

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMHCSN3056881900

Claim No : SNM19D205076

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,680.00

DOLLARS ONE THOUSAND SIX HUNDRED AND EIGHTY 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. : SHB 6623H

Insured Vehicle No. : SJR 4735Z

Date of Loss : 25/10/2019

Place of Accident : CENTRAL BLVD TWDSS CROSS ST TOWARDS CHINATOWN

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 : DRIVE AUOMOBILE PTE LTD

Driver Name : LING MIN SING

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.

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(1) Global Sum	S\$ 1,680.00
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TOTAL . . . . .	S\$ 1,680.00
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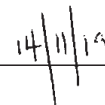
Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

  
CLAIMS DEPARTMENT  
COMFORTDELGRO ENGINEERING PTE LTD  
59 JOYANG DRIVE  
SINGAPORE 508969

Date :



"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