

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN3103171701

Claim No : SNM18D04037/C02

Claimant : SMRT TAXIS PTE LTD

Amount : S\$2,920.59

DOLLARS TWO THOUSAND NINE HUNDRED TWENTY AND CENTS FIFTY-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. : SHB 5318X

Insured Vehicle No. : SJT 1586X

Date of Loss : 19/08/2018

Place of Accident : JOHOR BAHRU CTQ TOWARDS WOODLANDS SINGAPORE

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 : LIM HWEE KIAT

Driver Name : LIM HWEE KIAT

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\$	2,223.51
(3) Loss of Use /Rental/Earning	S\$	690.08
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	7.00
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
TOTAL		S\$ 2,920.59

Claimant Name : _____

NRIC No : 8XXXX2061F

Signature : _____

Date : 7 AUG 2019

