

2008-082



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
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Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
Tel: (65) 6507 3848 Fax: (65) 6507 3849
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DISCHARGE RECEIPT

CLAIM REFERENCE : D20003333MFSH
ACCIDENT DATE : 20/08/2020
ACCIDENT LOCATION : CLEMENTI AVENUE 3 TOWARDS CLEMENTI AVENUE 4
INSURED : CITYCAB PTE LTD
INSURED DRIVER : LIM KOK NEE
INSURED VEHICLE : SHB 3513L
INVOLVED PARTY : SHB 7724T
SETTLEMENT SUM : \$7,963.55

I/We, the undernoted CLAIMANT being the person/entity entitled to receive the compensation in relation to the accident, hereby agree to accept the SETTLEMENT SUM as full and final settlement of all claims for damages, costs & disbursements arising out of the ACCIDENT, and I/WE also agree that the said settlement sum:

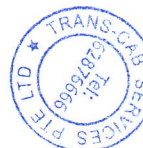
1. is paid without admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and/or its INSURED DRIVER in respect of the said loss and for damage whether now or hereafter to become manifest,

2. is accepted by me/us to the intent that the said MS First Capital Insurance Limited and /or its INSURED and/or its INSURED DRIVER be absolutely and finally discharged from all claims whatsoever which I/WE now or hereafter may have arising out of or connected with or traceable to the said accident.

I/WE acknowledge that this DISCHARGE RECEIPT is not to be construed as an admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and /or its INSURED DRIVER and it shall not be used as evidence in any claims or actions which may be made against them or any of them.

CLAIMANT : **TRANS-CAB SERVICES PTE LTD**

Signature and Date : 



22 MAR 2021

WITNESS : *Amanda Tay*

Signature and Date : *Long* 22/03/21