



**CLAIM REF** 

: S9M025D2

INSURED

: MOHAMED FAUZAN BIN RAZALI

## **DISCHARGE VOUCHER**

We/I, <u>KOH KHOON THING</u>, NRIC NO. <u>S8025555A</u>hereby agree to accept the sum of dollars <u>TWO THOUSAND FIVE HUNDRED FIFTY FIVE AND CENTS EIGHTY TWO ONLY (\$\$2,555.82)</u> paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. <u>SFW 1528X</u> as a result of an accident along <u>SLIP RD OF LORONG CHUAN AND BRADDELL RD</u> on <u>29/10/2019</u> which we/I were/was the driver/owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. <u>SLK 2434T</u>.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. **SFW 1528X** in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. **SFW 1528X.** 

Dated this	day of	20 YO
Claimant's Signature	:	
NRIC no./ Company Stamp	: 38072222 B	
Occupation/ Business	:	
Address	: 174 CANBERNA DRIVE #03-12	8(767949)
Telephone No.	:	* AUTOMO
Witness's Name	: LIN SHUJUAN	JE OF WAY
Witness's Signature	:	WIN CENTA
Witness's NRIC No.	: 88581731 H	