## MOTOR CLAIMS DISCHARGE VOUCHER

Policy No: DMCVSN3048181800 Claim No: SNM19D203232/TANKL

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$2,273.84

DOLLARS TWO THOUSAND TWO HUNDRED SEVENTY THREE AND CENTS

EIGHTY FOUR 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. : SHD 6594Y Insured Vehicle No. : GBA 2563A

Date of Loss : 08/07/2019

Place of Accident : APK @ GAMBAS AT NO 7 GAMBAS CRESCENT

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 : MG PAINTING SERVICES PTE LTD

Driver Name : KATHIRVEL SUDHAKAR

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.

Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 508969

Date

Please forward your cheque made payable to.

19-8-19

"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."

## MOTOR CLAIMS DISCHARGE VOUCHER

Policy No: DMCVSN1911451900 Claim No: SNM19D203245/ONGCK

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : \$\$4,989.50

DOLLARS FOUR THOUSAND NINE HUNDRED EIGHTY NINE AND CENTS

FIFTY 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 8486T Insured Vehicle No. : WC 4734B

Date of Loss : 09/07/2019

Place of Accident : BEDOK RESERVOIR CRES NEAR DAMAI PRI SCH

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 : XPLORE ENGINEERS PTE LTD
Driver Name : GOVINDARAJAN SURESHBABU

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\$	4,494.00
(3) (4)			S\$	488.01
	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\$	4,989.50
			====	

Claimant Name: COMFORT TRANSPORTATION PTE LTD NRIC No :

Signature : \_\_\_\_\_\_ 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

: 20.8-19

## MOTOR CLAIMS DISCHARGE VOUCHER

Policy No: DMCVSN3063461800 Claim No: SNM19D203140/ONGCK

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : \$\$2,982.17

DOLLARS TWO THOUSAND NINE HUNDRED EIGHTY TWO AND CENTS

SEVENTEEN 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 8954J Insured Vehicle No. : GBE 2153D

Date of Loss : 04/07/2019

Place of Accident : U TURN JUNCTION UNDER BRADDELL RD FLYOVER

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 : UCOOL SERVICES PTE LTD

Driver Name : WANG FUQIANG

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\$	2,568.00	
(3)	Loss of Use/Rental/Earning	S\$	406.68	
(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\$	2,982.17	
		=====	=========	

Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature

CLA)MS DEPARTMENT ORTDELGRO ENGINEERING PTE LTD

COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969

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

: 20.8-19

"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"