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 |
| | Loss of Use/Rental/Earning GIA/Police Reports/ | | | S\$ | 488.01 |
| | Investigation Results/Search Fee | s | | S\$ | 7.49 |
| 5) | Medical Reports/Expenses | | | S\$ | |
| 5) | 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 : ______ Date : ________

ORTDELGRO 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