

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMPCSN1429831804

Claim No : SNM19D201208C02/8

Claimant : NICK ANG ZHAN CHENG

Amount : **S\$6,197.45**

SINGAPORE DOLLARS SIX THOUSAND ONE HUNDRED NINETY-SEVEN &
FORTY FIVE CENTS 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. : SJN 2156D

Insured Vehicle No. : SDZ 218E

Date of Loss : 18/03/2019

Place of Accident : KOON SENG ROAD

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 : GOH SIANG LENG

Driver Name : TING TUAN EE

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	S\$	6,197.45
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TOTAL	S\$	6,197.45
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Claimant Name : _____

NRIC No : _____

Signature : _____

Date : _____