## SATISFACTION VOUCHER

Name & Address of Insured: Melay Tan C	
Name & Address of Repairers :	
Date & Place of Accident : AllOlog & B	IK457 AMK Ave 10 Open
Policy No: Dupc SU48257018C	Claim No: Can
Vehicle No : 8487895K	Cost of Repairs :
I/We hereby declare that I/We have received from the Vehicle in good running order and repaired to my/our CHINA TAIPING INSURANCE (S) PTE LTD, settling repairers I/We hereby release and discharge the sai liabilities under the aforesaid policy in respect of an acc the above-mentioned date and place.	r entire satisfaction and in consideration of the repair costs stated above with the said id insurers from all further obligations and
I/We agree that by virtue of such payment the said Insuremedies in respect of the damage to the said Motor Vethe Contract of Insurance.	rers are subrogated to all my/our rights and ehicle in accordance with the laws governing
I/We hereby grant the said Insurers the authority to use my/our name to the extent necessary to effectively exercise all or any of such rights and remedies including the right to give discharge and receipts therefor. I/We further agree to furnish the said Insurers with any assistance that they may reasonably require of me/us when exercising such rights and remedies whilst on their part they agree to indemnify me/us against liability for costs charges and expenses arising in connection with any proceedings which they may take in my./our name in the exercise of such rights and remedies.	
REPAIRERS: STORES IN	SURED:- ST3431157-7
Company's Chop & Signature I.C	C. No & Signature/Company's Chop
WITNESS	VITNESS:- Vik Chen Hee
Chan Hoe  Color inga Industries He Ltd  Dit Camel & Signal Life 109 Fax: 6872 1272  Email: clambus yikaseyclecarriage.com.sg	Boy of the Spart from the Lind Boy of the Spart from Control of the Spart from Control of the Spart from the Sp
Address	Address
H/11/19	H/11/69
Date	Date