

Asher

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

CDGE Claims Dept
59 Loyang Drive 4th Floor
Singapore 508969

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

06 December 2019

M/s LKK Auto Consultants Pte Ltd
Blk 51 Paya Ubi Industrial Park
Ubi Avenue 1 #02-25
Singapore 408933

Attention: Ms Asher Sng

Dear Ms Sng

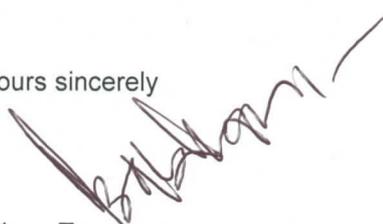
RETURN OF DULY EXECUTED DISCHARGE VOUCHER

We are pleased to enclose the duly executed discharge voucher for the following case:

<u>S/No</u>	<u>Vehicle No</u>	<u>DOA</u>	<u>DV Amount</u>	<u>Ref No</u>
1.	SHA6143G	16/05/2017	S\$6,700.00	CC3/IC217009675/ H1EA3 [ECICS – SGT2203E]

Kindly arrange to let us have your Principal's payment made in favour of **ComfortDelGro Engineering Pte Ltd** within the next **seven (7) days** to conclude this case. Thank You.

Yours sincerely


Aileen Tan
CDGE Claims Department (Loyang)
Tel: 6214 8735 Fax: 6214 1843
Email: aileentan@cdge.com.sg

Enclosure

Workshops

Braddell
205 Braddell Road
Singapore 579701

Loyang
59 Loyang Drive
Singapore 508969

Sin Ming
383 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 609286

Ubi
320 Ubi Road 3
Singapore 408649

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

A member of

COMFORTDELGRO



DISCHARGE VOUCHER

Our claim No. :
Your ref No . : TL0517/SHA6143G/JW(J)
Insured vehicle No. : SGT 2203E
Name of Insured : HARSHA VIRUPAKSHLING YAVAGAL
Name of Insured 's Driver : HARSHA VIRUPAKSHLING YAVAGAL
Date of accident : 16/05/2017
Location of accident : KJE TWDS PIE (LAMP POST 327)
3rd Party Property. : SHA 6143G
Name of Claimant : COMFORT TRANSPORTATION PTE LTD
NRIC No. of Claimant : 199303821R

I/We hereby agree to accept the sum of \$ 6,700.00 from ECICS LIMITED. in full and final settlement of all claims, cost and disbursements arising from personal injury or/and loss or damage to property sustained by me as a result of the accident as detailed above.

I/we acknowledge that this payment is made without admission of liability on the part of the said Insurance Company or their insured or insured's driver as mentioned above.

In consideration of the payment of the above mentioned sum by ECICS LIMITED., I /we declare that I/we have no further claim whatsoever against the said Insurance Company or their insured or insured's driver in respect of the said accident and hereby give full and final discharge. I/we also declare that I/we am/are the person entitled to receive the above compensation and hereby undertake to indemnify ECICS LIMITED. Against any claim made or which may be in respect of this compensation.

I hereby authorized ECICS LIMITED. to pay the settlement sum to : COMFORTDELGRO ENGINEERING PTE LTD

Mode Of Payment : Direct Transfer / PayNow (Corporate Or Individual)

Direct Transfer	
Name Of Payee	COMFORTDELGRO ENGINEERING PTE LTD
Bank Account Number	001-069544-4
Name Of The Bank	The Development Bank of Singapore Limited

PayNow - Individual Payee	
**NRIC Number Or Mobile number	✓

PayNow - Corporate Payee	
** UEN number Or UEN with suffix	✓

"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 enclose supporting documents(i.e: copy of NRIC/Telco bill/ACRA

FOR COMFORTDELGRO ENGINEERING PTE LTD
 on behalf of the taxi owner and taxi hirer
 both by Letter of Authorisation.

Signature of Witness
 Name **CLAIMS DEPARTMENT**
 Address **COMFORTDELGRO ENGINEERING PTE LTD**
59 LOYANG DRIVE
 NRIC No **SINGAPORE 500000**
 Date 06/12/2019

Signature of Claimant
 Name **CLAIMS DEPARTMENT**
 Address **COMFORTDELGRO ENGINEERING PTE LTD**
59 LOYANG DRIVE
 NRIC No **SINGAPORE 500000**
 Date 06/12/2019