHB 6254P

Insured Vehicle No. : PC 4281Z

Date of Loss : 31/01/2019

Place of Accident : PIE SLIP RD X PAYA LEBAR RD TWDS GEYLANG

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 : LONGLIM PTE LTD

Driver Name : XU HAIJUN

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\$	1,016.50
(3) Loss of Use /Rental/Earning	S\$	222.38
(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	S\$	1,246.37
	=====	

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

 19.7.19

Date :

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 LTD