MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3055661901 Claim No : SNM19D204662

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : \$\$1,719.83

DOLLARS ONE THOUSAND SEVEN HUNDRED NINETEEN AND CENTS

EIGHTY THREE 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 8397S Insured Vehicle No. : GBG 5165P

Date of Loss : 03/10/2019

Place of Accident : CLEMENTI AVE 5 TWDS AVE 2 INFRONT BLK 346

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 : SUPREME AUSTRALIAN MEATS PTE LTD

Driver Name : ANAND CHANDRAN

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\$	1,391.00
(3)	Loss of Use/Rental/Earning		S\$	321.34
(4)	GIA/Police Reports/			
	Investigation Results/Search Fee	es	S\$	7.49
(5)	Medical Reports/Expenses		S\$	
(6)	Survey Fees/P.T. Fees		S\$	
(7)	Cost including Disbursement		S\$	
	TOTAL		S\$	1,719.83
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Claimant Name: COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature

CLAIMS DEPARTMENT COMFORTDELGRO ENGINEERING FTE LTL 59 LOYANG DRIVE

SINGAPORE 508969

Date

14/11/11

"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 LTS