

## REPAIR DISCHARGE AND SATISFACTION NOTE

CLAIM NO:	DATE/TIME RETURNED: 15/9/19
POLICY NO: 2/19/VP00/103509.	EXCESS: \$4280 W/451
I/We hereby acknowledge having received $S13.3.284$ from the repairer M/S $1$	my/ <del>our_</del> vehicle bearing registration number TRIDENTE AUTOMOBILI PTE LTD that has repaired
to my/ <del>ou</del> r satisfaction and I/ <del>We</del> agree that the cos	
A .	ettlement for such repair invoiced to
Lonpai Insurana Bhd	_ is in full and final discharge of my/our claim in
respect of damages caused to the said vehicle a	as a result of accident/incident that occurred on
(date) $\frac{14/6/2019}{}$ (time	(location)
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In addition, I/We have no further claim on the above repairs in respect thereof.	
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lina	San thanasamy.
Signature of Claimant/ Company/ Stamp	Withersed by Repairer
Name: SHO2 19 FF	TRIDENTE AUTOMOBILI PTE LTD
Name: Teo Kian Hong.  NRIC No: 811031988  Date: 1518/19.	Date: 15/8/19.