

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3010281900

Claim No :

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,130.00

DOLLARS ONE THOUSAND ONE HUNDRED AND THIRTY 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. : SHC 2559G

Insured Vehicle No. : GBB 3845A

Date of Loss : 11/06/2019

Place of Accident : COLLYER QUAY TWDS NICOLL H/WAY

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 : HEYBOX VENDING PTE LTD

Driver Name : ANG WEI HONG

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\$	1,130.00
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TOTAL . . . . .	S\$	1,130.00
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Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

  
CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
89 LOYANG DRIVE  
SINGAPORE 530868

Date :

8.7.19

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

"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"